## U.S. DEPARTMENT OF HOMELAND SECURITY

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency National Flood Insurance Program

National Flood Insurance Program	Important: F	Read the instruct	ions on pa	ges 1-8.	H09-0041	
	SECTIO	N A - PROPERT	/ INFORMA	ATION	For Insurance Company Use:	
A1. Building Owner's Name GARY MILLER					Policy Number	
A2. Building Street Address (including Apt., U 8521 FREMONT ROAD		g. No.) or P.O. Route	and Box No	1,	Company NAIC Number	
City YOUNGSTOWN State FL ZIP						
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PARCEL ID#05452-425-000, AKA LOT 17, FLORIBAY UNRECORDED SUBDIVISION						
<ul> <li>A4. Building Use (e.g., Residential, Non-Residential)</li> <li>A5. Latitude/Longitude: Lat. Long.</li> <li>A6. Attach at least 2 photographs of the build.</li> <li>A7. Building Diagram Number 5</li> <li>A8. For a building with a crawl space or encloanance of Square footage of crawl space or enclonents.</li> <li>b) No. of permanent flood openings in the enclosure(s) walls within 1.0 foot above c) Total net area of flood openings in A8</li> </ul>	ing if the Certificate is esure(s), provide dosure(s) ne crawl space or ve adjacent grade	s being used to obtai <u>N/A</u> sq ft <u>N/A</u> N/A sq in	n flood insura A9. For a bu a) Squ b) No. wall c) Tota	uilding with an attact lare footage of attact of permanent flood Is within 1.0 foot about and area of flood of	openings in the attached garage ove adjacent grade <u>N/A</u> openings in A9.b <u>N/A</u> sq in	
	ON B - FLOOD INS	<del></del>	MAP (FIRM			
B1. NFIP Community Name & Community Nur BAY COUNTY 120004	mber B2 BA	2. County Name AY			B3. State FLORIDA	
B4. Map/Panel Number B5. Suffix 12005C0241 G	B6. FIRM Index Date 9-18-02	B7. FIRM P Effective/Revise 9-18-02	ed Date	B8. Flood Zone(s) A	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 52.8	
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)						
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
C1. Building elevations are based on:  *A new Elevation Certificate will be required C2. Elevations – Zones A1-A30, AE, AH, A (wit below according to the building diagram sp Benchmark Utilized Vertical Datum Conversion/Comments	th BFE), VE, V1-V30, ecified in Item A7.	of the building is com	plete. R/A, AR/AE,	Construction*  AR/A1-A30, AR/AH  theck the measurem	·	
a) Top of bottom floor (including basement, cr.	awl space, or enclost	/	_	t 🔲 meters (Puerto		
<ul> <li>b) Top of the next higher floor</li> <li>c) Bottom of the lowest horizontal structud</li> <li>d) Attached garage (top of slab)</li> <li>e) Lowest elevation of machinery or equipose (Describe type of equipment in Commonwealth)</li> </ul>	pment servicing the b	<u>N/A</u>	feet 🔲 feet	t	o Rico only) o Rico only)	
f) Lowest adjacent (finished) grade (LAG	6)	<u>53.9</u>		t 🔲 meters (Puerto	• •	
g) Highest adjacent (finished) grade (HAC	3) 	<u>54.6</u>	⊠ feet	t 🗌 meters (Puerto	Rico only)	
SECTION  This certification is to be signed and sealed by	D - SURVEYOR, I					
information. I certify that the information on this I understand that any false statement may be p	is Certificate represen	nts my best efforts to	interpret the	data available.		
Check here if comments are provided on b	ack of form.				PLACE SEAL	
Certifier's Name WILLIAM E. MCDANIEL		License	e Number 43	69	HERE	
Title REGISTERED LAND SURVEYOR	Company Name	SEA LEVEL SURV	EYING AND	MAPPING, INC.		
Address 1219 MAINE AVENUE	City LYNN HAVE			de 32444		
Signature / D	ate 3/14/07	Telephone 850-2	<sup>7</sup> 65-4800		i	

IMPORTANT: In these spaces, o	opy the corresponding information from	m Section A.	For Insurance Company Use:				
Building Street Address (including Apt. 8521 FREMONT ROAD	Policy Number						
City YOUNGSTOWN State FL ZIP C	Company NAIC Number						
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)							
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.							
Comments SECTION C2, e - TYPE OF EQUIPMENT IS AIR CONDITIONER PAD OUTSIDE OF STRUCTURE							
	` 						
Signature	Date	3/14/07					
Signature	Date	3/14/07	☐ Check here if attachments				
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)							
For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.							
E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).							
a) Top of bottom floor (including basement, crawl space, or enclosure) is feet							
E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor							
(elevation Č2.b in the diagrams) of the building is							
E4. Top of platform of machinery and/or equipment servicing the building is							
E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management							
ordinance? ☐ Yes ☐ No │	Unknown. The local official must certify this	i mormation in Section G.					
SECTION	F - PROPERTY OWNER (OR OWNER'S	REPRESENTATIVE) CERTIF	CATION				
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.							
Property Owner's or Owner's Authorize	d Representative's Name						
Address	City	State	ZIP Code				
	Date	Telephon	Ω				
Signature	Date	- I elephon	<del></del> -				
Comments							
			Check here if attachments				
	SECTION G - COMMUNITY INFOR	MATION (OPTIONAL)					
The local official who is authorized by lav	or ordinance to administer the community's floolete the applicable item(s) and sign below. Ch	odplain management ordinance ca	n complete Sections A, B, C (or E),				
G1. ☐ The information in Section C w	as taken from other documentation that has be	en signed and sealed by a licensed	surveyor, engineer, or architect who				
· · · · · · · · · · · · · · · · · · ·	elevation information. (Indicate the source and d						
G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.  The following information (Items G4G9.) is provided for community floodplain management purposes.							
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compl	iance/Occupancy Issued				
G7. This permit has been issued for:	☐ New Construction ☐ Substantial In	nprovement					
G8. Elevation of as-built lowest floor (including basement) of the building: feet meters (PR) Datum							
G9. BFE or (in Zone AO) depth of flooding	g at the building site:	☐ feet ☐ meters (PR) Datum _					
Local Official's Name	Ti	tle					
Community Name	To	elephone					
Signature	D	ate					
Comments							
			☐ Check here if attachments				