

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

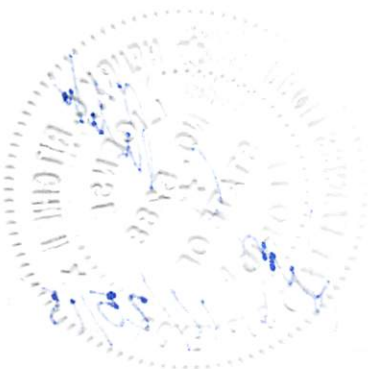
OMB No. 1660-0008
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name TIM AND JILL NEWITT		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5205 FINISTERRE DRIVE		Company NAIC Number:
City PANAMA CITY BEACH	State FL	ZIP Code 32407
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PARCEL I.D. NO. 31424-532-000		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL		
A5. Latitude/Longitude: Lat. N30D08'48.40" Long. W85D44'22.10" Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 1-B		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) N/A sq ft		a) Square footage of attached garage 940 sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A
c) Total net area of flood openings in A8.b N/A sq in		c) Total net area of flood openings in A9.b N/A 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 UNINCORPORATED BAY COUNTY 120004			B2. County Name BAY		B3. State FL	
B4. Map/Panel Number 12005C0338	B5. Suffix H	B6. FIRM Index Date 06/02/2009	B7. FIRM Panel Effective/ Revised Date 06/02/2009	B8. Flood Zone(s) AE AND X	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 8.00 FEET NAVD 88	
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____						
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/Source: _____						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Designation Date: <u>9</u> / <u>18</u> / <u>2</u> <input checked="" type="checkbox"/> CBRS <input type="checkbox"/> OPA						

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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: NAIL AND DISK LB#2372 EL.=4.58' Vertical Datum: NAVD 88 Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> 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>10 . 0</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>22 . 2</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>8 . 0</u> <input checked="" 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 . 0</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>8 . 0</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>8 . 1</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 checked="" 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.				
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Check here if attachments.				
Certifier's Name HENRY C. RITCHIE, II	License Number PSM 5288			
Title PRESIDENT	Company Name RITCHIE AND ASSOCIATES, INC.			
Address 949 JENKS AVENUE	City PANAMA CITY	State FL		ZIP Code 32401
Signature <i>Henry C. Ritchie</i>	Date 11/25/2015	Telephone (850) 914-2774		



John C. Miller

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. 5205 FINISTERRE DRIVE			Policy Number:
City PANAMA CITY BEACH	State FL	ZIP Code 32407	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 BENCH MARK: NAIL AND DISK #2372 BOUGAINVILLEA CIRCLE AND FINISTERRE DRIVE
ELEVATION=4.58 FEET NAVD 88
NOTE: LOWEST MACHINERY ELEVATION IS A/C PAD AT 9.0 FEET NAVD 88

Signature  Date 11/25/2015

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 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–G9) is provided for community floodplain management purposes.

G4. Permit Number R.B.14-1063	G5. Date Permit Issued 10-21-14	G6. Date Certificate Of Compliance/Occupancy Issued
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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 **D.S.** Date **11/30/15**

Comments _____

Check here if attachments.

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

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

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name: **TIM AND JILL NEWITT**
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or FO, Route and Box No.: **5205 FINISTERRE DRIVE**
 City: **PANAMA CITY BEACH** State: **FL** ZIP Code: **32407**
 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.):
PARCEL I.D. NO. 31424-532-000

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): **RESIDENTIAL**
 A5. Latitude/Longitude: Lat. **N30D08'48.40"** Long. **W85D44'22.10"**
 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.
 A7. Building Diagram Number: **1-B**
 A8. For a building with a crawlspace or enclosure(s):
 a) Square footage of crawlspace or enclosure(s): **N/A** sq ft
 b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade: **N/A**
 c) Total net area of flood openings in A8.b: **N/A** sq in
 d) Engineered flood openings? Yes No
 A9. For a building with an attached garage:
 a) Square footage of attached garage: **940** sq ft
 b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade: **N/A**
 c) Total net area of flood openings in A9.b: **N/A** sq in
 d) Engineered flood openings? Yes No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. FIRM Community Name & Community Number: **UNINCORPORATED BAY COUNTY 120004**
 B2. County Name: **BAY** B3. State: **FL**
 B4. Map/Panel Number: **12005C0338** B5. Suffix: **H**
 B6. FIRM Index Date: **06/02/2009** B7. FIRM Panel Effective/Revised Date: **06/02/2009**
 B8. Flood Zone(s): **AE AND X** B9. Base Flood Elevation(s) (Zone A0, use base flood depth): **8.00 FEET NAVD 88**

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: **9 / 18 / 2** 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: **NAIL AND DISK LB#2372 EL.=4.58**
 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)	10.0	feet	<input checked="" type="checkbox"/>	meters	<input type="checkbox"/>
b) Top of the next higher floor	22.2	feet	<input checked="" type="checkbox"/>	meters	<input type="checkbox"/>
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A	feet	<input checked="" type="checkbox"/>	meters	<input type="checkbox"/>
d) Attached garage (top of slab)	8.0	feet	<input checked="" type="checkbox"/>	meters	<input type="checkbox"/>
e) Lowest elevation of machinery or equipment servicing the building	9.0	feet	<input checked="" type="checkbox"/>	meters	<input type="checkbox"/>
(Describe type of equipment and location in Comments)					
f) Lowest adjacent (finished) grade next to building (LAG)	8.0	feet	<input checked="" type="checkbox"/>	meters	<input type="checkbox"/>
g) Highest adjacent (finished) grade next to building (HAG)	8.1	feet	<input checked="" type="checkbox"/>	meters	<input type="checkbox"/>
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	N/A	feet	<input checked="" type="checkbox"/>	meters	<input type="checkbox"/>

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: **HENRY C. RITCHIE, II** License Number: **PSM 5288**
 Title: **PRESIDENT** Company Name: **RITCHIE AND ASSOCIATES, INC.**
 Address: **949 JENKS AVENUE** City: **PANAMA CITY** State: **FL** ZIP Code: **32401**
 Signature: *Henry C. Ritchie* Date: **11/25/2015** Telephone: **(850) 914-2774**

Replaces all previous editions.

See reverse side for continuation.



Handwritten signature or initials in blue ink.

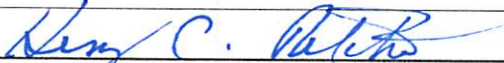
ELEVATION CERTIFICATE, page 2

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. 5205 FINISTERRE DRIVE	Policy Number:
City PANAMA CITY BEACH	State FL
ZIP Code 32407	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 BENCH MARK: NAIL AND DISK #2372 BOUGAINVILLEA CIRCLE AND FINISTERRE DRIVE
ELEVATION=4.58 FEET NAVD 88
NOTE: LOWEST MACHINERY ELEVATION IS A/C PAD AT 9.0 FEET NAVD 88

Signature  Date 11/25/2015

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 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–G9) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
G7. This permit has been issued for: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement		
G8. Elevation of as-built lowest floor (including basement) of the building: _____ . _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____		
G9. BFE or (in Zone AO) depth of flooding at the building site: _____ . _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____		
G10. Community's design flood elevation: _____ . _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____		

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments _____

Check here if attachments.

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