

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

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

| SECTION A – PROPERTY INFORMATION | | | | FOR INSURANCE COMPANY USE | |
|---|-----------------|-----------------------------------|--|---------------------------|---|
| A1. Building Owner's Name D.R. Horton | | | | Policy Number: | |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6116 Riverbrooke Drive | | | | Company NAIC Number: | |
| City Panama City | | State Florida | | ZIP Code 32404 | |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 62, Olde Towne Village Parcel # 05658-300-310 | | | | | |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u> | | | | | |
| A5. Latitude/Longitude: Lat. <u>30°15'36.95"N</u> Long. <u>85°31'47.48"W</u> 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 <u>1A</u> | | | | | |
| A8. For a building with a crawlspace or enclosure(s): | | | | | |
| a) Square footage of crawlspace or enclosure(s) <u>0</u> sq ft | | | | | |
| b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____ | | | | | |
| c) Total net area of flood openings in A8.b _____ sq in | | | | | |
| d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| A9. For a building with an attached garage: | | | | | |
| a) Square footage of attached garage <u>416</u> sq ft | | | | | |
| b) Number 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 _____ sq in | | | | | |
| d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION | | | | | |
| B1. NFIP Community Name & Community Number 1Bay County - 120004 | | | B2. County Name Bay | | B3. State Florida |
| B4. Map/Panel Number 12005C0244 | B5. Suffix H | B6. FIRM Index Date 06/02/2009 | B7. FIRM Panel Effective/ Revised Date 06/02/2009 | B8. Flood Zone(s) X | B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) |
| 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA | | | | | |

SR 9-27-16

EXHIBIT A

(Continued from page 1)

| Section 1 General Information | Section 2 Detailed Description | Section 3 Financial Data | Section 4 Administrative |
|--|---|---|--|
| <p>1. Name of Project: _____</p> <p>2. Location: _____</p> <p>3. Date of Report: _____</p> | <p>1. Objectives: _____</p> <p>2. Methods: _____</p> <p>3. Results: _____</p> | <p>1. Budget: _____</p> <p>2. Expenditures: _____</p> <p>3. Income: _____</p> | <p>1. Personnel: _____</p> <p>2. Equipment: _____</p> <p>3. Other: _____</p> |
| <p>4. Summary: _____</p> <p>5. Conclusions: _____</p> | <p>6. Recommendations: _____</p> <p>7. References: _____</p> | <p>8. Appendix A: _____</p> <p>9. Appendix B: _____</p> | <p>10. Appendix C: _____</p> <p>11. Appendix D: _____</p> |

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

| | | | |
|---|------------------|-------------------|----------------------------------|
| 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. 6116 Riverbrooke Drive | | | Policy Number: |
| City Panama City | State Florida | ZIP Code 32404 | Company NAIC Number |

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: DOT 46-03-D04V 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) | 45.0 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor | _____ | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | _____ | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab) | 44.54 | <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) | 44.77 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | 44.4 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | 44.7 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support | _____ | <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.

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 LS 3961 | |
| Title Surveyor & Mapper / President | | |
| Company Name SCR & Associates NWFL, Inc | | |
| Address PO Box 958 | | |
| City Lynn Haven | State Florida | |
| Signature | Date 09/27/2016 | Telephone (850) 265-6979 |

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

Comments (including type of equipment and location, per C2(e), if applicable)

- *** Signature on page 2 is not valid unless initialed, dated and raised seal on bottom right of page 1
- *** Surveyor will not be responsible for any elevation data that has been changed by others.

B8. & B.9. It is my opinion that the property lies within Zones X & A, but the improvements lie fully within Zone X. The portion of the property that lies within Zone A has a community determined BFE of 42.0'.

C2.a) The finished floor is 45.03. There was a glitch which would not allow me to save 2 decimals.

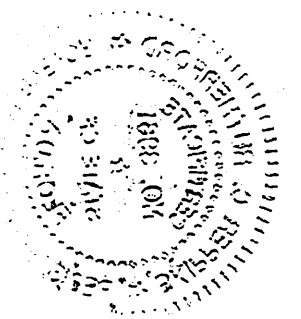
C2.e) Lowest machinery used was bottom of HVAC Unit

UNITED STATES GOVERNMENT
OFFICE OF THE SECRETARY OF DEFENSE
WASHINGTON, D. C. 20301
MEMORANDUM FOR THE SECRETARY OF DEFENSE
SUBJECT: [Illegible]

[Illegible text block containing the main body of the memorandum, including a summary and detailed points.]

DATE: [Illegible] TIME: [Illegible]

[Illegible text block, possibly a second summary or a specific section header.]



[Illegible signature or initials]

[Illegible text block at the bottom of the page, possibly a distribution list or concluding remarks.]

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

| | | | | |
|---|------------------|-------------------|----------------------------------|--|
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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 1–2 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 *D.S.* Date *10/19/16* Telephone _____

Comments *See Attached Flood Survey.*

Check here if attachments.

ELEVATION CERTIFICATE

OMB No. 1660-0008
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|---|----------------------------------|-------------------|---------------------|
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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 | G5. Date Permit Issued | G6. Date Certificate of Compliance/Occupancy Issued |
|-------------------|------------------------|---|

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 (including type of equipment and location, per C2(e), if applicable)

Check here if attachments.

UNITED STATES GOVERNMENT
OFFICE OF THE SECRETARY OF DEFENSE

Approved for release by the NSA on 05-08-2014 pursuant to E.O. 13526

CLASSIFICATION AUTHORITY: 50 USC 1552

GROUP 1 - EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

EXEMPT FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

EXEMPT FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

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BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

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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.



Photo One

Photo One Caption Front View



Photo Two

Photo Two Caption Right Side View

INTERNATIONAL TRADE COMMISSION

Section 337 - Infringement of Intellectual Property Rights
Complaint filed by [Name] against [Name] on [Date]

Section 337 - Infringement of Intellectual Property Rights
Complaint filed by [Name] against [Name] on [Date]

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Complaint filed by [Name] against [Name] on [Date]

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Complaint filed by [Name] against [Name] on [Date]

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008
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ELEVATION CERTIFICATE

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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.



Photo One

Photo One Caption Rear View



Photo Two

Photo Two Caption Left Side View

ORIGINAL OF THE ORIGINAL

| | | |
|--|---|--|
| 1. Title of the document 2. Date of issue 3. Author's name | 4. Place of issue 5. Purpose of the document | 6. Distribution list 7. Remarks |
| 8. Date of receipt 9. Name of the recipient | 10. Signature of the sender 11. Signature of the recipient | 12. Date of receipt 13. Name of the recipient |

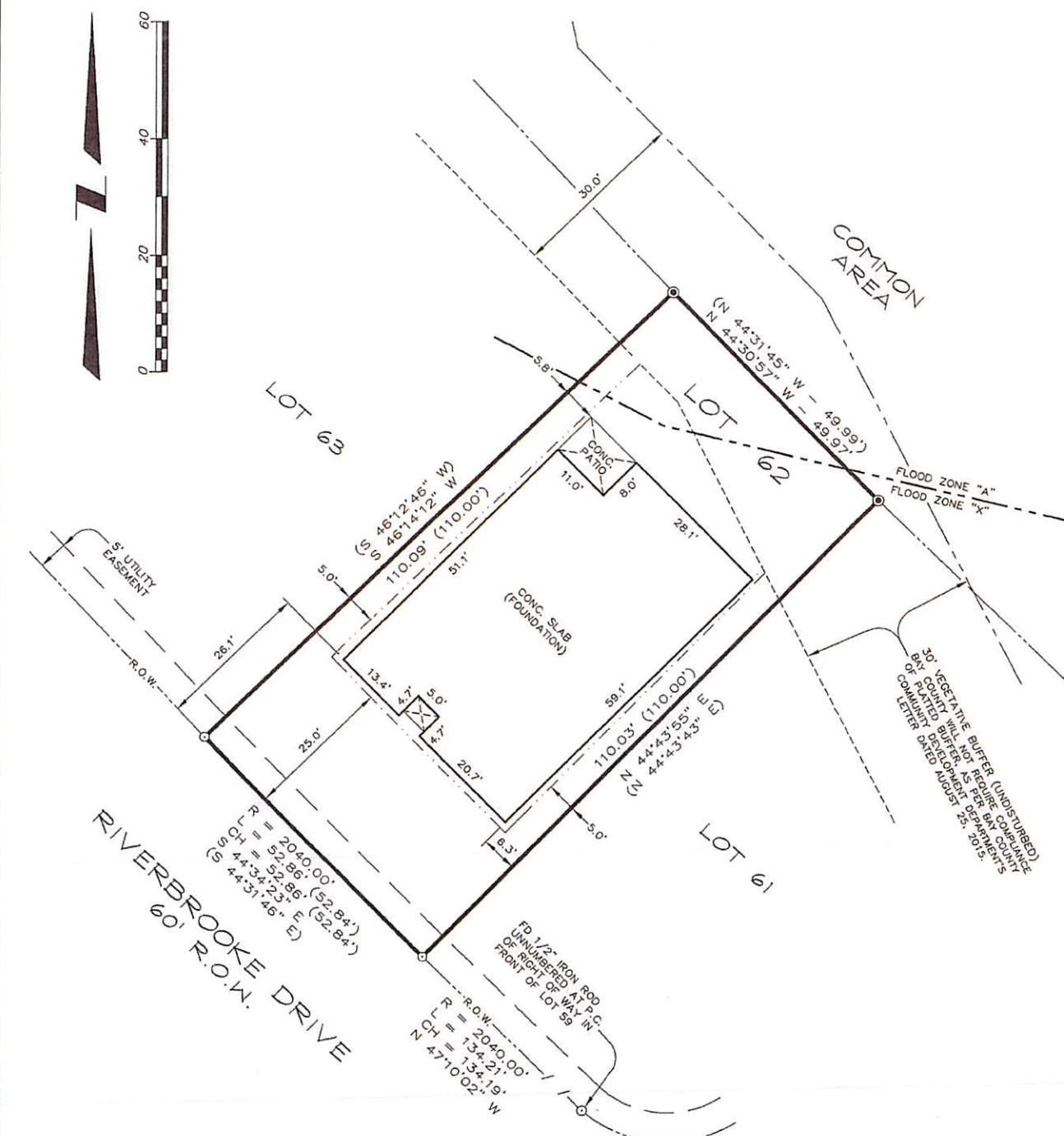
This document is a copy of the original and is not to be used as evidence. It is intended for the use of the recipient only.

The following information is provided for your reference:

1. The document is classified as "Confidential".
 2. It contains sensitive information and should be handled accordingly.
 3. It is to be kept in a secure location and not to be distributed outside the organization.
 4. It is to be destroyed after the completion of the project.
 5. It is to be kept for a period of 10 years after the completion of the project.

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DESCRIPTION

LOT 62, OLDE TOWNE VILLAGE, PHASE ONE, AS PER PLAT RECORDED IN PLAT BOOK 23, PAGES 62 OF THE PUBLIC RECORDS OF BAY COUNTY, FLORIDA.

SYMBOLS & ABBREVIATIONS

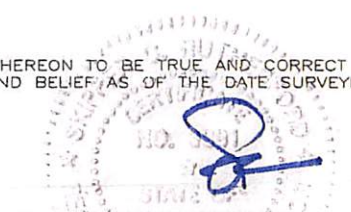
| | | | |
|--------|-------------------------------------|--------|------------------------------|
| # | MORE OR LESS | FD. | FOUND |
| ° | DEGREES | COR. | CORNER |
| ' | MINUTES OR FEET | No. | NUMBER |
| " | SECONDS OR INCHES | CONC. | CONCRETE |
| P.O.C. | POINT OF COMMENCEMENT | MON. | MONUMENT |
| P.O.B. | POINT OF BEGINNING | R.O.W. | RIGHT OF WAY |
| P.C. | POINT OF CURVATURE | S.R. | STATE ROAD |
| P.T. | POINT OF TANGENCY | C.R. | COUNTY ROAD |
| P.R.C. | POINT OF REVERSE CURVATURE | BLDG. | BUILDING |
| P.C.C. | POINT OF COMPOUND CURVATURE | EL. | ELEVATION |
| N | NORTH | Δ | DELTA/CENTRAL ANGLE |
| E | EAST | L | ARC LENGTH |
| S | SOUTH | CH | CHORD |
| W | WEST | OH | OVERHEAD UTILITIES |
| SEC. | SECTION | CL | CENTERLINE |
| T | TOWNSHIP | LB | LICENSED BUSINESS |
| R | RANGE OR RADIUS | LS | LICENSED SURVEYOR |
| O.R.B. | OFFICIAL RECORDS BOOK | F.B. | FIELD BOOK |
| P.L.S. | PROFESSIONAL LAND SURVEYOR | EFB | ELECTRONIC FIELD BOOK |
| PG. | PAGE | F.F. | FINISHED FLOOR |
| | SET 5/8" IRON ROD & CAP No. LS 3961 | | FD. 1/2" IRON ROD UNNUMBERED |

SURVEYOR'S NOTES:

- 1) THE UNDERSIGNED SURVEYOR HAS NOT BEEN PROVIDED A CURRENT TITLE OPINION OR ABSTRACT OF MATTERS AFFECTING THE TITLE OR BOUNDARY TO THE SUBJECT PROPERTY. IT IS POSSIBLE THAT THERE ARE DEEDS OF RECORD, UNRECORDED DEEDS, EASEMENTS OR OTHER INSTRUMENTS THAT COULD AFFECT THE BOUNDARIES.
- 2) RECORD MEASUREMENTS ARE SHOWN IN PARENTHESES.
- 3) A REVIEW OF THE FLOOD INSURANCE RATE MAP FOR BAY COUNTY FLORIDA, MAP No. 12005C0244H, REVISED JUNE 2, 2009 INDICATES THAT THE PARCEL SHOWN HEREON IS WITHIN ZONE "X & A".
- 4) THE BEARINGS AS SHOWN HEREON ARE BASED ON SOUTH 79°49'16" WEST ALONG THE NORTH RIGHT OF WAY LINE OF RIVERBROOKE STREET AS INDICATED HEREON AND REFERENCED TO GEODETIC NORTH BASED ON THE FLORIDA STATE PLANE COORDINATES SYSTEM, NORTH ZONE, NAD 1983/07, U.S. SURVEY FEET. DATUM ESTABLISHED USING GPS SOLUTIONS REAL TIME NETWORK.
- 5) VERTICAL INFORMATION SHOWN HEREON IS REFERENCED TO THE STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION CONTROL, BEING A CONCRETE MONUMENT STAMPED "46-03-D04V" HAVING A PUBLISHED ELEVATION OF 49.6243 NAVD 88 DATUM.
- 6) THE SURVEY MAP AND REPORT NOT VALID WITHOUT THE SIGNATURE AND ORIGINAL RAISED SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER. ADDITIONS OR DELETIONS TO SURVEY MAPS OR REPORTS BY OTHER THAN THE SIGNING PARTY OR PARTIES IS PROHIBITED WITHOUT WRITTEN CONSENT OF THE SIGNING PARTY OR PARTIES.
- 7) THE FORMATTED CERTIFICATION IS FOR :
D.R. HORTON INC.

CERTIFICATE

I HEREBY CERTIFY THE SURVEY HEREON TO BE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AS OF THE DATE SURVEYED.



8-16-2016
DATE OF SURVEY

SKIPPER C. RUTHERFORD, P.L.S.
PROFESSIONAL SURVEYOR & MAPPER
FLORIDA LICENSE No. LS 3961

APPARENT STREET ADDRESS: 6116 RIVERBROOKE DRIVE

| | | |
|-----------------------|---------------------------------|------------------|
| TYPE OF SURVEY: | BOUNDARY (FOUNDATION) | SCALE AS SHOWN |
| SECTION | 3 S RANGE 13 W IMPROVEMENTS | VISIBLE AS SHOWN |
| SOURCE OF INFORMATION | DESCRIPTION FURNISHED BY CLIENT | |
| BEARING REFERENCE | SEE NOTE 4 | |
| ELEVATION REFERENCE | SEE NOTE 5 | |
| | | F.B. - PAGE - |



4116 N. HIGHWAY 231 EAST BUILDING, PANAMA CITY, FLORIDA, 32404
Phone (850) 285-0979 Fax (850) 285-9942 - LICENSE No. LB 7759

| | |
|----------|--------|
| JOB No. | 12292 |
| FILE No. | R12540 |

