

DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
ELEVATION CERTIFICATE

OMB Control Number: 1660-0008
Expiration: 11/30/2018

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16

pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION FORM INSURANCE COMPANY USE

Building Owner's Name
DO LUZ Policy Number:

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
NORTH BAY DRIVE Company NAIC Number:

City/Town/Village/County
LYNN HAVEN State FL Zip Code 32444

Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
7, BLOCK 44, SECTION 2, TOWNSHIP 3S, RANGE 14W, PARCEL ID#08802-000-000, COLLEGE POINT 1ST ADDITION

Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)
Horizontal Datum: NAD 1927 NAD 1983

Latitude/Longitude: Lat. N30d15'04" Long. W85d36'41"

Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

Building Diagram Number 1B
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) _____ sq ft	a) Square footage of attached garage <u>670</u> sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq in	c) Total net area of flood openings in A9.b _____ sq in
Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No	d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

FIP Community Name & Community Number
COUNTY 1250004 B2. County Name BAY B3. State FL

Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/ Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
12005C0240	H	06/02/2009	06/02/2009	AE	7,0

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: _____

Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source: _____

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)

Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
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.
An Elevation Certificate will be required when construction of the building is complete.

Benchmark Utilized: BAY 26 FL DNR Vertical Datum: EL 1865 NAVD88

Elevation datum used for the elevations in items a) through h) below. NGVD 1929 NAVD 1988
 Other/Source: _____

Elevation datum used for building elevations must be the same as that used for the BFE. Check the measurement used.

Top of bottom floor (including basement, crawlspace, or enclosure floor)	10	-	0	<input checked="" type="radio"/> feet <input type="radio"/> meters
Top of the next higher floor	22	-	0	<input checked="" type="radio"/> feet <input type="radio"/> meters
Bottom of the lowest horizontal structural member (V Zones only)	NA	-	NA	<input checked="" type="radio"/> feet <input type="radio"/> meters
Attached garage (top of slab)	10	-	3	<input checked="" type="radio"/> feet <input type="radio"/> meters
Lowest elevation of machinery or equipment servicing the building (describe type of equipment and location in Comments)	10	-	8	<input checked="" type="radio"/> feet <input type="radio"/> meters
Lowest adjacent (finished) grade next to building (LAG)	5	-	2	<input checked="" type="radio"/> feet <input type="radio"/> meters
Highest adjacent (finished) grade next to building (HAG)	6	-	5	<input checked="" type="radio"/> feet <input type="radio"/> meters
Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	NA	-	NA	<input checked="" type="radio"/> feet <input type="radio"/> meters

ELEVATION CERTIFICATE

1023 NORTH BAY DRIVE

LYNN HAVEN

FL

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32444

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

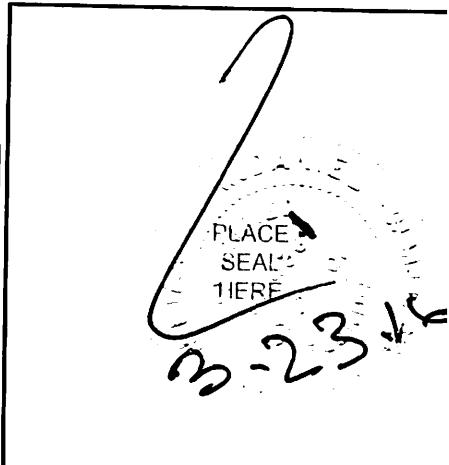
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Check here if attachments.

Were latitude and longitude in Section A provided by a licensed land surveyor?

Yes No

Certifier's Name WILLIAM E. MCDANIEL P.S.M.		License Number L.B.#5800 L.S.#4369	
Title REGISTERED LAND SURVEYOR	Company Name SEA LEVEL SURVEY AND MAPPING, INC.		
Address 1219 MAINE AVENUE	City LYNN HAVEN	State FL	Zip Code 32444
Signature	Date 03/15/2016	Telephone +1 (850) 265-4800	



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

Comments (including type of equipment and location, per C2(e), if applicable)
ITEM C2E AIR CONDITIONER PAD OUTSIDE OF STRUCTURE

Signature _____ Date 03/15/2016

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 -G10) is provided for community floodplain management purposes.

G4. Permit Number RB15-0509	G5. Date Permit Issued 5-13-15	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 **3-24-16**

Comments

Check here if attachments.

BUILDING PHOTOGRAPHS

See instructions for Item A6

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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. 1023 NORTH BAY DRIVE			Policy Number:	
City LYNN HAVEN	State FL	Zip Code 32444	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.

