U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

National Flood Insurance Program

OMB No. 1660-0008

Expiration Date: November 30, 2018

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 US | | | | | RANCE COMPANY USE | | |
|---|---|--|--------------|-------------------------------------|----------------------|-------------|---|
| A1. Building Owner's Name Policy Number: ADAM CHERUP | | | | | ber: | | |
| Box No. | A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3656 OAK BROOK LANE Company NAIC Number: | | | | | | AIC Number: |
| City PANAMA CITY | City State ZIP Code PANAMA CITY BEACH FLORIDA 32408 | | | | | | |
| 1 ' ' | • | d Block Numbers, Tax DT 5, SECTION 9, TOV | | · - | • • | TH LAGOON | OAKS |
| A4. Building Use (| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL | | | | | | |
| A5. Latitude/Longit | ude: Lat. N3 | 0d09'31" L | .ong. W | - '85d45'32" | Horizontal Datur | n: NAD 1 | 927 X NAD 1983 |
| A6. Attach at least | 2 photograph | s of the building if the | Certific | ate is being used to | obtain flood insur | ance. | |
| A7. Building Diagra | am Number | 1B | | | | | |
| 1 | - | pace or enclosure(s): | | | | | |
| a) Square foot | age of crawls | pace or enclosure(s) | | 0 sq ft | | | |
| b) Number of | permanent flo | - od openings in the cra | wlspace | e or enclosure(s) w | ithin 1.0 foot above | adjacent gr | ade 0 |
| c) Total net an | ea of flood op | enings in A8.b 0 | s | q in | | | |
| d) Engineered | flood opening | gs? 🗌 Yes 🗵 No | , | | | | |
| A9. For a building v | | | | | | | |
| Ī | | | • | sa ft | | | |
| | | | | | | | 0 |
| | 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 A9.b 0 sq in | | | | | | |
| | • | | | sq in | | | |
| d) Engineered | tiooa openin | gs? ☐ Yes ☒ No |) | | | | |
| <u> </u> | SE | CTION B - FLOOD IN | SURA | NCE RATE MAP | (FIRM) INFORMA | TION | |
| B1. NFIP Commun BAY COUNTY 120 | - | ommunity Number | | B2. County Name BAY | | | B3. State FLORIDA |
| B4. Map/Panel Number | B5. Suffix | B6. FIRM Index Date | E1 | RM Panel fective/ evised Date | B8. Flood Zone(s | (Zo | se Flood Elevation(s) ne AO, use Base od Depth) |
| 12005C0317 | Н | 06/02/2009 | | 06/02/2009 | AE | | 8.0 |
| 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: | | | | | | | |
| B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/ Source: | | | | | | | |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No | | | | | | | |
| Designation Date: CBRS CPA | | | | | /· 🗀 - 35 🖭 118 | | |
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| IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY | | | | | |
|--|---|--------------------------------|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or I 3656 OAK BROOK LANE | Policy Number: | | | | |
| City State ZIP Code PANAMA CITY BEACH FLORIDA 32408 | | | Company NAIC Number | | |
| SECTION C – BUILDING ELE | VATION INFORMAT | TON (SURVEY R | EQUIRED) | | |
| SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: | | | | | |
| h) Lowest adjacent grade at lowest elevation of deck structural support | N/A | | | | |
| SECTION D - SURVEYOR, | ENGINEER, OR ARC | HITECT CERTIF | ICATION | | |
| This certification is to be signed and sealed by a land survivor location of the certificate represents statement may be punishable by fine or imprisonment under the latitude and longitude in Section A provided by a lice | my best efforts to inter der 18 U.S. Code, Sec | pret the data availation 1001. | y law to certify elevation information. able. I understand that any false Check here if attachments. | | |
| Certifier's Name ROB L. WORKING Title REGISTERED LAND SURVEYOR | Rob R. Working | | | | |
| Company Name SEA LEVEL SURVEYING AND MAPPING, INC. Address 1219 MAINE AVENUE | Place Seal Here | | | | |
| City LYNN HAVEN | State FLORIDA | ZIP Code 32444 | | | |
| Signature Rol R. Working | Date 11/09/2018 | Telephone (850) 265-4800 | 1 (18 (19 (19 (19 (19 (19 (19 (19 (19 (19 (19 | | |
| Copy all pages of this Elevation Certificate and all attachmen | nts for (1) community of | ficial, (2) insurance | agent/company, and (3) building owner. | | |
| Comments (including type of equipment and location, per C2(e) AIR CONDITION ON PAD OUTSIDE OF STRUCTUJOB #8949 | | | 5 - Fi | | |

ELEVATION CERTIFICATE

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| IMPORTANT: In these spaces, copy the corresponding information from | | FOR INSURANCE COMPANY USE | | |
|---|---|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P. 3656 OAK BROOK LANE | | Policy Number: | | |
| City State PANAMA CITY BEACH FLORIDA | ZIP Code 32408 | 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 Certifica complete Sections A, B,and C. For Items E1–E4, use natural grade, if available enter meters. | | | | |
| E1. Provide elevation information for the following and check the appropria the highest adjacent grade (HAG) and the lowest adjacent grade (LAC). | ate boxes to show whethe 3). | r the elevation is above or below | | |
| a) Top of bottom floor (including basement, crawlspace, or enclosure) is | feet meter | rs 🔲 above or 🔲 below the HAG. | | |
| b) Top of bottom floor (including basement, crawlspace, or enclosure) is | feet meter | rs 🔲 above or 🔲 below the LAG. | | |
| E2. For Building Diagrams 6–9 with permanent flood openings provided in the next higher floor (elevation C2.b in | Section A Items 8 and/or | 9 (see pages 1–2 of Instructions), | | |
| the diagrams) of the building is | feet meter | rs 🔲 above or 🔲 below the HAG. | | |
| E3. Attached garage (top of slab) is | feet | s above or below the HAG. | | |
| E4. Top of platform of machinery and/or equipment servicing the building is | feet | s above or below the HAG. | | |
| E5. Zone AO only: If no flood depth number is available, is the top of the best floodplain management ordinance? Yes No Unknown | pottom floor elevated in ac n. The local official must | cordance with the community's certify this information in Section G. | | |
| SECTION F - PROPERTY OWNER (OR OWNER'S | S REPRESENTATIVE) CE | ERTIFICATION | | |
| 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 Cit | y St | ate ZIP Code | | |
| Signature Date of the Date of | te Te | lephone | | |
| Comments | | | | |
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OMB No. 1660-0008 **ELEVATION CERTIFICATE** 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. Policy Number: 3656 OAK BROOK LANE State ZIP Code Company NAIC Number PANAMA CITY BEACH **FLORIDA** 32408 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. 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.) A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO. 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 8-29-16 G7. This permit has been issued for: New Construction ☐ Substantial Improvement Elevation of as-built lowest floor (including basement) feet meters of the building: 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 Telephone Community Name Signature 29/2018 Comments (in)cluding type of equipment and location, per C2(e), if applicable)

Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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| IMPORTANT: In these spaces, copy the c | orresponding information | n from Section A. | FOR INSURANCE COMPANY USE |
|---|-------------------------------|---------------------------|---------------------------|
| Building Street Address (including Apt., Unit 3656 OAK BROOK LANE | t, Suite, and/or Bldg. No.) o | or P.O. Route and Box No. | Policy Number: |
| City PANAMA CITY BEACH | State FLORIDA | ZIP Code 32408 | 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 Two

Photo One Caption Photo Two Caption





Photo Three Photo Four

Photo Three Caption Photo Four Caption

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

Photo Six

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| IMPORTANT: In these spaces, copy the co | FOR INSURANCE COMPANY USE | | | |
|--|----------------------------|---------------------------|---------------------|--|
| Building Street Address (including Apt., Unit, 3656 OAK BROOK LANE | Suite, and/or Bldg. No.) o | or P.O. Route and Box No. | Policy Number: | |
| City PANAMA CITY BEACH | State FLORIDA | ZIP Code 32408 | 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 Five

| | Photo Five Caption | Photo Six Caption |
|---|--------------------|-------------------|
| | | |
| Photo Seven Caption Photo Eight Caption | Photo Seven | Photo Eight |