U.S. DEPARTMENT OF HOMELAND SECURITY

ELEVATION CERTIFICATE

OMB No. 1660-0008

Federal Emergency Manage National Flood Insurance Pro		ant: Read the in	structions on na	nes 1-9	Expires July 31, 2015
JOB No. 06-10-13EC REVI		ECTION A - PRO			For Insurance Company Use:
A1. Building Owner DANIEL H. S	's Name				Policy Number
A2. Building Street Addres	s (including Apt., Unit, Suite, and	/or Bldg. No.) or P.C). Route and Box No	D	Company NAIC Number
5242 KINGSTON CIF City PANAMA CITY			To save and		ZIP Code 32408
	t and Block Numbers, Tax Parce	I Number Legal Dec	agintian ata	-	211 0000 02400
LOT(S) 128 & 129 M	ARTINIQUE PHASE III BAY	COUNTY TÂX PA	RCEL NUMBER	31183-720-000	
 A5. Latitude/Longitude: Lat. A6. Attach at least 2 photog A7. Building Diagram Numb A8. For a building with a cra a) Square footage of cr b) No. of permanent flo 	wlspace or enclosure(s): awlspace or enclosure(s) od openings in the crawlspace or 0 foot above adjacent grade d openings in A8.b	Horizontal Datum cate is being used to	obtain flood insurar A9. For a bui a) Square b) No. c withir c) Total	nce. Iding with an attache footage of attached	I garage <u>0</u> sq ft penings in the attached garage acent grade enings in A9.b <u>0</u> sq in
d) Engineered nood op		OOD INCLIDANCE		IRM) INFORMAT	
	SECTION B - FI	LOOD INSURANC	E RATE WAP (F	IRIVI) INFORIVIAT	ION
B1. NFIP Community Name BAY 120004	& Community Number	B2. County Nan BAY	ne	2100	33. State FL
B4. Map/Panel Number 12005C0338H	B5. Suffix B6. FIRM Inc Date G 6/2/09	Effective	FIRM Panel F/Revised Date 6/2/09	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 8 FEET
C2. Elevations – Zones A1-A below according to the b Benchmark Utilized <u>BE</u> Indicate elevation datum	ate will be required when constru 30, AE, AH, A (with BFE), VE, V uilding diagram specified in Item 0764 Vertical Datum 1988 used for the elevations in items	Drawings* uction of the building 1-V30, V (with BFE) A7. In Puerto Rico a) through h) below.	☐ Building Under is complete. , AR, AR/A, AR/AE, only, enter meters. ☐ NGVD 1929 ☑	Construction* AR/A1-A30, AR/AH	☐ Finished Construction , AR/AO. Complete Items C2.a-h
a) Top of bottom floor b) Top of the next high c) Bottom of the lowes d) Attached garage (to e) Lowest elevation of (Describe type of ec f) Lowest adjacent (fir g) Highest adjacent (fir	t horizontal structural member (V	y Zones only) g the building nts) AG)			
	SECTION D - SUR	VEYOR, ENGINE	ER, OR ARCHIT	ECT CERTIFICA	TION
nformation I certify that the	ed and sealed by a land surveyor information on this Certificate rep ement may be punishable by fine re provided on back of form.	resents my best effo e or imprisonment ur	orts to interpret the conder 18 U.S. Code, of longitude in Section	data available. I Section 1001. In A provided by a	P.S.M. 2456
Certifier's Name SAM R. BRU	NER	Turking £ 1L	icense Number 24	56	1/1/
Title SECRETARY	Company Name	BRUNER-MON	GOVEN LAND SUR	VEYING, INC.	for less
Address 7603 McELVEY RC	30000 € (0.0000000000000000000000000000			ZIP Code 32408	11/13/13
Signature	Date	11/13/13 T	elephone 850.235.	2293	The same of the sa
Am ()					

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 grad (LAG). a) Top of bottom floor (including basement, crawlspace, or enclosure) is	e e	CTION D. SUBVEYOR ENGINE	ER OR ARCHITECT CERT	TIFICATION			
Bilding Steet Address (including Apt., Unit. Suite, and/or Blog, No.) or P.O. Route and Box No. Policy Number Policy Number Cay PANAMA CITY BEACH State FL ZIP Code 32408 Company NAIC Number SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED) Signature Date 11/13/13 Check here if attachment SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE). For Zenes AO and A (without BFE), complete learns E1-E5. If the Certificate is intended to support a LOMA or LOME-Ir request, complete Sections A, B, and C, For terms E1-E4, use natural grade, if a valiable, the Check the measurement used. In Petro Ricco any, enter meters. E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the liAple and (PAG) and the lowest adjacent grad (PAG) and the lowest adjacent grade (PAG). B) Top of bottom floor (including basement, crawlapsac, or enclosure) is greated by the petro of the control of the building is certificate in the lowest displacent grade (PAG). B) Top of pottom floor (including basement, crawlapsac, or enclosure) is greated by the petro of the building is certificate in the lowest displacent grade (PAG). B) Top of pottom floor (including basement, crawlapsac, or enclosure) is greated by the lowest grade (PAG). B) Top of pottom floor (including basement flood openings provided in Section A Brems is above or below the IAG. B) Top of pottom floor (including basement flood comprings provided in Section A Brems is a series of year pages 80-of Instructions), the rest higher floor (elevated acc) in the olivery in the IAG. E2. For Building Diagrams 69-with permanent food openings provided in Section A Brems is a section of the building is certificate of the building is certificate in the IAG. E4. Top of patienter of machinery and/or equipment servicing the building is believed the IAG. E5. Top of patienter of machinery and/or equipment servicing the building is certificat							
SECTION D. SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED) SECTION D. SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED) Signature Date 11/13/13	Building Street Address (including Apt., Un	Policy Number					
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner. Comments		IP Code 32408		Company NAIC Number			
2. e) AIR CONDITIONER COMPRESSOR THAT SERVICES RESIDENCE Care Date 1/1/3/13	SECTION	D - SURVEYOR, ENGINEER, OR	ARCHITECT CERTIFICAT	rion (CONTINUED)			
Date	Copy both sides of this Elevation Certificate	for (1) community official, (2) insurance	agent/company, and (3) buildi	ng owner.			
Signature Date 11/13/13	Comments	THAT CERVICES DESIDENCE	- Kalendari	enstructed and the state of the			
Check here if attachment Check here if attachment SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)	C2. e) AIR CONDITIONER COMPRESSOR	THAT SERVICES RESIDENCE.					
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and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerfo Rico only, enter meters. 1- Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (IAAG) and the lowest adjacent grade (IAAG) and the lowest adjacent grade (IAAG). 3- Top of bottom floor (including basement, crawlspace, or enclosure) is	SECTION E - BUILDING ELE	VATION INFORMATION (SURVE)	NOT REQUIRED) FOR Z	ONE AO AND ZONE A (WITHOUT BFE)			
E4. Top of platform of machinery and/or equipment servicing the building is	 and C. For Items E1-E4, use natural grade E1. Provide elevation information for the f (HAG) and the lowest adjacent grade a) Top of bottom floor (including base b) Top of bottom floor (including base E2. For Building Diagrams 6-9 with perma (elevation C2.b in the diagrams) of the 	i, if available. Check the measurement collowing and check the appropriate box (LAG). ment, crawlspace, or enclosure) is ment, crawlspace, or enclosure) is anent flood openings provided in Section is building is feet	used. In Puerto Rico only, entres to show whether the elevation feet me feet me haltems 8 and/or 9 (see page meters above or to	er meters. on is above or below the highest adjacent grade ters above or below the HAG. ters above or below the LAG. s 8-9 of Instructions), the next higher floor pelow the HAG.			
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 Authorized Representative's Name Address City State ZIP Code Signature Date Telephone Comments SECTION G - COMMUNITY INFORMATION (OPTIONAL) The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9. 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. G4. Permit Number G5. Date Permit Issued G6. Date Certificate Of Compliance/Occupancy Issued FB 12 - 0.3.2.6. FB 12 - 0.3.2.6. FB 12 - 0.3.2.6. FB 12 - 0.3.2.6. FB 13 - 0.3.2.6. FB 14 - 0.3.2.6. FB 15 - 0.3.2.6. FB 16 - 0.3.2.6. FB 17 - 0.3.2.6. FB 18 - 0.	E4. Top of platform of machinery and/or e E5. Zone AO only: If no flood depth number	I. Top of platform of machinery and/or equipment servicing the building is feet meters above or below the HAG. 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					
City State ZiP Code	SECTION	F - PROPERTY OWNER (OR OW	NER'S REPRESENTATIVE) CERTIFICATION			
Address City State ZIP Code Telephone Comments SECTION G - COMMUNITY INFORMATION (OPTIONAL) The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9. 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. G4. Permit Number G5. Date Permit Issued G6. Date Certificate Of Compliance/Occupancy Issued RB12 - 0.3.26 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 G9. BFE or (in Zone AO) depth of flooding at the building site: feet meters (PR) Datum Local Official's Name Title Community Name Telephone Signature Date	The property owner or owner's authorized re Zone AO must sign here. The statements is	epresentative who completes Sections in Sections A, B, and E are correct to the	A, B, and E for Zone A (without e best of my knowledge.	a FEMA-issued or community-issued BFE) or			
Signature Date Telephone Check here if attachmen	Property Owner's or Owner's Authorized Re	presentative's Name	ATE ST BALL	Lie Townson electroday			
Check here if attachmen SECTION G - COMMUNITY INFORMATION (OPTIONAL)	Address	City	S	tate ZIP Code			
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G10. Community's design flood elevation Local Official's Name Title Community Name Telephone Date	AND ONLY THE RESTRICTION OF THE PARTY OF THE						
Local Official's Name Community Name Title Telephone Date		at the building site:					
Community Name Telephone Date	Significant of	Jan Varia	WHEN SUIL IN OIL	PR) Datum			
Signature Date 11/13/13	Local Official's Name		Title	MUNITED TOAKS AT A			
100 STITE 10-8 20 MARCH STOR BUS MARK 11/13/13	Community Name	A PARTA DE LA CINAL MENCENIO	Telephone	Ref. 1 Year Shipping Ten			
Comments Commen	Signature	SLAB AND THE SUSSESSION OF	Date 1///2 /	/2			
	Comments	2 2 1					

Building Photographs See Instructions for Item A6.

	For Insurance Company Use:				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number: 5242 KINGSTON CIRCLE					
City PANAMA CITY BEACH State FL ZIP Code 32408	Company NAIC Number:				

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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. When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

FRONT VIEW 10/31/13



