U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28, 2009

National Flood Insurance Program Important: Read the instructions on pages 1-8.

BOT- 1391

						6-3-			157
			SECT	ION A - PROP	ERTY INFO	RMATI	ON	Fo	or Insurance Company Use:
A1.	Building Owner's Nam	e BENNY MO	ORE					Po	olicy Number
A2.	Building Street Addres 740 BEACHCOMBER	s (including Apt. DRIVE	, Unit, Suite, and/or B	dg. No.) or P.O.	Route and B	ox No.		Co	ompany NAIC Number
	City LYNN HAVEN			State FL		Tanita	ZIP Co		
A3.	Property Description (I	Lot and Block Nu	ımbers, Tax Parcel Nu	ımber, Legal De	scription, etc.) LOT 1	6, BLK C, PLA	T OF N	NORTH SHORE UNIT II
A4.	Building Use (e.g., Res	sidential, Non-Re	esidential, Addition, Ad	ccessory, etc.)	RESIDENTIA	L			
A5.	Latitude/Longitude: La	t. 30d14'09.5"	Lon	g. <u>85d40'26.1"</u>				Datum:	□NAD 1927 ⊠NAD 1983
A6.	Attach at least 2 photo	graphs of the bu	ilding if the Certificate	is being used to	obtain flood	insuranc	е.		
	Building Diagram Num For a building with a cr		closure(s) provide:		A0 E	or a buildi	ng with an atta	chod d	garage provides
, 10.	a) Square footage of			/a sq ft			footage of atta	no policy medical fire	garage, provide: garage 744 sq ft
	b) No. of permanent f	lood openings in	the crawl space or			No. of	permanent floor	d oper	nings in the attached garage
	c) Total net area of flo	within 1.0 foot at	oove adjacent grade <u>(</u> A8.b	T	۵)				djacent grade <u>0</u> ngs in A9.b <u>0</u> sq in
	of Total flet area of lic			- 417	VIII IN 10				ngs in A9.b 0 sq in
D4 1	NEID Committee Name		TION B - FLOOD II			FIRM) II	NFORMATIO		
E	NFIP Community Name BAY COUNTY 120		lumber	32. County Nam BAY UN	e IINCORPO	DRATE	O AREA	B3. S	ELORIDA
	Map/Panel Number 12005C0331	B5. Suffix G	B6. FIRM Index Date		RM Panel Revised Date		B8. Flood	B	9. Base Flood Elevation(s) (Zone
	1200300331	G	9-18-02	9-18-		,	Zone(s) AE		AO, use base flood depth) 7
10.	Indicate the source of t	he Base Flood E	levation (BFE) data o	r base flood dep	th entered in	Item B9.			
	☐FIS Profile	⊠FIRM	☐Community Determ	nined	Other (Desc	ribe)			
	Indicate elevation datu				NAVD 1988		Other (Describe	:)	
12.	Is the building located in Designation Date	in a Coastal Barr	rier Resources Systen	(CBRS) area o	r Otherwise F □OPA	Protected	Area (OPA)?		Yes ⊠No
	Designation Date			_ Повиз	о Пора				
		SECTIO	N C - BUILDING E	LEVATION IN	FORMATIO	N (SUR	VEY REQUIF	RED)	
	uilding elevations are b		☐Construction Draw	ngs* [Building Ur	nder Cons	struction*	Ø	Finished Construction
	A new Elevation Certific								
2. E	elow according to the b	130, AE, AH, A (1 Juilding diagram	with BFE), VE, V1-V3 specified in Item A7	0, V (with BFE),	AR, AR/A, AF	R/AE, AR	/A1-A30, AR/A	H, AR	/AO. Complete Items C2.a-g
	enchmark Utilized US		opcomed in nom 717.		Vertical D	atum NG	VD 1929		
	Conversion/Comments						1020		
							k the measure		
	Top of bottom floor		nent, crawl space, or	enclosure floor)			meters (P		
b)			-tl		10.0		meters (P		
c) d)			ctural member (V Zon	es only)	<u>N/A.</u> 9.3		meters (Pi		(0.5)
e)			uipment servicing the	building	9.4		meters (P		
	(Describe type of ed	quipment in Com	ments)				- motoro (r	uorto i	uec emy/
f)					8.6	-	meters (P		
g)	Highest adjacent (fi	nished) grade (H	AG)		9.8	✓ feet	meters (Pu	uerto F	Rico only)
			N D - SURVEYOR						
This	certification is to be sign	ned and sealed b	by a land surveyor, en	gineer, or archite	ect authorize	d by law t	o certify elevat	ion	
l und	nation. I certify that the erstand that any false s	a information on t statement may be	tnis Certificate represe e punishable by fine o	ents my best eπα r imprisonment ι	inder 18 U.S.	et the dat . Code, S	a available. ection 1001.		
Б	☐Check here if comme	nts are provided	on back of form						PLACELICENSE
	ier's Name	The are provided	on buok of form.		icense Numb	per			NUMBER, SEAL,
LIND	A MARIE RIGGINS				5934				SIGNATURE, AND
Title PRO	. SURVEYOR & MAPP	PER	Company Name A.T. SURVEY, INC.						DATE HERE
Addre	ess		City	State		ZIP Cod	de		4-11-08
2401 Signa	FRANKFORD AVENU		PANAMA CITY Date	FLOR	IDA Telephone	32405			Link Mone Klyms 4-11-08 LS5934
- gric	Inch Man	ellins 4-11	4-11-08		(850)763-6	6471			4-11-00 H93334
	and the same and t	91/	1909 E 1005						25-54 and 25-54

Replaces all previous editions

FEMA form 81-31, February 2006 See Reverse side for continuation

OK C.O. D. 8. 4/15/08

IMPORTANT: In these spaces,	copy the corresponding inforn	nation from Section A.	Fo	r Insurance Company Use:
Building Street Address (including Apt 740 BEACHCOMBER DRIVE			Po	licy Number
City PANAMA CITY	State FLORIDA	ZIP Code 32444	Co	ompany NAIC Number
SECTION	I D - SURVEYOR, ENGINEER, (OR ARCHITECT CERTIF	ICATION (CONTIN	UED)
Copy both sides of this Elevation Cert	ficate for (1) community official, (2) in	nsurance agent/company, an	d (3) building owner.	
Comments ITEM C2(a) IS THE ELEV	ATION OF THE STORAGE ROOM.	ITEM C2(b) IS THE ELEVA	TION OF THE FIRST	FLOOR LIVING AREA OF THE
HOUSE. THE WATER HEATER ELE	VATIONS ARE 9.4 FEET AND 9.5 F	EET. THE EXTERIOR AIR (CONDITIONER UNIT	ELEVATIONS ARE
BOTH 9.5 FEET.				
Signature Jick Marie N	Immy-11-38	Date 4-11-08		□ Check here if attachments
	VATION INFORMATION (SURV		and the second s	NAME OF TAXABLE PARTY.
b) Top of bottom floor (includingE2. For Building Diagrams 6-8 with p	r the following and check the appropriacent grade (LAG). basement, crawl space, or enclosurbasement, crawl space, or enclosurbasement flood openings provided in of the building is	e) is feet e) is feet e) is feet n Section A Items 8 and/or 9 feet	meters above meters above meters above see page 8 of Instruction below to HAG. above or above or above or above ordance with the com	ve or below the HAG. ve or below the LAG. ctions), the next higher floor he HAG.
SECTION	F - PROPERTY OWNER (OR (OWNER'S REPRESENTA	ATIVE) CERTIFICA	TION
The property owner or owner's authori or Zone AO must sign here. The state	zed representative who completes S ments in Sections A, B, and E are co	ections A, B, and E for Zone	A (without a FEMA-is	
Property Owner's or Owner's Authorize	ed Representative's Name			
Address		City	State	ZIP Code
Signature		Date	Telephone	110 a X 1 1 1 2 1 1
Comments				To a second
	SECTION C. COMMUNI	TV INCODMATION (ODT	IONAL \	☐ Check here if attachmen
The local official who is authorized by la	SECTION G - COMMUNI w or ordinance to administer the con		The state of the s	omplete Sections A, B, C (or E).
and G of this Elevation Certificate. Com	plete the applicable item(s) and sign	below. Check the measure	ment used in Items G	8. and G9.
	was taken from other documentation elevation information. (Indicate the s			
	d Section E for a building located in ms G4G9.) is provided for communi		Section 1 and 1 an	ued BFE) or Zone AO.
G4. Permit Number	G5. Date Permit Issued	G6. Date Ce	rtificate Of Compliand	ce/Occupancy Issued
G7. This permit has been issued for:	New Construction	antial Improvement		
38. Elevation of as-built lowest floor (inc	cluding basement) of the building:	feet	meters (PR)	Datum
G9. BFE or (in Zone AO) depth of floodi	ng at the building site:	feet	meters (PR)	Datum
Local Official's Name		Title		
Community Name		Telephone		
Signature		Date		
Comments				
		7,195		☐ Check here if attachments

Building PhotographsSee Instructions for Item A6.

			For Insurance Company Use:
Building Street Address (included 740 BEACHCOMBER DRIVE	Policy Number		
City LYNN HAVEN	State FLORIDA	ZIP Code 32444	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.

FRONT VIEW 4-4-08



REAR VIEW 4-4-08



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