ULS DEPARTMENT OF HOMELAND SECURITY **ELEVATION CERTIFICATE** OMB No. 1660-0008 Expires February 28, 2009 Federal Emergency Management Agency National Flood Insurance Program Important: Read the instructions on pages 1-8. 15051245 SECTION A - PROPERTY INFORMATION For Insurance Company Use A1. Building Owner's Name Nikolaos J. Patronis Policy Number A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Company NAIC Number 8005 North Lagoon Drive City Panama City Beach State FL ZIP Code 32408 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax Parcel Number 30166-046-015 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat. 30d09'49.201" _ Long. - 85d46'26,833" Horizontal Datum: ☐NAD 1927 **⊠NAD 1983** A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 1 A8. For a building with a crawl space or enclosure(s), provide: A9. For a building with an attached garage, provide: a) Square footage of crawl space or enclosure(s) N/A _ sq ft a) Square footage of attached garage b) No. of permanent flood openings in the crawl space or b) No. of permanent flood openings in the attached garage enclosure(s) walls within 1.0 foot above adjacent grade N/A walls within 1.0 foot above adjacent grade 0 c) Total net area of flood openings in A8.b _ sq in c) Total net area of flood openings in A9.b SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name B3. State Bay County 120004 Bay County Independent City FL B4, Map/Panel Number B5. Suffix **B7. FIRM Panel** B6. FIRM Index B8. Flood B9. Base Flood Elevation(s) (Zone 12005C0317 G Date Effective/Revised Date Zone(s) AO, use base flood depth) 9-18-02 9-18-02 ΑE B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. ☐FIS Profile ⊠FIRM ☐Community Determined ☐Other (Describe) B11. Indicate elevation datum used for BFE in Item 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)? ⊠No Designation Date □CBRS □OPA SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: ☐Building Under Construction* ☐Construction Drawings* *A new Elevation Certificate will be required when construction of the building is complete. C2. 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 C2.a-g below according to the building diagram specified in Item A7. Benchmark Utilized Q-182 Vertical Datum NGVD 1929 Conversion/Comments Check the measurement used. Top of bottom floor (including basement, crawl space, or enclosure floor) 10.9 ☐ feet ☐ meters (Puerto Rico only) Top of the next higher floor b) __25.1 ☑ feet ☐ meters (Puerto Rico only) Bottom of the lowest horizontal structural member (V Zones only) c) ☐ feet ☐ meters (Puerto Rico only) <u>N</u>/A. Attached garage (top of slab) ☑ feet ☐ meters (Puerto Rico only) 8.5 Lowest elevation of machinery or equipment servicing the building 9.1 ☑ feet ☐ meters (Puerto Rico only) (Describe type of equipment in Comments) Lowest adjacent (finished) grade (LAG) f) 8.1

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

9.9

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 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.

Highest adjacent (finished) grade (HAG)

FEMA form 81-31, February 2006

Check here if comments are provided on back of form. Certifier's Name License Number Linda Marie Riggins 5934 Title Company Name Prof. Surveyor and Mapper A. T. Survey, Inc. Address City State ZIP Code 2401 Frankford Avenue Panama City 32405 Signature 1-25-07 Date Telephone 1-26-07 (850) 763-6471

See Reverse side for continuation

1-26-07 LS5934

☑ feet ☐ meters (Puerto Rico only)

Replaces all previous editions

PLACE LICENSE

NUMBER, SEAL.

SIGNATURE, AND

DATE HERE

Sink March 1905

IMPORTANT: In these spaces, c				7.967	For Insurance Company U
Building Street Address (including Apt., 8005 North Lagoon Drive	Unit, Suite, and/or Bldg. No.) o	or P.O. Route and Box No).		Policy Number
City Panama City Beach	State FL	ZIP Co 32408	de	Eventual Principles	Company NAIC Number
SECTION	D - SURVEYOR, ENGINEE	R, OR ARCHITECT C	ERTIF	ICATION (CONT	INUED)
Copy both sides of this Elevation Certifi	cate for (1) community official,	(2) insurance agent/comp	oany, an	d (3) building owne	ЭГ.
Comments The lowest exterior air cond	itioner elevation is 9.1 feet.				· · · · · · · · · · · · · · · · · · ·
Cignoture		Date			
Signature y Marie	Nixano 152500	1-26-07			□ Check here if attachments □
SECTION E - BUILDING ELEV	ATION INFORMATION (SI	URVEY NOT REQUIR	ED) FO	R ZONE AO AN	D ZONE A (WITHOUT BFE)
	rade, if available. Check the methe following and check the appropriate (LAG). Desement, crawl space, or enclopesement, crawl space, or enclopesement flood openings provide the building is method for equipment servicing the building	reasurement used. In Purpropriate boxes to show vote to show vote to show vote the propriate boxes to show vote the propriate boxes to show vote the propriate that the propriate the propriate that the propriate the propriate that the propri	erto Ricc whether I feet feet and/or 9 along leow the feet d in acc nation in	only, enter meters about the elevation is abo	s. ove or below the highest adjacent bove or
The property owner or owner's authoriz					
or Zone AO must sign here. The states	nents in Sections A, B, and E a	re correct to the best of r	ny know	ledge.	riceded or community receded in in-
Property Owner's or Owner's Authorize	d Representative's Name				
Address		City		State	ZIP Code
Signature		Date		Telephor	ne
Comments		, , , , , , , , , , , , , , , , , , , 			
					
					Check here if attachment
The local official who is authorized by law		UNITY INFORMATIO			n complete Sections A. B. C. (or F.)
i ne local official who is authorized by lav and G of this Elevation Certificate. Comp	or orginance to administer the blete the applicable item(s) and	sign below. Check the n	nanager neasure	ment used in Items	G8. and G9.
G1. The information in Section C w is authorized by law to certify e	as taken from other documenta levation information. (Indicate	ation that has been signed the source and date of th	d and se ne elevat	aled by a licensed ion data in the Cor	surveyor, engineer, or architect who nments area below.)
G2. A community official completed	Section E for a building locate	ed in Zone A (without a FE	EMA-iss	ued or community-i	issued BFE) or Zone AO.
G3. The following information (Item	s G4G9.) is provided for com-	munity floodplain manage	ement pu	irposes.	
G4. Permit Number	G5. Date Permit Issued	G6.	Date Ce	rtificate Of Compli	ance/Occupancy Issued
G7. This permit has been issued for: ☐ G8. Elevation of as-built lowest floor (incl G9. BFE or (in Zone AO) depth of floodin	uding basement) of the building			☐ meters (PR)	Datum
Local Official's Name		Title			
Community Name		Telephone Date			
Signature Comments		Date	···		
Commence					
44.					,
					Check here if attachments
81-31, February 2006 FEMA Form					Replaces all previous edition
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