

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 Carillon Dawgs, LLC				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 208 Dunecrest Lane				Company NAIC Number:	
City Panama City Beach		State Florida		ZIP Code 32413	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 13 Block I Carillon Beach Phase II					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>					
A5. Latitude/Longitude: Lat. <u>30.264607</u> Long. <u>-85.980684</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>6</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>1,020</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>1</u>					
c) Total net area of flood openings in A8.b <u>127.91</u> sq in					
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>0</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 County		B3. State Florida
B4. Map/Panel Number 12005C0163	B5. Suffix H	B6. FIRM Index Date 06/02/2009	B7. FIRM Panel Effective/ Revised Date 06/02/2009	B8. Flood Zone(s) AE(9)	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 9.00
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					

WORLD BANK

Country	Sector	Year
Algeria	Agriculture	1950
Algeria	Agriculture	1951
Algeria	Agriculture	1952
Algeria	Agriculture	1953
Algeria	Agriculture	1954
Algeria	Agriculture	1955
Algeria	Agriculture	1956
Algeria	Agriculture	1957
Algeria	Agriculture	1958
Algeria	Agriculture	1959
Algeria	Agriculture	1960
Algeria	Agriculture	1961
Algeria	Agriculture	1962
Algeria	Agriculture	1963
Algeria	Agriculture	1964
Algeria	Agriculture	1965
Algeria	Agriculture	1966
Algeria	Agriculture	1967
Algeria	Agriculture	1968
Algeria	Agriculture	1969
Algeria	Agriculture	1970
Algeria	Agriculture	1971
Algeria	Agriculture	1972
Algeria	Agriculture	1973
Algeria	Agriculture	1974
Algeria	Agriculture	1975

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. 208 Dunecrest Lane			Policy Number:		
City Panama City Beach	State Florida	ZIP Code 32413	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: GPS Static (Opus) 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.


Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>11.0</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	<u>22.5</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>N/A</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>11.0</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>7.74</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>7.91</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.

Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments.

Certifier's Name Ronald J. Voelker, Jr.	License Number 6628	Place Seal Here
Title Professional Surveyor and Mapper		
Company Name Voelker Surveying, LLC		
Address 110 Logan Lane, Suite 4		
City Santa Rosa Beach	State Florida	
Signature 	Date 02/22/2018	Telephone (850) 231-6300

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)
 The lowest machinery is the A/C unit servicing the building.

IN SENATE, January 11, 1906.

REPORT OF THE COMMISSIONERS OF THE LANDS AND MINES.

CHAPTER 1. THE LANDS AND MINES.

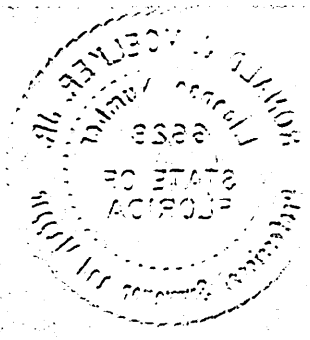
SECTION 1. THE LANDS.

SECTION 2. THE MINES.

SECTION 3. THE LANDS AND MINES.

SECTION 4. THE LANDS AND MINES.

SECTION 5. THE LANDS AND MINES.



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. 208 Dunecrest Lane			Policy Number:
City Panama City Beach	State Florida	ZIP Code 32413	Company NAIC Number

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.

<p>FOR INFORMATION OF THE BOARD OF DIRECTORS</p>	<p>REPORT OF THE BOARD OF DIRECTORS</p>	<p>STATE OF CALIFORNIA</p>
<p>1. Name of the corporation</p>	<p>2. Fiscal year</p>	<p>3. Date of report</p>
<p>4. Description of business</p> <p>5. Financial statements</p> <p>6. Officers and directors</p> <p>7. Compensation of officers and directors</p> <p>8. Dividends</p> <p>9. Other matters</p>	<p>10. Summary of operations</p> <p>11. Financial results</p> <p>12. Outlook</p>	<p>13. Auditor's report</p> <p>14. Other reports</p>
<p>15. Additional information</p>	<p>16. Other matters</p>	<p>17. Other matters</p>
<p>18. Other matters</p>	<p>19. Other matters</p>	<p>20. Other matters</p>
<p>21. Other matters</p>	<p>22. Other matters</p>	<p>23. Other matters</p>
<p>24. Other matters</p>	<p>25. Other matters</p>	<p>26. Other matters</p>
<p>27. Other matters</p>	<p>28. Other matters</p>	<p>29. Other matters</p>
<p>30. Other matters</p>	<p>31. Other matters</p>	<p>32. Other matters</p>
<p>33. Other matters</p>	<p>34. Other matters</p>	<p>35. Other matters</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. 208 Dunecrest Lane			Policy Number:
City Panama City Beach	State Florida	ZIP Code 32413	Company NAIC Number

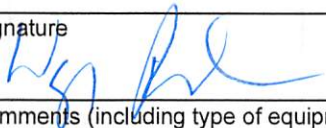
SECTION G – COMMUNITY INFORMATION (OPTIONAL)

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 RB17-0098	G5. Date Permit Issued 2-15-17	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 Wayne Porter	Title
Community Name	Telephone
Signature 	Date 2/21/2018

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

**OK for C.O.
wp**

Check here if attachments.

<p>1. Name of the decedent</p>	<p>2. Social Security number</p>	<p>3. Date of death</p>
<p>4. Name of the estate</p>	<p>5. Social Security number</p>	<p>6. Date of filing</p>
<p>7. Total amount of gross estate</p>		
<p>8. Total amount of net estate</p>		
<p>9. Total amount of taxable estate</p>		
<p>10. Total amount of tax</p>		
<p>11. Total amount of tax paid</p>		
<p>12. Total amount of tax due</p>		
<p>13. Total amount of tax credit</p>		
<p>14. Total amount of tax refund</p>		
<p>15. Total amount of tax overpayment</p>		
<p>16. Total amount of tax underpayment</p>		
<p>17. Total amount of tax liability</p>		
<p>18. Total amount of tax due</p>		
<p>19. Total amount of tax credit</p>		
<p>20. Total amount of tax refund</p>		
<p>21. Total amount of tax overpayment</p>		
<p>22. Total amount of tax underpayment</p>		

8-15-98

8900-1788

8/15/98

8900-1788

8900-1788

8900-1788

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8900-1788

8900-1788

8900-1788

BUILDING PHOTOGRAPHS

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

ELEVATION CERTIFICATE

See Instructions for Item A6.

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. 208 Dunecrest Lane			Policy Number:
City Panama City Beach	State Florida	ZIP Code 32413	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.



Photo One

Photo One Caption

Front View 02/15/2018



Photo Two

Photo Two Caption

Rear View 02/15/2018

<p>1. Name of the person or organization</p> <p>2. Address</p> <p>3. City</p> <p>4. State</p> <p>5. Zip</p>	<p>6. Date of birth</p> <p>7. Sex</p> <p>8. Race</p> <p>9. Religion</p> <p>10. Education</p> <p>11. Occupation</p> <p>12. Marital status</p> <p>13. Number of children</p> <p>14. Date of last contact</p> <p>15. Reason for last contact</p>	<p>16. Date of entry</p> <p>17. Date of departure</p> <p>18. Date of return</p> <p>19. Date of re-entry</p> <p>20. Date of exit</p>
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3. Description of the person or organization

4. Description of the activity

5. Description of the location

6. Description of the time

7. Description of the method

8. Description of the result

9. Description of the impact

10. Description of the significance

11. Description of the importance

12. Description of the value

13. Description of the cost

14. Description of the benefit

15. Description of the risk

16. Description of the opportunity

17. Description of the challenge

18. Description of the solution

19. Description of the outcome

20. Description of the conclusion

21. Description of the future

22. Description of the past

23. Description of the present

24. Description of the future

25. Description of the past

26. Description of the present

27. Description of the future

28. Description of the past

29. Description of the present

30. Description of the future

BUILDING PHOTOGRAPHS

Continuation Page

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

ELEVATION CERTIFICATE

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. 208 Dunecrest Lane			Policy Number:
City Panama City Beach	State Florida	ZIP Code 32413	Company NAIC 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." 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

Left Side View 02/15/2018



Photo Two

Photo Two Caption

Right Side View 02/15/2018

STATE OF TEXAS
COUNTY OF [illegible]
[illegible text]

[illegible text]

[illegible text]

[illegible text]

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 Carillon Dawgs, LLC				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 208 Dunecrest Lane				Company NAIC Number:	
City Panama City Beach		State Florida		ZIP Code 32413	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 13 Block I Carillon Beach Phase II					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Accessory</u>					
A5. Latitude/Longitude: Lat. <u>30.264607</u> Long. <u>-85.980684</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>6</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>423</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>1</u>					
c) Total net area of flood openings in A8.b <u>84.78</u> sq in					
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>0</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 County		B3. State Florida
B4. Map/Panel Number 12005C0163	B5. Suffix H	B6. FIRM Index Date 06/02/2009	B7. FIRM Panel Effective/ Revised Date 06/02/2009	B8. Flood Zone(s) AE(9)	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 9.00
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					

1950

STATE OF TEXAS

COMMISSIONERS OF THE GENERAL LAND OFFICE

No. of Section	Name of Land	Acres
1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
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ELEVATION CERTIFICATE

OMB No. 1660-0008
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City Panama City Beach	State Florida	ZIP Code 32413	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: GPS Static (Opus) 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.

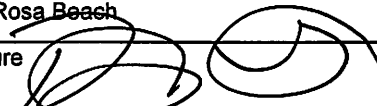
Check the measurement used.

- | | | | |
|---|-------------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) | <u>11.0</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor | <u>22.5</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>N/A</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>11</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | <u>7.77</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | <u>7.80</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.

Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments.

Certifier's Name Ronald J. Voelker, Jr.	License Number 6628	Place Seal Here	
Title Professional Surveyor and Mapper			
Company Name Voelker Surveying, LLC			
Address 110 Logan Lane, Suite 4			
City Santa Rosa Beach	State Florida		ZIP Code 32459
Signature 	Date 02/22/2018		Telephone (850) 231-6300

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)
 The lowest machinery is the A/C unit servicing the building.

STATE OF FLORIDA
COUNTY OF [illegible]
[illegible text]

[illegible text]



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. 208 Dunecrest Lane			Policy Number:
City Panama City Beach	State Florida	ZIP Code 32413	Company NAIC Number

**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.

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. 208 Dunecrest Lane			Policy Number:
City Panama City Beach	State Florida	ZIP Code 32413	Company NAIC Number

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 RB17-0103	G5. Date Permit Issued 2-15-17	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 Wayne Porter	Title
Community Name	Telephone

Signature [Signature]	Date 2/27/2018
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Comments (including type of equipment and location, per C2(e), if applicable)

**OK for C.O.
UP**

Check here if attachments.

<p>UNITED STATES DEPARTMENT OF JUSTICE FEDERAL BUREAU OF INVESTIGATION WASHINGTON, D. C. 20535</p>	<p>REPORT OF AN INVESTIGATION MADE AT [City/State]</p>	<p>DATE OF REPORT [Date]</p>
<p>CHARACTER OF CASE</p>	<p>TITLE</p>	<p>FILE NO.</p>
<p>STATEMENT OF FACTS</p> <p>[Detailed description of the investigation, including dates, locations, and individuals involved. The text is mostly illegible due to heavy noise and low contrast.]</p>	<p>RESULTS OF INVESTIGATION</p> <p>[Summary of findings and conclusions from the investigation.]</p>	<p>REMARKS</p> <p>[Additional notes or observations.]</p>
<p>AGENCY OR SOURCE</p>	<p>REPORT MADE AT</p>	<p>REPORT MADE ON</p>
<p>REPORT MADE BY</p>	<p>REPORT MADE BY</p>	<p>REPORT MADE BY</p>
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8-12-17

8-17-0103

200/CS/S

19

C

10

11

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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

ELEVATION CERTIFICATE

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. 208 Dunecrest Lane			Policy Number:
City Panama City Beach	State Florida	ZIP Code 32413	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.



Photo One

Photo One Caption	Front View 02/15/2018
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Photo Two

Photo Two Caption	Rear View 02/15/2018
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ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

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. 208 Dunecrest Lane			Policy Number:
City Panama City Beach	State Florida	ZIP Code 32413	Company NAIC 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." 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

Left Side View 02/15/2018



Photo Two

Photo Two Caption

Right Side View 02/15/2018

