

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name D.R. Horton		For Insurance Company Use:
A2. Building Street Address (Including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3836 Whitehead Blvd		Policy Number
City Panama City State FL ZIP Code 32404		Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 37, Magnolia Hills Phase 2 Parcel ID# 11916-177-000		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>30°12'18"N</u> Long. <u>85°35'56"W</u>		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983
A7. Building Diagram Number <u>1A</u>		
A8. For a building with a crawlspace or enclosure(s):		
a) Square footage of crawlspace or enclosure(s) <u>0-N/A</u> sq ft	A9. For a building with an attached garage:	
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0-N/A</u>	a) Square footage of attached garage <u>378</u> sq ft	b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0-N/A</u>
c) Total net area of flood openings in A8.b <u>0-N/A</u> sq in	c) Total net area of flood openings in A9.b <u>0-N/A</u> sq in	d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number Bay County 120004		B2. County Name Bay		B3. State FL	
B4. Map/Panel Number 12005C0353	B5. Suffix H	B6. FIRM Index Date 6-2-2009	B7. FIRM Panel Effective/Revised Date 6-2-2009	B8. Flood Zone(s) A	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 34'
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input checked="" type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

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.

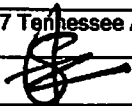
C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.
Benchmark Utilized FDOT 46-03-D04V Vertical Datum NAVD 88
Conversion/Comments none

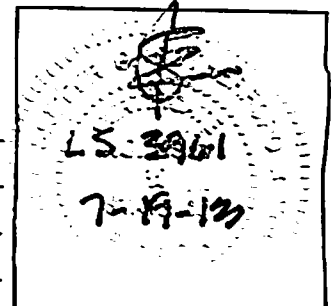
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>37.96</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>N/A</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>37.47</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>37.34</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG)	<u>36.9</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG)	<u>37.3</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>N/A</u>	<input type="checkbox"/> feet	<input type="checkbox"/> 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. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Certifier's Name Skipper C. Rutherford, PLS	License Number LS3961
Title President	Company Name SCR & Associates NWFL, Inc.
Address 1617 Tennessee Avenue	City Lynn Haven State FL ZIP Code 32444
Signature 	Date 7-19-2013 Telephone 850-265-6979



ELEVATION CERTIFICATE

THE BOARD OF HEALTH AND SANITATION
City of Chicago, Illinois

Form No. 100-0000
Expires March 31, 1915

Instructions: Read the instructions on pages 1 & 2.

SECTION A - PROPERTY INFORMATION

1. Name of Property: _____
 2. Address: _____
 3. City: _____
 4. State: _____
 5. Zip: _____
 6. Owner: _____
 7. Assessor: _____

SECTION B - FLOOD INSURANCE RATES WITH FIRM CREATION

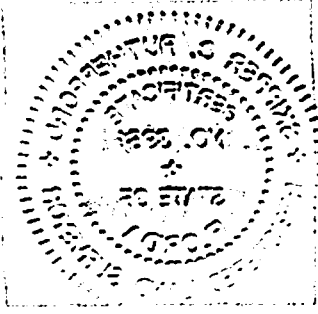
1. Flood Insurance Rate: _____
 2. Firm Creation: _____
 3. Flood Insurance Rate: _____
 4. Firm Creation: _____
 5. Flood Insurance Rate: _____
 6. Firm Creation: _____

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

1. Building Elevation Information (Survey Required): _____
 2. Building Elevation Information (Survey Required): _____
 3. Building Elevation Information (Survey Required): _____
 4. Building Elevation Information (Survey Required): _____
 5. Building Elevation Information (Survey Required): _____
 6. Building Elevation Information (Survey Required): _____

SECTION D - SURVEYOR ENGINEER OF ARCHITECT CERTIFICATE

1. Surveyor Engineer of Architect Certificate: _____
 2. Surveyor Engineer of Architect Certificate: _____
 3. Surveyor Engineer of Architect Certificate: _____
 4. Surveyor Engineer of Architect Certificate: _____
 5. Surveyor Engineer of Architect Certificate: _____
 6. Surveyor Engineer of Architect Certificate: _____



Replaces all previous editions

Check here if attachments

Approved for compliance with Bay City Flood Ord.

Comments

Signature

Date

Community Name

Telephone

Local Official's Name

Title

- G7. This permit has been issued for:
 - New Construction
 - Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building:
 - _____ feet meters (PR) Datum
 - _____ feet meters (PR) Datum
 - _____ feet meters (PR) Datum
- G9. BFE or (in Zone AO) depth of flooding at the building site:
 - _____ feet meters (PR) Datum
 - _____ feet meters (PR) Datum
- G10. Community's design flood elevation _____

G4. Permit Number <i>KB12-0241</i>	G5. Date Permit Issued <i>12-4-12</i>	G6. Date Certificate Of Compliance/Occupancy Issued
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- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- 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.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

Check here if attachments

Comments

Signature

Date

Telephone

Address

City

State ZIP Code

Property Owner's or Owner's Authorized Representative's Name

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.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

- 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, crawlspace, or enclosure) is _____ feet meters above or below the HAG.
 - b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below the LAG.
- E2. For Building Diagrams C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.
- E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.
- 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 information in Section G.

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.

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

Check here if attachments

Signature Skipper C. Rutherford

Date 7-19-2013

C2.e) Lowest machinery elevation used was bottom of HVAC Unit.

Comments B9. The Base Flood Elevation was provided by Bay County.

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

For Insurance Company Use:	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	City Panama City State FL ZIP Code 32404
Policy Number	3836 Whitehead Blvd.	
Company NAIC Number		

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3836 Whitehead Blvd.	For Insurance Company Use: Policy Number
City Panama City State FL ZIP Code 32404	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 on the reverse.	

Front View



Back View



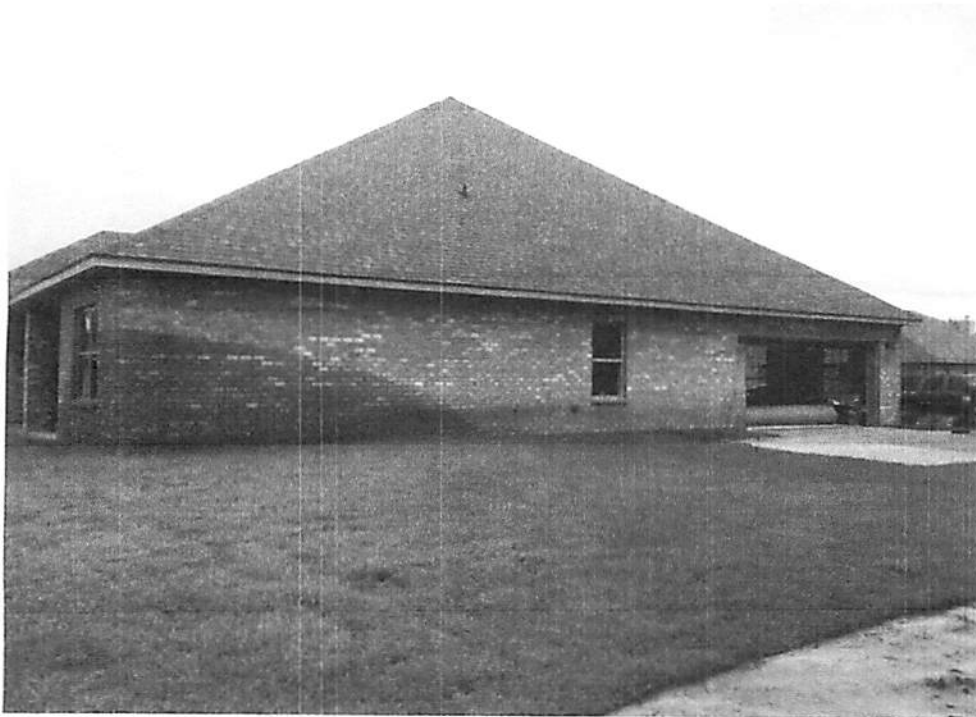
Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3836 Whitehead Blvd.	For Insurance Company Use: Policy Number
City Panama City State FL ZIP Code 32404	Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View."

Left Side



Right Side

