

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires July 31, 2015

Important: Read the instructions on pages 1-9.

JOB No. 13-06-15ZEC		SECTION A - PROPERTY INFORMATION		For Insurance Company Use:	
A1. Building Owner's Name JEREMY BOHN/ BOHN REAL ESTATE DEVELOPMENT				Policy Number	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 917 DOLPHIN HARBOUR 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.)
LOT 9 BLOCK C DOLPHIN BAY PHASE ONE, BAY COUNTY TAX PARCEL NUMBER 27343-547-000

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL

A5. Latitude/Longitude: Lat. 30°11'50" Long. -85°45'07" 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)	<u>0</u> sq in
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	<u>0</u>
c) Total net area of flood openings in A8.b	<u>0</u> sq ft
d) Engineered flood openings?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

A9. For a building with an attached garage:

a) Square footage of attached garage	<u>460</u> sq ft
b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade	<u>0</u>
c) Total net area of flood openings in A9.b	<u>0</u> sq in
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 BAY 120004		B2. County Name BAY		B3. State FL	
B4. Map/Panel Number 12005C0309	B5. Suffix H	B6. FIRM Index Date 6/2/09	B7. FIRM Panel Effective/Revised Date 6/2/09	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 7 FEET

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: (Describe)

B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe)

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 USC&GS L-182 Vertical Datum 1988

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.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>8.15</u> feet
b) Top of the next higher floor	<u>N/A</u>
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>
d) Attached garage (top of slab)	<u>7.80</u> feet
e) Lowest elevation of machinery or equipment servicing the building	<u>8.03</u> feet (Describe type of equipment and location in Comments)
f) Lowest adjacent (finished) grade next to building (LAG)	<u>6.60</u> feet
g) Highest adjacent (finished) grade next to building (HAG)	<u>6.95</u> feet
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>6.60</u> feet

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.

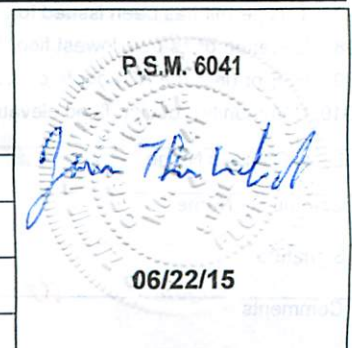
Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Certifier's Name ZANNIE THOMAS WHITE, JR. License Number 6041

Title OWNER Company Name Z'S LAND SURVEYING AND MAPPING, INC.

Address 2283 SEAY ROAD City COTTONDALE State FL ZIP Code 32431

Signature [Signature] Date 06/22/15 Telephone 850.579.2315



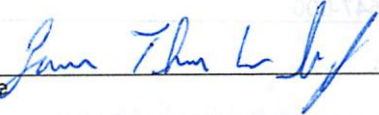
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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. 917 DOLPHIN HARBOUR 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 C. (E) AIRCONDITIONER ON WOOD DECK

Signature 

Date 06/22/15

Check here if attachments

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

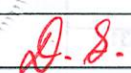
SECTION G - COMMUNITY INFORMATION (OPTIONAL)

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 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 R B15-0037	G5. Date Permit Issued 1-21-15	G6. Date Certificate Of Compliance/Occupancy Issued 6-24-15
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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 (PR) Datum
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum
- G10. Community's design flood elevation _____ feet meters (PR) Datum

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature 	Date 6-23-15
Comments _____	

THE BAY CO. BLDG. DIV HAS
REVIEWED
THIS PLAN FOR THE PURPOSE
OF PERMITTING CONST

Check here if attachments
Replaces all previous editions.

Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 917 DOLPHIN HARBOUR DRIVE	For Insurance Company Use: Policy Number:
City PANAMA CITY BEACH State FL ZIP Code 32407	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.	

REAR VIEW 06/19/15



FRONT VIEW 06/19/15



Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	For Insurance Company Use:
City State ZIP Code	Policy 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."	