### U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

## **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

		SEC	TION A	- PROPERTY	INF	ORM/	ATION	FORI	NSURANCE COMPANY USE
A1. Building Owner's Name D.R. Horton						-	Number:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5015 Maggie Lane						Comp	any NAIC Number:		
City Panama City				State FL	ZIP C	ode 32	2404		
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 176, Cherokee Heights Phase 4 Parcel ID # 05860-500-380								
A4. Building Use (e.g., Res A5. Latitude/Longitude: Lat A6. Attach at least 2 photo A7. Building Diagram Num A8. For a building with a cr a) Square footage of c b) Number of permandor enclosure(s) with c) Total net area of flod d) Engineered flood of	t. 30°14'26.14"N graphs of the buber 1A awlspace or enc crawlspace or encent flood opening in 1.0 foot above od openings in A penings?	Long. 85°33'40.45' ilding if the Certification if the Certification if the Certification in the crawlspace ending and the Certification in the crawlspace ending and the Certification in the Certific	N/A-0 N/A-0 N/A-0	ing used to obtain sq ft sq in	A9. I	For a bi a) Squ b) Nun with c) Tota d) Eng	uilding with an atta lare footage of atta nber of permanent in 1.0 foot above al net area of flood gineered flood ope	ached gached g t flood o adjacen I openin nings?	parage 420 sq ft spenings in the attached garage at grade N/A-0 sq in
Marie	SECT	TION B – FLOOD	INSUF	RANCE RATE	MAP	(FIRI	I) INFORMATIO	N	
B1. NFIP Community Name Bay County Unincorporated		lumber	B2. Co Bay	ounty Name				B3. St Florida	
B4. Map/Panel Number 12005C0356	B5. Suffix H	B6. FIRM Index I	Date	B7. FIRM F Effective/Revis 06/02/20	sed D		B8. Flood Zone(s) A	В9	Base Flood Elevation(s) (Zone AO, use base flood depth) 48'
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other/Source:  B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other/Source:  B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☐ No Designation Date: ☐ CBRS ☐ OPA									
	SECTIO	N C - BUILDING	ELEV	ATION INFORI	ITAN	ION (S	URVEY REQUI	RED)	
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. In Puerto Rico only, enter meters.  Benchmark Utilized: 46-03-D04V  Vertical Datum: NAVD 88  Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source:  Datum used for building elevations must be the same as that used for the BFE.									
							Chec	k the m	easurement used.
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)  b) Top of the next higher floor  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 and location in Comments)  f) Lowest adjacent (finished) grade next to building (LAG)  g) Highest adjacent (finished) grade next to building (HAG)  solution  S3.10  M/A.  pfeet  meters  feet  meters  feet  meters  finished) grade next to building (LAG)  g) Highest adjacent (finished) grade next to building (HAG)  feet  meters  finished) grade next to building (HAG)  finished) grade next to building (HAG)						t meters t meters t meters t meters t meters t meters			
h) Lowest adjacent grad	e at lowest eleva	ation of deck or stair	rs, includ	ding structural su	pport	not.y	<u>et</u>	fee	et meters
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION									
This certification is to be signiformation. I certify that the I understand that any false.  Check here if commen. Check here if attachmen. Certifier's Name Skipper C.	e information on a statement may b ts are provided o ents.	this Certificate repre se punishable by find	esents n e or imp Were	ny best efforts to risonment under latitude and long ed land surveyor	interp 18 U itude ?	oret the I.S. Coo	data available. le, Section 1001. tion A provided by		SEAL
Title President		Company Name	SCR &	Associates NWF	L, Inc	С.			12-09-14
Address PO Box 958	<del></del>	City Lynn Haven		State			Code 32444		12-07-17
Signature <		Date 12/09/2014	1	Teleph	one	850-26	65-6979		

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ATTENDED OF OFF

Telephono 850-261-0979

ELEVATION CERTIFICATE, page 2		
IMPORTANT: In these spaces, copy the correspond	ing information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg 5015 Maggie Lane	g. No.) or P.O. Route and Box No.	Policy Number:
City Panama City	State FL ZIP Code 324	04 Company NAIC Number:
SECTION D - SURVEYOR, EN	IGINEER, OR ARCHITECT CERTI	FICATION (CONTINUED)
Copy both sides of this Elevation Certificate for (1) community	official, (2) insurance agent/company, a	nd (3) building owner.
Comments C2.e) The lowest machinery used was the bottom	of the HVAC Unit.	
Som		
Signature Skipper C Rutherford	Date 12/09/2014	
SECTION E – BUILDING ELEVATION INFORMATI	ON (SURVEY NOT REQUIRED) F	OR ZONE AO AND ZONE A (WITHOUT BFE)
For Zones AO and A (without BFE), complete Items E1–E5. If and C. For Items E1–E4, use natural grade, if available. Check E1. Provide elevation information for the following and check grade (HAG) and the lowest adjacent grade (LAG).  a) Top of bottom floor (including basement, crawlspace, ob) Top of Building Diagrams 6–9 with permanent flood opening (elevation C2.b in the diagrams) of the building is  E3. Attached garage (top of slab) is fee  E4. Top of platform of machinery and/or equipment servicing  E5. Zone AO only: If no flood depth number is available, is the ordinance?    Yes  No  Unknown. The local of	the measurement used. In Puerto Ricc the appropriate boxes to show whether or enclosure) is feo or enclosure) is	only, enter meters.  the elevation is above or below the highest adjacent  et
	NER (OR OWNER'S REPRESENT	
The property owner or owner's authorized representative who or Zone AO must sign here. The statements in Sections A, B, a		
Property Owner's or Owner's Authorized Representative's Nam	ne	
Address	City	State ZIP Code
Signature	Date	Telephone
Comments		☐ Check here if attachments
	COMMUNITY INFORMATION (OP	
The local official who is authorized by law or ordinance to administ of this Elevation Certificate. Complete the applicable item(s) and s	ign below. Check the measurement used	I in Items G8–G10. In Puerto Rico only, enter meters.
G1. The information in Section C was taken from other doc is authorized by law to certify elevation information. (In	cumentation that has been signed and s ndicate the source and date of the eleve	ealed by a licensed surveyor, engineer, or architect who ation data in the Comments area below.)
G2.   A community official completed Section E for a building	T. 15	
G3.   The following information (Items G4–G10) is provided	for community floodplain management	purposes.
G4. Permit Number G5. Date Permit Issue	ed G6. Date C	ertificate Of Compliance/Occupancy Issued
G7. This permit has been issued for: New Construction	☐ Substantial Improvement	
G8. Elevation of as-built lowest floor (including basement) of the	e building: feet	meters Datum
G9. BFE or (in Zone AO) depth of flooding at the building site:	feet	meters Datum
G10. Community's design flood elevation:		meters Datum
Local Official's Name	Title	
Community Name	Telephone	
Signature $Q.8$ . $5/19$	Date	
Comments Recommend LON	IR-F	☐ Check here if attachments

# Building Photographs See Instructions for Item A6.

IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Blo 5015 Maggie Lane	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 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." 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.



Left Side View



## **Building Photographs**

Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

Policy Number:

5015 Maggie Lane 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



