FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

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

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Important: Read the instructions on pages 1 - 7. For Insurance Company Use: SECTION A - PROPERTY OWNER INFORMATION Policy Number BUILDING OWNER'S NAME DAVID M. GAINER Company NAIC Number BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 7326 TALMADGE AVENUE ZIP CODE CITY STATE 32409 SOUTHPORT FL PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOTS25 & 27, BLOCK 105, SOUTHPORT PLAT TAX PARCEL NUMBER: 08385-010-000 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): USGS Quad Map □ NAD 1927 □ NAD 1983 Other: (##° - ##' - ##.##" or ##.####") SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME** B3. STATE Bay County (Unincorporated Areas) 120004 Bay FL **B4. MAP AND PANEL B7. FIRM PANEL** B9. BASE FLOOD ELEVATION(S) **B5. SUFFIX B6. FIRM INDEX DATE** EFFECTIVE/REVISED DATE B8. FLOOD ZONE(S) (Zone AO, use depth of flooding) NUMBER 12005C 0220 09/18/02 09/18/02 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. ☑ FIRM Community Determined Other (Describe): ☐ FIS Profile B11. Indicate the elevation datum used for the BFE in B9: X NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe): B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?

Yes

No Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under 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 C3.-a-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 NGVD 1929 Conversion/Comments Elevation reference mark used 220-1 Does the elevation reference mark used appear on the FIRM? X Yes No o a) Top of bottom floor (including basement or enclosure) 9. 81 ft.(m) Seal, o b) Top of next higher floor N/A . _ft(m) Embossed S and Date o c) Bottom of lowest horizontal structural member (V zones only) <u>N/A</u>. __ft(m) o d) Attached garage (top of slab) 9. 47 ft.(m) o e) Lowest elevation of machinery and/or equipment e Number, l Signature, servicing the building (Describe in a Comments area) 9.64 ft.(m) o f) Lowest adjacent (finished) grade (LAG) 8.6ft.(m) icense o g) Highest adjacent (finished) grade (HAG) 9. 4ft.(m) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade N/A 2-13-06 o i) Total area of all permanent openings (flood vents) in C3.h N/A 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 Hulon E. Walsingham LICENSE NUMBER 3257 TITLE Registered Land Surveyor COMPANY NAME County Wide Surveying, Inc. LB 3929 **ADDRESS** CITY STATE ZIP CODE 958 Jenks Avenue Panama City FL 32401 DATE TELEPHONE

FEMA Form 81-31, January 200

See reverse side for continuation.

Replaces all previous editions

(850) 769-0345



2/13/06