U.S. DEPARTMENT OF HOMELAND SECURITY

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency

Important: Read the instructions on pages 1-8.

| □FIS Profile □FIRM □Community Determined □Other (Describe) □□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□ | National Flood insurance Fi | ogram | | | istructions on po | | | |
|--|--|--|--|------------------|--|---------------------|---|--|
| SIL'S HOME CENTER 2. Building Steed Address (including Apt., Unit, Suite, and/or Bidg, No.) or P.O. Route and Box No. 2. State 2. State 2. P. Code 3.2496 | | | SEC | TION A - PRO | PERTY INFORM | ATION | | |
| Soop MERLIN DRIVE City State | | | | | | | Policy Number | |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Lattude-Longitude: LattiNg Long, N/A A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Digeran Numberg A8. For a building with a crawl space or enclosure(s), provide: A8. For a building with a crawl space or enclosure(s), provide: A9. Square footage of statched garage, provide: B1. Indicate develoa footage within 1.0 foot above adjacent grade N/A A9. Square footage of statched garage, provide: A9. Square footage footage square footage fo | A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or | | | | O. Route and Box N | o. | Company NAIC Number | |
| A3. Property Description, Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PARCEL Lib. 2684-268-400 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Latturde/Longitude: LatWAL Long, MA A5. Attach tal east 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Numbers A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Numbers A8. For a building with a craw's space or enclosure(s), provide: A9. For a building with a nattached garage, provide: A9. Sq. Tay and the contract of the provided of the provided with a craw in the provided parage of the provided of the provided parage of the provided with a craw in the provided parage of the provided with a craw in the provided parage of the provided parage (provided parage) and parage parage of the provided parage of the provided parage of the provided parage of the provided parage (provided parage) and parage parage of the provided parage (provided parage) and parage parage of the provided parage (provided parage) and parage parage of the provided parage (provided parage) and parage parage of the provided parage (provided parage) and parage parage of the provided parage (provided parage) and parage parage of the provided parage (provided parage) and parage parage of the provided parage (provided parage) and parage parage parage of the provided parage (provided parage) and parage parage of the provided parage (provided parage) and parage par | | | | | | | | |
| A.B. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Latkuder, longitude: Latt/VAL Long, IV/A A5. Latkuder, longitude: Latt/VAL Long, IV/A A5. Attach et least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Numbers A8. For a building Diagram Numbers B6. For a building with a crawl space or enclosure(e), provide: a) Square footage of crawl space or enclosure(e), provide: a) Square footage of read space or enclosure(e), provide: a) Square footage of attached garage B7/A Sq. ft. b) No. of permanent flood openings in the careway space or enclosure(e) wails within 1.0 foot above adjacent grade M7/A c) Total net area of flood openings in A9.b N/A c) Total net area of flood openings in A9.b N/A c) Total net area of flood openings in A9.b N/A SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B1. NFIP Community Name & Community Number B2. Country Name B2. Country Name B3. State F7 BAY CO. (UNINC.) B4. MappPanel Number 12005C02234 B6. FIRM flood 9/18/02 (NEW MAPS) 12005C02234 B7. FIRM Spanel 12005C02234 B7. FIRM Spanel 12005C02234 B7. FIRM Spanel B7. Indicate devastion datum used for BFE in Item B9. (SMQVD 1929 B7. Indicate devastion datum used for BFE in Item B9. (SMQVD 1929 B7. Indicate devastion datum used for BFE in Item B9. (SMQVD 1929 B7. Indicate devastion datum used for BFE in Item B9. (SMQVD 1929 B7. Indicate devastion datum used for BFE in Item B9. (SMQVD 1929 B7. Indicate devastion datum used for BFE in Item B9. (SMQVD 1929 B7. Indicate devastion datum used for BFE in Item B9. (SMQVD 1929 B7. Indicate devastion datum used for BFE in Item B9. (SMQVD 1929 B7. Indicate devastion datum used for BFE in Item B9. (SMQVD 1929 B7. Indicate devastion datum used for BFE in Item B9. (SMQVD 1929 B7. Indicate devastion datum used for BFE in Item B9. (SMQV | | | | | | | 32400 | |
| A5. LattouderLongitudes. Lattl/AL Long. N/A A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Numbers A8. For a building with a crawl space or enclosure(s), provide: a) Square footage of crawl space or enclosure(s) b) No. of permanent flood openings in the crawl space or enclosure(s) b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade N/A sq in c) Total net area of flood openings in A9. N/A Sq in c) Total net area of flood openings in A9. N/A Sq in c) Total net area of flood openings in A9. N/A Sq in c) Total net area of flood openings in A9. N/A Sq in c) Total net area of flood openings in A9. N/A Sq in c) Total net area of | | | | | | | 400000000000000000000000000000000000000 | |
| B1. NFIP Community Name & Community Number BAY CO. (UNINC.) 120004 BAY B4. Map/Panel Number B5. Suffix B6. FIRM Index Date BAY B5. FIRM Panel B5. Suffix B6. FIRM Index Date B5. FIRM Panel B5. Suffix B6. FIRM Index Date B5. Suffix B6. FIRM Index Date B5. FIRM Panel B5. Suffix B6. FIRM Index Date B5. Suffix B6. FIRM Index Date B5. Suffix B6. FIRM Index Date B5. Suffix B6. FIRM Panel B6. Panel B5. Firm Panel B5. Suffix B6. Firm Panel B5. Suffix B6. FIRM Panel B6. Panel B6. FIRM Panel B6. Suffix B6. FIRM Panel B6. Panel B6. FIRM | A5. Latitude/Longitude: LatN/A Long. N/A Horizontal Datum: A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number5 A8. For a building with a crawl space or enclosure(s), provide: a) Square footage of crawl space or enclosure(s) N/A sq ft b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade N/A walls within 1.0 foot above adjacent grade N/A | | | | | | | |
| BAY CO. (UNINC.) 120004 BAY | SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION | | | | | | | |
| BAY CO. (UNINC.) 120004 BAY | B1. NFIP Community Nam | e & Community N | Number | B2. County Na | ime | | B3. State | |
| Date Section C - Building elevations are based on: Construction Top of bottom floor (including diagrams specified in the meets of the measurement used. | | | | | | | | |
| 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: □NAVD 1988 □Other (Describe) □ B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? □Yes □No 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. 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 <u>ELEV</u> = 28.23 FEETVertical DatumNQVD Conversion/Comments SEE REVERSE SIDE Check the measurement used. a) Top of bottom floor (including basement, crawl space, or enclosure floor) 41.37 □ feet □ meters (Puerto Rico only) b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) Attached garage (top of slab) VIA □ feet □ meters (Puerto Rico only) d) Attached garage (top of slab) Lowest elevation of machinery or equipment servicing the building 38.07 □ feet □ meters (Puerto Rico only) (Describe type of equipment in Comments) f) Lowest adjacent (finished) grade (HAG) 38.80 □ feet □ meters (Puerto Rico only) 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 on this Certificate represents my best efforts to interpret the data available. I understand that any felse statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. □ Check here if comments are provided on back of form. Certifier's Name L | B4. Map/Panel Number | B5. Suffix | | | | | | |
| FIS Profile FIRM Community Determined Other (Describe) | 12005C0234 | G | | | | | | |
| C1. Building elevations are based on: | □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)? □Yes ☑No □CBRS □OPA | | | | | | | |
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| a) Top of bottom floor (including basement, crawl space, or enclosure floor) 41.37 Seet meters (Puerto Rico only) b) Top of the next higher floor N/A. feet meters (Puerto Rico only) c) Bottom of the lowest horizontal structural member (V Zones only) N/A. feet meters (Puerto Rico only) d) Attached garage (top of slab) N/A. feet meters (Puerto Rico only) e) Lowest elevation of machinery or equipment servicing the building 38.07 Seet meters (Puerto Rico only) (Describe type of equipment in Comments) f) Lowest adjacent (finished) grade (LAG) 37.67 Seet meters (Puerto Rico only) g) Highest adjacent (finished) grade (HAG) 38.80 Seet meters (Puerto Rico only) 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 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. Check here if comments are provided on back of form. Certifier's Name License Number FL. P.S.M. 5288 | *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 ELEV. = 28.23 FEETVertical DatumNGVD | | | | | | | |
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| c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) f) Lowest adjacent (finished) grade (LAG) g) Highest adjacent (finished) | | ment, crawl space, c | | | | | | |
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| PRESIDENT/OWNER RITCHIE-JENKINS & ASSOCIATES, INC. Address City State ZIP Code 949 JENKS AVE. STE 5 PANAMA CITY FL 32401 Signature Date Telephone | information. I certify that th I understand that any false | ned and sealed I e information on statement may be | by a land surveyor, on this Certificate represe punishable by fine | engineer, or arc | hitect authorized by I | aw to certify eleva | tion | |
| Address City State ZIP Code 949 JENKS AVE. STE 5 PANAMA CITY FL 32401 Signature Date Telephone | | | | | | | <u> </u> | |
| Address City State ZIP Code 949 JENKS AVE. STE 5 PANAMA CITY FL 32401 Signature Date Telephone | | | Company Name | | FL. P.S.M. 5288 | | _ | |
| 949 JENKS AVE. STE 5 PANAMA CITY FL 32401 Signature Date Telephone | PRESIDENT/OWNER | | RITCHIE-JENKINS | & ASSOCIATE | | - | / | |
| Signature Date Telephone | 949 JENKS AVE. STE 5 | | | | | | () | |
| | Signature | C. Reli | Date | 3 | Telephone | | - h / | |