FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

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

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.
SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: Company NAIC Number Policy Number

*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 B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☑ SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) B11. Indicate the elevation datum used for the BFE in B9:

✓ NGVD 1929 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9

☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ C3. Elevations -C1. Building elevations are based on:
Construction Drawings* B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER BAY COUNTY 12004 BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO 5029 INDIAN BLUFF DRIVE LATITUDE/LONGITUDE (OPTIONAL) BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 28, INDIAN BLUFF BUILDING OWNER'S NAME
GREGORY AND DAWN HILTY 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 WILLIAM E. KITCHEN YOUNGSTOWN This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. □ b) Top of next higher floor
 □ c) Bottom of lowest horizontal structural member (V zones only)
 □ d) Attached garage (top of slab)
 □ e) Lowest elevation of machinery and/or equipment Section D or Section G, as appropriate, to document the datum conversion.

Datum 46 VO Conversion/Comments

Elevation reference mark used 1 V 1 Does the elevation reference mark used appear on the FIRM? 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 accurately represents the building, provide a sketch or photograph.) □ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade <u>WA</u>
 □ i) Total area of all permanent openings (flood vents) in C3.h <u>WA</u> sq. in. (sq. cm) a) Top of bottom floor (including basement or enclosure) Section B, convert the datum to that used for the BFE. g) Highest adjacent (finished) grade (HAG) f) Lowest adjacent (finished) grade (LAG) B4. MAP AND PANEL PROFESSIONAL SURVEYOR & MAPPER 12005C0230 servicing the building (Describe in a Comments area) Zones A1,430, AE, AH, A (with BFE), VE, V1,V30, V (with BFE), AR, AR/A, AR/AE, AR/A1,430, AR/AH, AR/AO BS. SUFFIX G SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B6. FIRM INDEX DATE 9/18/02 HORIZONTAL DATUM:

NAD 1927 NAD 1983 B2. COUNTY NAME BAY ☐ Building Under Construction* B7. FIRM PANEL EFFECTIVE/REVISED DATE 18.8ft(m) 18.2ft(m) 18.8ft(m) 18. 6ft(m) 19. Oft(m) 9/18/02 COMPANY NAME WILLIAM E. KITCHEN, SURVEYOR & MAPPER, P.A. #(m) ☐ NAVD 1988 Other (Describe): □ Yes ⊠ No M Finished Construction SOURCE LICENSE NUMBER PLS 4776 Other (Describe): B8. FLOOD ZONE(S) ☐ Yes ⊠ No ☐ GPS (Type):
☐ USGS Quad Map License Number, Embossed Seal, Signature, and Date ZIP CODE 32466 B3. STATE FL Designation Date B9. BASE FLOOD ELEVATION(S)
(Zone AO, use depth of flooding)
8 Other:

ADDRESS 9700 STAUBER LANE SIGNATURE CITY YOUNGSTOWN DATE TELEPHONE 850-722-6792 STATE