## U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

National Flood Insurance Program

## **ELEVATION CERTIFICATE**

**IMPORTANT:** Follow the instructions on pages 1-9.

OMB No. 1660-0008 Expiration Date: July 31, 2015

					PROPERTY I	NFORMAT	ION	FOR IN	ISURANCE C	COMPANY USE	
A1.	Building Owner's Name BRUCE HALL AND DALE HALL							Policy Number:			
A2.	Building Street Address (including Apt., Unit, Suite, and/or I 8122 S. LAGOON DRIVE				Bldg. No.) or P.O. Route and Box No.				Company NAIC Number:		
	City PANAMA CITY BE	ACH				<sup>e</sup> FL		IP Cod	<sup>le</sup> 32408		
A3.	Property Description (Lot and PARCEL ID#30196-070-	000, LO	T 11, BLOCK D,	SILVE	R SANDS UN	T 1, SEC	6, TOWNSHIP 4	SOUT	H, RANGI	≣ 15 WEST	
A7.	Latitude/Longitude: Lat. N.3 Attach at least 2 photographs	Od09'54 s of the bi	" ullding if the Certifi - losure(s):	Long	. W 85d46'50" being used to ob	tain flood in	Horizontal Insurance. building with an att	ached ;		AI/A	
	b) No. of permanent flood or	enings in	the crawlspace or	0		b) N	umber of permanen	t flood	openings in	the attached garage	
	enclosure(s) within 1.0 for c) Total net area of flood ope			N/A	sa in		ithin 1.0 foot above otal net area of floor	•	•	-N/A	
	d) Engineered flood opening		Yes 🖾 No		34	•	ngineered flood ope	•	<b>-</b>	_N/Asq in	
		SECT	10N B _ EI 00D	INCIII	DANCE DATE	·	M) INFORMATIO				
R1.	NFIP Community Name & Com			11130	B2. County Nan	<del></del>	W W W W W W W W W W W W W W W W W W W	114	R3	State	
	BAY COUNTY 120004			ata .	BAY		1 DO Good 7/-			State ORIDA	
В4.		H H	06/02/2009		B7. FIRM Panel Revised Da 06/02/2	e	B8. Flood Zone(s	) Ba		d Elevation(s) (Zone ase flood depth) 8	
B10	Indicate the source of the Ba										
DIO			inity Determined		ner/Source:						
B11	Indicate elevation datum use	d for BFE	in Item B9:	NGVD	1929 🔀 NA	/D 1988	☐ Other/Source				
B12	. Is the building located in a Co		~	-	•	erwise Prot	ected Area (OPA)?	☐ Ye	s 🔀 No		
	Designation Date:/.	/	CBRS	(	OPA						
		SECTIO	N C – BUILDING	ELEV	ATION INFOR	MATION (	SURVEY REQUIF	ED)			
C1.	Building elevations are based on: Construction Drawings* Building Under 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: Vertical Datum: 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. Check the measurement used.										
	a) Top of bottom floor (includ	sure floor)	9.1	🔀 feet		meters					
	b) Top of the next higher floo	r				N/A	🔀 feet		meters		
	c) Bottom of the lowest horiz		ctural member (V 2	Zones o		<u>N/A</u>	🔀 feet		meters		
	d) Attached garage (top of sig					<u>N/A</u>	🔀 feet		meters		
	e) Lowest elevation of machi- (Describe type of equipme	nt and lo	cation in Comment	s)	aing	•	🔀 feet	_	meters		
	f) Lowest adjacent (finished)	-				<u>5</u> . <u>1</u> 5.2	Si feet		meters		
	g) Highest adjacent (finished) h) Lowest adjacent grade at 1				ncluding	N/A	⊠ feet ⊠ feet		meters meters	1	
	structural support	05051		/AD F	NOINEED OD	ADOURTE	OT OFFICIOATI			<del>/</del>	
				<del>i-</del> -			CT CERTIFICATI		<del></del>	<del>/</del>	
inforr	certification is to be signed and mation. I certify that the informa erstand that any false statemer	ation on ti	his Certificate repre	sents n	ny best efforts to	interpret th	e data availabie.	ion		<del>/</del>	
X Ch	eck here if comments are provincek here if attachments.		ack of form.	Were la			on A provided by a ☐ No				
	ifier's Name LIAM E. MCDANIEL, P.S.J	<u></u>	<u></u>			License N	Number 300 L.S. #4369			PLACE SEAL	
Title				Compa	y Name EVEL SURVE	_ •	MAPPING, INC		/	HERE . A	
	ess LAND SURVE			City	LVLL GURVE	-,	ZIP Code			,20.14	
Add:	9 MAINE AVENUE	•	r i		HAVEN	State FL	32444			1701	

## **ELEVATION CERTIFICATE**, page 2

IMPORTANT: In these spaces, copy the c	District	FOR INSURANCE COMPANY USE Policy Number:					
Building Street Address (including Apt., Un	oga						
8122 S. LAGOON DRIVE  City  PANAMA CITY BEACH	State FL	ZIP Code 32408	ACL DE N	Co	mpany NAIC Nur	mber:	
	- SURVEYOR, ENGINEER, O		RTIFICAT	ION (CON.	TINUED)		
Copy both sides of this Elevation Certificat			AND DESCRIPTION OF THE PARTY OF	HONOR DUN		Right IV A	
	AIR CONDITION PAD OUTS		market and	Mirch April	line rall mad	ancien 2 v	
SECTION CZ. HEWE, 16	AUTOURDITION FAD 0015	DE OF STRUCTO	//\L				
SE / CAMP TO THE DESTRUCTION OF THE	SOSTOR LINE HORSE						
	d to obtain the dune armod.	militare is complete to	street it an	mand off to	diagnosis i	C Preditional Anna Co	
Signature Passes 2 and solde in		Date 03/20/2	2014				
SECTION E - BUILDING ELEVAT	TION INFORMATION (SURVE	Y NOT REQUIRED	) FOR ZO	NE AO AN	ID ZONE A	(WITHOUT BFE)	
For Zones AO and A (without BFE), completer Items E1–E4, use natural grade, if available is a completer of the complete is a complete in the complete in the complete is a complete in the complete in the complete in the complete is a complete in the complete in	lable. Check the measurement us	sed. In Puerto Rico o	nly, enter m	eters.	ners bore to		
E1. Provide elevation information for the for grade (HAG) and the lowest adjacent g		e boxes to show whe	ther the ele	vation is abo	ove or below th	ne highest adjacent	
a) Top of bottom floor (including basen				meters	above or	below the HAG.	
b) Top of bottom floor (including basen				meters		below the LAG.	
E2. For Building Diagrams 6–9 with perma		ection A Items 8 and	1111				
the next higher floor (elevation C2.b in	the diagrams) of the building is	elvon- 1		meters		below the HAG.	
E3. Attached garage (top of slab) is	BA suinment contains the building to	O BUIL		meters		below the HAG.	
E4. Top of platform of machinery and/or e E5. Zone AO only: If no flood depth numbe				meters		below the HAG.	
	nown. The local official must certificate			e with the CC	manuality S 1100	oupiain management	
SECTION F	- PROPERTY OWNER (OR O	WNER'S REPRES	ENTATIVI	E) CERTIF	ICATION	In the child of the last	
The property owner or owner's authorized	representative who completes Se	ctions A, B, and E for	Zone A (wi			mmunity-issued BFE)	
Zone AO must sign here. The statements	in Sections A, B, and E are correc						
Property Owner or Owner's Authorized Rep	resentative's Name	1 and	ykenten)		things of the Per	Collegety of Style // 2	
Address	A DOMESTIC MANDRINGS AND ASSESSMENT	City	22-1530	State	ZIP C	ode	
Signature	orga Place college encocombination	Date	karat men	Teleph	none	na walne stander	
Comments		and of new arm or are	personal promise	oraș est fo	to by marine A	management and a second	
					ravil a projector	Catholic rest	
and and the second	m 1 9	post east Avia io a	otiu leetu.	Marie Wa	☐ Chec	k here if attachments	
_casteol_1 _/pai	SECTION G - COMMUNI		•		Next Year plan in	का निर्माण है।	
The local official who is authorized by law of G of this Elevation Certificate. Complete the	r ordinance to administer the comme applicable item(s) and sign below	munity's floodplain ma	nagement o	ordinance car	G10. In Puerto	ctions A, B, C (or E), ar	
G1. The information in Section C was							
who is authorized by law to certif	y elevation information. (Indicate	the source and date	e of the ele	vation data	in the Comme	nts area below.)	
G2. A community official completed S					-issued BFE) o	or Zone AO.	
G3.   The following information (Items	G4-G9) is provided for communi	ty floodplain manage	ement purp	oses.	(horient) ine		
G4. Permit Number RB 13-1012	G5. Date Permit Issued	-27-/3 G6.	Date Certi	ficate Of Cor	mpliance/Occu	pancy Issued	
110.01.12	New Construction Subst	tantial Improvement	abited at	17			
G8. Elevation of as-built lowest floor (incl				meters	Datum		
G9. BFE or (in Zone AO) depth of flooding	at the building site:	AND RESEARCH TO SERVICE AND THE SERVICE AND TH	☐ feet	meters	Datum		
G10. Community's design flood elevation:	mau 18 b.S. (was Section 1991		feet	meters	Datum		
Local Official's Name	West Name of Classics of	Title	- JIEW D	- States	mouth san emi-	doubted to some control	
Community Name		Telephone		1			
Signature Q. 8.	3/20/14	Date		- 1	7		
Comments	AND	0.00		9	1		
Comical - Ma	O CHARLES (THE )	#105.05.27 L	01	1 .			
6 40/8	& Shows compli	1 1 1 1 1 1	111	//	☐ Chec		

FEMA Form 086-0-33 (7/12)

Replaces all previous editions.











