

## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

## **ELEVATION CERTIFICATE**

O.M.B. No. 3067-0077 Expires December 31, 2005

Important: Read the instructions on pages 1 - 7.

JOB# 85-07-03 SECTION A - PROPERTY OWNER INFORMATION							For Insurance Company Use:
BUILDING OWNER	R'S NAME	.,-			•••		Policy Number
SOUTHLAND CONTRACTING							
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.							Company NAIC Number
6504 BRIDGE WATER WAY (SOUTH TOWER HIBISCUS BY THE BAY)							· ·
CITY STATE ZIP CODE							
PANAMA CITY BEACH FL 32407							
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)							
PART OF NORTH ONE-HALF OF SECTION 28, TOWNSHIP 3 SOUTH, RANGE 15 WEST  BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)							
RESIDENTIAL							
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type):							
( ##° - ##' - ##.##" or ##.\####f")							
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER						B3. S1	ATE
BAY COUNTY 120004			BAY			Fl	
84. MAP AND PANEL			<del></del>	B7. FIRM PANEL			B9. BASE FLOOD ELEVATION(S)
NUMBER	B5. SUFFIX	B6, FIRM INDEX DAT	Ε   Ε	EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S		(Zone AO, use depth of flooding)
12005C0303	G	9/18/02		9/18/02	AE		8 FEET
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.							
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe):							
B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe):							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?							
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)							
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction							
*A new Elevation Certificate will be required when construction of the building is complete.							
C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram							
accurately represents the building, provide a sketch or photograph.)							
C3. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO							
Complete Items C3a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in							
Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of							
Section D or Section G, as appropriate, to document the datum conversion.							
Datum 1929 Conversion/Comments							
Flevation reference mark used USC & GS D183 Does the elevation reference mark used annear on the FIRM2 XI Yes XI No.							
o a) Top of bottom floor (including basement or enclosure)				12.00 ft.			P.S.M. 4927
				21.50 ft.	Seal,		4
o b) Top of next higher floor				21.00 fc N/A	sed te		9/6/05
<ul> <li>o c) Bottom of lowest horizontal structural member (V zones only)</li> <li>o d) Attached garage (top of slab)</li> </ul>				Embossed W/N V/N A/N			
		N/A	an Cin				
o e) Lowest elevation of machinery and/or equipment				N/A	License Number, Signature,		/ ///
servicing the building (Describe in a Comments area)				11.50 ft.	umi	/	
o f) Lowest adjacent (finished) grade (LAG)					z Si		//
o g) Highest adjacent (finished) grade (HAG)				11.00 ft.	Sell	1	08/12/05
o i) Total area of all permanent openings (flood vents) in C3.h <u>N/A</u> sq. in. (sq. cm)							
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION							
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.							
I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.							
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.							
CERTIFIER'S NAME MICHAEL W. MONGOVEN LICENSE NUMBER P.S.M. 4927							
TITLE ODEOLOGICA							
TITLE PRESIDENTCOMPANY NAME BRUNER-MONGOVEN LAND SURVEYING, INC.							
ADDRESS	$\overline{}$			CITY	STAT		ZIP CODE
7603 MCELVEY ROAD	´			PANAMA CITY BEA		_	32408
SIGNATURE					DATE TELEPHONE		
08/12/05 850.235.2293							
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