

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

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

SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name Northwest Florida Holdings Inc	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 13300 Allanton Road	Company NAIC Number:
City Panama City State FL ZIP Code 32404	

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
 Parcel ID # 04027-010-000, a portion of Sec. 19, T5S, R12W - Warehouse

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential
 A5. Latitude/Longitude: Lat. 30°02'25.19"N Long. 85°28'41.64"W Horizontal Datum: NAD 1927 NAD 1983
 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.
 A7. Building Diagram Number 1A
 A8. For a building with a crawlspace or enclosure(s):
 a) Square footage of crawlspace or enclosure(s) N/A-0 sq ft
 b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A-0
 c) Total net area of flood openings in A8.b N/A-0 sq in
 d) Engineered flood openings? Yes No
 A9. For a building with an attached garage:
 a) Square footage of attached garage N/A sq ft
 b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0
 c) Total net area of flood openings in A9.b 0 sq in
 d) Engineered flood openings? Yes No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number Bay County 120004	B2. County Name Bay	B3. State Florida			
B4. Map/Panel Number 12005C0461	B5. Suffix H	B6. FIRM Index Date 06/02/2009	B7. FIRM Panel Effective/Revised Date 06/02/2009	B8. Flood Zone(s) A	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 7'

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
 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

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. In Puerto Rico only, enter meters.
 Benchmark Utilized: NGS Allanton East Bay BM5 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.

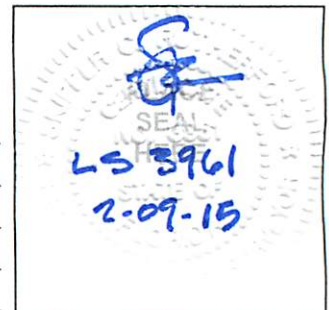
		Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>9.76</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	<u>N/A</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>N/A</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>9.96</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>8.1</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>9.3</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
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

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
 Check here if attachments.

Certifier's Name Skipper C Rutherford	License Number LS3961
Title President	Company Name SCR & Associates NWFL, Inc.
Address PO Box 958	City Lynn Haven State FL ZIP Code 32444
Signature	Date 2/09/2015 Telephone 850-265-6979



ELEVATION CERTIFICATE

A FILING OF THIS DOCUMENT WITH THE COUNTY CLERK OF BROWARD COUNTY, FLORIDA, SHALL CONSTITUTE NOTICE TO ALL PERSONS WHOSE NAMES ARE LISTED HEREIN.

Important: Read the instructions on pages 1-8.

Flood Hazard
 Flood Insurance
 Flood Elevation Certificate
 Flood Insurance Certificate
 Flood Insurance Policy
 Flood Insurance Certificate
 Flood Insurance Policy
 Flood Insurance Certificate
 Flood Insurance Policy

SECTION A - PROPERTY INFORMATION

1. Property Address (including apt. and suite numbers, street name and number): _____
 2. City: _____ State: _____ Zip Code: _____
 3. Parcel ID #: _____
 4. Parcel Description (Lot and Block Number, Tax Parcel Number, Legal Description, etc.): _____
 5. Flood Hazard: Flood Hazard No Flood Hazard

6. Elevation of finished floor (ceiling, wall, or other surface) at the lowest elevation of the building: _____
 7. Elevation of finished floor (ceiling, wall, or other surface) at the highest elevation of the building: _____
 8. Elevation of finished floor (ceiling, wall, or other surface) at the lowest elevation of the building (if different from 6): _____
 9. Elevation of finished floor (ceiling, wall, or other surface) at the highest elevation of the building (if different from 7): _____
 10. Elevation of finished floor (ceiling, wall, or other surface) at the lowest elevation of the building (if different from 8): _____
 11. Elevation of finished floor (ceiling, wall, or other surface) at the highest elevation of the building (if different from 9): _____

SECTION B - FLOOD INFORMATION (FIRM INFORMATION)

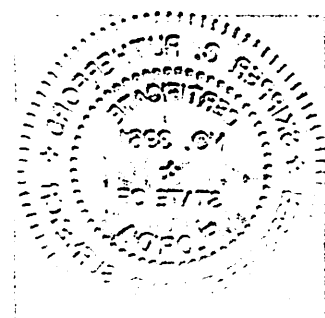
12. Flood Hazard: Flood Hazard No Flood Hazard
 13. Flood Insurance: Flood Insurance No Flood Insurance
 14. Flood Insurance Certificate: Flood Insurance Certificate No Flood Insurance Certificate
 15. Flood Insurance Policy: Flood Insurance Policy No Flood Insurance Policy
 16. Flood Insurance Certificate: Flood Insurance Certificate No Flood Insurance Certificate
 17. Flood Insurance Policy: Flood Insurance Policy No Flood Insurance Policy

SECTION C - BUILDING ELEVATION INFORMATION (FIRM REQUIRED)

18. Building Elevation Information (FIRM REQUIRED)
 19. Building Elevation Information (FIRM REQUIRED)
 20. Building Elevation Information (FIRM REQUIRED)
 21. Building Elevation Information (FIRM REQUIRED)
 22. Building Elevation Information (FIRM REQUIRED)
 23. Building Elevation Information (FIRM REQUIRED)
 24. Building Elevation Information (FIRM REQUIRED)
 25. Building Elevation Information (FIRM REQUIRED)
 26. Building Elevation Information (FIRM REQUIRED)
 27. Building Elevation Information (FIRM REQUIRED)
 28. Building Elevation Information (FIRM REQUIRED)
 29. Building Elevation Information (FIRM REQUIRED)
 30. Building Elevation Information (FIRM REQUIRED)

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

31. I, _____, a duly licensed _____, do hereby certify that the information provided on this certificate is true and correct to the best of my knowledge and belief.
 32. I, _____, a duly licensed _____, do hereby certify that the information provided on this certificate is true and correct to the best of my knowledge and belief.
 33. I, _____, a duly licensed _____, do hereby certify that the information provided on this certificate is true and correct to the best of my knowledge and belief.
 34. I, _____, a duly licensed _____, do hereby certify that the information provided on this certificate is true and correct to the best of my knowledge and belief.
 35. I, _____, a duly licensed _____, do hereby certify that the information provided on this certificate is true and correct to the best of my knowledge and belief.



ELEVATION CERTIFICATE, page 2

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. 1330 Allanton Road	Policy Number:
City Panama City State FL ZIP Code 32404	Company NAIC Number:

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

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments C2.e) Lowest machinery used was the bottom of what appears to be the electrical box on the interior of the building. The HVAC Unit and other machinery are on the roof.



Signature Skipper C Rutherford

Date 2/09/2015

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 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 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 of Instructions), the next higher floor (elevation 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.

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

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

Check here if attachments.

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–G10. In Puerto Rico only, enter meters.

- 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–G10) is provided for community floodplain management purposes.

G4. Permit Number CB13-0244	G5. Date Permit Issued 12-30-13	G6. Date Certificate Of Compliance/Occupancy Issued 2-19-15
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- 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 Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters Datum _____
- G10. Community's design flood elevation: _____ feet meters Datum _____

Local Official's Name	Title
Community Name	Telephone
Signature	Date

Comments

Check here if attachments.

Building Photographs

See Instructions for Item A6.

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.
1330 Allanton Road

Policy Number:

City Panama Cty

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.

East Side



West Side



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.
1330 Allanton Road

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

North Side



South Side

