

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. 148 Hidalgo drive				Company NAIC Number:	
City Panama City		State Florida		ZIP Code 32409	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 38, Fanning Bayou Phase 2 Parcel # 08424-100-190					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>					
A5. Latitude/Longitude: Lat. <u>30°16'31.70"N</u> Long. <u>85°40'35.30"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>1B</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 <u>0</u>					
c) Total net area of flood openings in A8.b <u>0</u> 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>738</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 <u>0</u> 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 Bay County - 120004			B2. County Name Bay		B3. State Florida
B4. Map/Panel Number 12005C0218	B5. Suffix H	B6. FIRM Index Date 06/02/2009	B7. FIRM Panel Effective/ Revised Date 06/02/2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 7.0'
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 5-22-17

STAMPED NOTARIES

NAME	ADDRESS	CITY	STATE	EXPIRES
John Doe	123 Main St	New York	NY	12/31/2025
Jane Smith	456 Elm St	Albany	NY	06/30/2026
Robert Johnson	789 Oak St	Rochester	NY	03/15/2024
Mary White	101 Pine St	Syracuse	NY	09/01/2027
David Brown	202 Cedar St	Buffalo	NY	11/20/2023
Elizabeth Green	303 Birch St	Schenectady	NY	04/10/2028
Michael Black	404 Spruce St	Watkinsville	NY	07/05/2025
Patricia Gray	505 Willow St	Utica	NY	10/01/2026
Christopher Lee	606 Ash St	Delhi	NY	02/28/2024
Sarah Hall	707 Hickory St	Geneva	NY	05/15/2027
James King	808 Sycamore St	Canastota	NY	08/01/2025
Anna Scott	909 Magnolia St	Malone	NY	12/15/2026
Benjamin Adams	1010 Dogwood St	Warrensburg	NY	01/31/2024
Olivia Baker	1111 Redwood St	Malone	NY	04/01/2028
Ethan Clark	1212 Cypress St	Malone	NY	07/15/2025
Ava Lewis	1313 Juniper St	Malone	NY	10/01/2026
Noah Walker	1414 Fir St	Malone	NY	12/31/2027
Isabella Young	1515 Cedar St	Malone	NY	03/15/2024
Liam Hill	1616 Birch St	Malone	NY	06/01/2028
Mia King	1717 Spruce St	Malone	NY	09/15/2025
Lucas Scott	1818 Ash St	Malone	NY	11/01/2026
Charlotte Adams	1919 Willow St	Malone	NY	02/28/2024
Leo Baker	2020 Hickory St	Malone	NY	05/15/2027
Amelia Clark	2121 Sycamore St	Malone	NY	08/01/2025
Oliver Lewis	2222 Magnolia St	Malone	NY	10/15/2026
Sophia Walker	2323 Dogwood St	Malone	NY	12/31/2027
Wyatt Young	2424 Redwood St	Malone	NY	03/15/2024
Lillian Hill	2525 Cypress St	Malone	NY	06/01/2028
Grayson King	2626 Juniper St	Malone	NY	09/15/2025
Chloe Scott	2727 Fir St	Malone	NY	11/01/2026
Julian Adams	2828 Cedar St	Malone	NY	02/28/2024
Stella Baker	2929 Birch St	Malone	NY	05/15/2027
Harvey Clark	3030 Spruce St	Malone	NY	08/01/2025
Leah Lewis	3131 Ash St	Malone	NY	10/15/2026
Isaac Walker	3232 Willow St	Malone	NY	12/31/2027
Chloe Young	3333 Hickory St	Malone	NY	03/15/2024
Robert Hill	3434 Sycamore St	Malone	NY	06/01/2028
Victoria King	3535 Magnolia St	Malone	NY	09/15/2025
William Scott	3636 Dogwood St	Malone	NY	11/01/2026
Madeline Adams	3737 Redwood St	Malone	NY	02/28/2024
James Baker	3838 Cypress St	Malone	NY	05/15/2027
Olivia Clark	3939 Juniper St	Malone	NY	08/01/2025
Benjamin Lewis	4040 Fir St	Malone	NY	10/15/2026
Chloe Walker	4141 Cedar St	Malone	NY	12/31/2027
Lucas Young	4242 Birch St	Malone	NY	03/15/2024
Isabella Hill	4343 Spruce St	Malone	NY	06/01/2028
Grayson King	4444 Ash St	Malone	NY	09/15/2025
Chloe Scott	4545 Willow St	Malone	NY	11/01/2026
Julian Adams	4646 Hickory St	Malone	NY	02/28/2024
Stella Baker	4747 Sycamore St	Malone	NY	05/15/2027
Harvey Clark	4848 Magnolia St	Malone	NY	08/01/2025
Leah Lewis	4949 Dogwood St	Malone	NY	10/15/2026
Isaac Walker	5050 Redwood St	Malone	NY	12/31/2027

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. 148 Hidalgo drive			Policy Number:
City Panama City	State Florida	ZIP Code 32409	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: USGS X-290 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) 11.89 feet meters
- b) Top of the next higher floor N/A feet meters
- c) Bottom of the lowest horizontal structural member (V Zones only) N/A feet meters
- d) Attached garage (top of slab) 9.84 feet meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 12.20 feet meters
- f) Lowest adjacent (finished) grade next to building (LAG) 8.7 feet meters
- g) Highest adjacent (finished) grade next to building (HAG) 9.5 feet meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 8.7 feet 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.

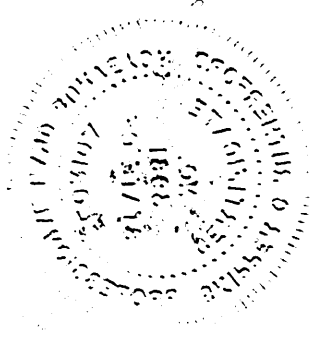
Certifier's Name Skipper C Rutherford	License Number LS3961	
Title Surveyor & Mapper / President		
Company Name SCR & Associates NWFL, Inc.		
Address PO Box 958		
City Lynn Haven	State Florida	
Signature 	Date 05/22/2017	Telephone (850) 265-6979

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. and B9. From LOMR Dated 06/27/2016 C2.e) Machinery used was bottom of HVAC Unit

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ELEVATION CERTIFICATE

OMB No. 1660-0008
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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 Date Telephone

Comments

Check here if attachments.

REGISTRATION CERTIFICATE

FORM 10-2008
 Revision Date: April 1, 2010

SECTION 1 - GENERAL INFORMATION (PLEASE PRINT) Name of the Association: _____ Address: _____ City: _____ State: _____ Zip: _____ Telephone: _____	
SECTION 2 - PROPERTY IDENTIFICATION (PLEASE PRINT) Description of the Property: _____ Location: _____ Lot Number: _____ Block Number: _____ Subdivision Name: _____ City: _____ State: _____ Zip: _____	
SECTION 3 - PROPERTY OWNER'S REPRESENTATION (PLEASE PRINT) I, the undersigned, being the owner of the above described property, do hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief. Signature: _____ Date: _____ Title: _____	
SECTION 4 - ASSOCIATION'S REPRESENTATION (PLEASE PRINT) I, the undersigned, being the authorized representative of the Association, do hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief. Signature: _____ Date: _____ Title: _____	
SECTION 5 - NOTES AND COMMENTS _____ _____ _____	

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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
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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 <i>Wayne Porter</i>	Title
Community Name	Telephone
Signature <i>WP</i>	Date <i>6/27/17</i>

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

*OK for C.O.
WP*

Check here if attachments.

BUILDING PHOTOGRAPHS

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

Left Side View

BUILDING PHOTOGRAPHS

Continuation Page

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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

Back View



Photo Two

Photo Two Caption

Right Side View

INTERNATIONAL TRADE

UNITED STATES DEPARTMENT OF COMMERCE

OFFICE OF THE SECRETARY OF COMMERCE, WASHINGTON, D. C. 20540

FOR THE EXPORT OF COMMERCE, WASHINGTON, D. C. 20540

OFFICE OF THE SECRETARY OF COMMERCE, WASHINGTON, D. C. 20540

FOR THE EXPORT OF COMMERCE, WASHINGTON, D. C. 20540

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