

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 <u>KRIS MITCHELL</u>				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>6624 HARBOUR BLVD.</u>				Company NAIC Number:	
City <u>PANAMA CITY BEACH</u>		State <u>FL</u>		ZIP Code <u>32407</u>	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>TAX PARCEL NUMBER 27338-009-230</u>					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>30°-12'-01.2"</u> Long. <u>85°-45'-24"</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>113</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) _____ 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>266</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>4</u>					
c) Total net area of flood openings in A9.b <u>326</u> sq in					
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <u>BAY COUNTY 120004</u>			B2. County Name <u>BAY</u>		B3. State <u>FL</u>
B4. Map/Panel Number <u>12005C0309</u>	B5. Suffix <u>H</u>	B6. FIRM Index Date <u>JUNE 2, 2009</u>	B7. FIRM Panel Effective/ Revised Date <u>JUNE 2, 2009</u>	B8. Flood Zone(s) <u>AE</u>	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) <u>7.0</u>
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					

OMB No. 2500-0002
Expires on Date November 30, 2012

ELEVATION CERTIFICATE
Applicant follow the instructions on pages 1-4.

Copy all pages of this Elevation Certificate and all attachments to (1) your lender, (2) insurance agent/broker, and (3) building official.

SECTION A - PROPERTY INFORMATION	
AA. Elevation Certificate Name	1. Elevation Certificate Name
AB. Elevation Certificate Address (Street, Apt. No., P.O. Box, etc.)	2. Elevation Certificate Address (Street, Apt. No., P.O. Box, etc.)
AC. Elevation Certificate City, State, and ZIP Code	3. Elevation Certificate City, State, and ZIP Code
AD. Elevation Certificate Parcel Number (Tax Parcel Number)	4. Elevation Certificate Parcel Number (Tax Parcel Number)
AE. Elevation Certificate Building Use (e.g., Residential, Commercial, etc.)	5. Elevation Certificate Building Use (e.g., Residential, Commercial, etc.)
AF. Elevation Certificate Building Type (e.g., Single-Family, Multi-Family, etc.)	6. Elevation Certificate Building Type (e.g., Single-Family, Multi-Family, etc.)
AG. Elevation Certificate Building Height (Feet)	7. Elevation Certificate Building Height (Feet)
AH. Elevation Certificate Building Area (Square Feet)	8. Elevation Certificate Building Area (Square Feet)
AI. Elevation Certificate Building Age (Year)	9. Elevation Certificate Building Age (Year)
AJ. Elevation Certificate Building Condition (e.g., Good, Fair, Poor)	10. Elevation Certificate Building Condition (e.g., Good, Fair, Poor)
AK. Elevation Certificate Building Material (e.g., Wood, Brick, Concrete)	11. Elevation Certificate Building Material (e.g., Wood, Brick, Concrete)
AL. Elevation Certificate Building Foundation (e.g., Slab, Basement, etc.)	12. Elevation Certificate Building Foundation (e.g., Slab, Basement, etc.)
AM. Elevation Certificate Building Footing (e.g., Foundation, etc.)	13. Elevation Certificate Building Footing (e.g., Foundation, etc.)
AN. Elevation Certificate Building Structure (e.g., Frame, Masonry, etc.)	14. Elevation Certificate Building Structure (e.g., Frame, Masonry, etc.)
AO. Elevation Certificate Building Roof (e.g., Shingles, Metal, etc.)	15. Elevation Certificate Building Roof (e.g., Shingles, Metal, etc.)
AP. Elevation Certificate Building Exterior Wall (e.g., Siding, Brick, etc.)	16. Elevation Certificate Building Exterior Wall (e.g., Siding, Brick, etc.)
AQ. Elevation Certificate Building Interior Wall (e.g., Drywall, etc.)	17. Elevation Certificate Building Interior Wall (e.g., Drywall, etc.)
AR. Elevation Certificate Building Floor (e.g., Carpet, Hardwood, etc.)	18. Elevation Certificate Building Floor (e.g., Carpet, Hardwood, etc.)
AS. Elevation Certificate Building Ceiling (e.g., Drywall, etc.)	19. Elevation Certificate Building Ceiling (e.g., Drywall, etc.)
AT. Elevation Certificate Building Staircase (e.g., Wood, Metal, etc.)	20. Elevation Certificate Building Staircase (e.g., Wood, Metal, etc.)
AU. Elevation Certificate Building Elevator (e.g., Hydraulic, etc.)	21. Elevation Certificate Building Elevator (e.g., Hydraulic, etc.)
AV. Elevation Certificate Building Mechanical (e.g., HVAC, etc.)	22. Elevation Certificate Building Mechanical (e.g., HVAC, etc.)
AW. Elevation Certificate Building Electrical (e.g., Wiring, etc.)	23. Elevation Certificate Building Electrical (e.g., Wiring, etc.)
AX. Elevation Certificate Building Plumbing (e.g., Pipes, etc.)	24. Elevation Certificate Building Plumbing (e.g., Pipes, etc.)
AY. Elevation Certificate Building Fire Protection (e.g., Sprinklers, etc.)	25. Elevation Certificate Building Fire Protection (e.g., Sprinklers, etc.)
AZ. Elevation Certificate Building Other (e.g., etc.)	26. Elevation Certificate Building Other (e.g., etc.)

SECTION B - FLOOD INFORMATION	
BA. Elevation Certificate Flood Hazard Zone (e.g., Flood Zone, etc.)	27. Elevation Certificate Flood Hazard Zone (e.g., Flood Zone, etc.)
BB. Elevation Certificate Flood Hazard Category (e.g., Flood Hazard Category, etc.)	28. Elevation Certificate Flood Hazard Category (e.g., Flood Hazard Category, etc.)
BC. Elevation Certificate Flood Hazard Date (e.g., Flood Hazard Date, etc.)	29. Elevation Certificate Flood Hazard Date (e.g., Flood Hazard Date, etc.)
BD. Elevation Certificate Flood Hazard Description (e.g., Flood Hazard Description, etc.)	30. Elevation Certificate Flood Hazard Description (e.g., Flood Hazard Description, etc.)
BE. Elevation Certificate Flood Hazard Elevation (e.g., Flood Hazard Elevation, etc.)	31. Elevation Certificate Flood Hazard Elevation (e.g., Flood Hazard Elevation, etc.)
BF. Elevation Certificate Flood Hazard Area (e.g., Flood Hazard Area, etc.)	32. Elevation Certificate Flood Hazard Area (e.g., Flood Hazard Area, etc.)
BG. Elevation Certificate Flood Hazard Depth (e.g., Flood Hazard Depth, etc.)	33. Elevation Certificate Flood Hazard Depth (e.g., Flood Hazard Depth, etc.)
BH. Elevation Certificate Flood Hazard Velocity (e.g., Flood Hazard Velocity, etc.)	34. Elevation Certificate Flood Hazard Velocity (e.g., Flood Hazard Velocity, etc.)
BI. Elevation Certificate Flood Hazard Direction (e.g., Flood Hazard Direction, etc.)	35. Elevation Certificate Flood Hazard Direction (e.g., Flood Hazard Direction, etc.)
BJ. Elevation Certificate Flood Hazard Frequency (e.g., Flood Hazard Frequency, etc.)	36. Elevation Certificate Flood Hazard Frequency (e.g., Flood Hazard Frequency, etc.)
BK. Elevation Certificate Flood Hazard Intensity (e.g., Flood Hazard Intensity, etc.)	37. Elevation Certificate Flood Hazard Intensity (e.g., Flood Hazard Intensity, etc.)
BL. Elevation Certificate Flood Hazard Duration (e.g., Flood Hazard Duration, etc.)	38. Elevation Certificate Flood Hazard Duration (e.g., Flood Hazard Duration, etc.)
BM. Elevation Certificate Flood Hazard Impact (e.g., Flood Hazard Impact, etc.)	39. Elevation Certificate Flood Hazard Impact (e.g., Flood Hazard Impact, etc.)
BN. Elevation Certificate Flood Hazard Mitigation (e.g., Flood Hazard Mitigation, etc.)	40. Elevation Certificate Flood Hazard Mitigation (e.g., Flood Hazard Mitigation, etc.)
BO. Elevation Certificate Flood Hazard Prevention (e.g., Flood Hazard Prevention, etc.)	41. Elevation Certificate Flood Hazard Prevention (e.g., Flood Hazard Prevention, etc.)
BP. Elevation Certificate Flood Hazard Control (e.g., Flood Hazard Control, etc.)	42. Elevation Certificate Flood Hazard Control (e.g., Flood Hazard Control, etc.)
BQ. Elevation Certificate Flood Hazard Management (e.g., Flood Hazard Management, etc.)	43. Elevation Certificate Flood Hazard Management (e.g., Flood Hazard Management, etc.)
BR. Elevation Certificate Flood Hazard Assessment (e.g., Flood Hazard Assessment, etc.)	44. Elevation Certificate Flood Hazard Assessment (e.g., Flood Hazard Assessment, etc.)
BS. Elevation Certificate Flood Hazard Investigation (e.g., Flood Hazard Investigation, etc.)	45. Elevation Certificate Flood Hazard Investigation (e.g., Flood Hazard Investigation, etc.)
BT. Elevation Certificate Flood Hazard Inspection (e.g., Flood Hazard Inspection, etc.)	46. Elevation Certificate Flood Hazard Inspection (e.g., Flood Hazard Inspection, etc.)
BU. Elevation Certificate Flood Hazard Monitoring (e.g., Flood Hazard Monitoring, etc.)	47. Elevation Certificate Flood Hazard Monitoring (e.g., Flood Hazard Monitoring, etc.)
BV. Elevation Certificate Flood Hazard Reporting (e.g., Flood Hazard Reporting, etc.)	48. Elevation Certificate Flood Hazard Reporting (e.g., Flood Hazard Reporting, etc.)
BW. Elevation Certificate Flood Hazard Communication (e.g., Flood Hazard Communication, etc.)	49. Elevation Certificate Flood Hazard Communication (e.g., Flood Hazard Communication, etc.)
BX. Elevation Certificate Flood Hazard Education (e.g., Flood Hazard Education, etc.)	50. Elevation Certificate Flood Hazard Education (e.g., Flood Hazard Education, etc.)
BY. Elevation Certificate Flood Hazard Training (e.g., Flood Hazard Training, etc.)	51. Elevation Certificate Flood Hazard Training (e.g., Flood Hazard Training, etc.)
BZ. Elevation Certificate Flood Hazard Awareness (e.g., Flood Hazard Awareness, etc.)	52. Elevation Certificate Flood Hazard Awareness (e.g., Flood Hazard Awareness, etc.)

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. <u>6624 HARBOUR BLVD.</u>			Policy Number:
City <u>PANAMA CITY BEACH FL</u>	State <u>FL</u>	ZIP Code <u>32407</u>	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: FDOT NTRIP CASTER 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) 8.0 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) 5.6 feet meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 8.0 feet meters
- f) Lowest adjacent (finished) grade next to building (LAG) 5.0 feet meters
- g) Highest adjacent (finished) grade next to building (HAG) 5.0 feet meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 5.0 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 <u>ROGER LONSWAY</u>	License Number <u>FL LS 2247</u>	
Title		
Company Name		
Address <u>2252 GILBERTS MILL ROAD</u>		
City <u>COTTON DALE</u>	State <u>FL</u>	
Signature 	Date <u>MAR. 1, 2018</u>	Telephone <u>850-638-7412</u>

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)

AIR CONDITIONING UNIT

FOR INSURANCE COMPANY USE Policy Number	Building Name (including any P.O. Box and City, State, ZIP Code)	Building Address (including any P.O. Box and City, State, ZIP Code)
	10000	10000

SECTION 508 COMPLIANCE STATEMENT

Building Name: 10000

Building Address: 10000

Building Type: [] Office [] Retail [] Other

Building Use: [] Office [] Retail [] Other

Building Date: 10000

Building Owner: 10000

Building Manager: 10000

Building Contact: 10000

Building Phone: 10000

Building Fax: 10000

Building Email: 10000

Building Website: 10000

Building Description: 10000

Building Accessibility: 10000

Building Compliance: 10000

Building Status: 10000

Building Notes: 10000

SECTION 508 COMPLIANCE STATEMENT

Building Name: 10000

Building Address: 10000

Building Type: [] Office [] Retail [] Other

Building Use: [] Office [] Retail [] Other

Building Date: 10000

Building Owner: 10000

Building Manager: 10000

Building Contact: 10000

Building Phone: 10000

Building Fax: 10000

Building Email: 10000

Building Website: 10000

Building Description: 10000

Building Accessibility: 10000

Building Compliance: 10000

Building Status: 10000

Building Notes: 10000

SECTION 508 COMPLIANCE STATEMENT

Building Name: 10000

Building Address: 10000

Building Type: [] Office [] Retail [] Other

Building Use: [] Office [] Retail [] Other

Building Date: 10000

Building Owner: 10000

Building Manager: 10000

Building Contact: 10000

Building Phone: 10000

Building Fax: 10000

Building Email: 10000

Building Website: 10000

Building Description: 10000

Building Accessibility: 10000

Building Compliance: 10000

Building Status: 10000

Building Notes: 10000

SECTION 508 COMPLIANCE STATEMENT

Building Name: 10000

Building Address: 10000

Building Type: [] Office [] Retail [] Other

Building Use: [] Office [] Retail [] Other

Building Date: 10000

Building Owner: 10000

Building Manager: 10000

Building Contact: 10000

Building Phone: 10000

Building Fax: 10000

Building Email: 10000

Building Website: 10000

Building Description: 10000

Building Accessibility: 10000

Building Compliance: 10000

Building Status: 10000

Building Notes: 10000



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. 6624 HARBOUR BLVD.			Policy Number:
City PANAMA CITY BEACH, FL	State	ZIP Code 32407	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.

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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. 6624 HARBOUR BLVD.			Policy Number:
City PANAMA CITY BEACH	State FL	ZIP Code 32407	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 RB17-0499	G5. Date Permit Issued 6-29-17	G6. Date Certificate of Compliance/Occupancy Issued
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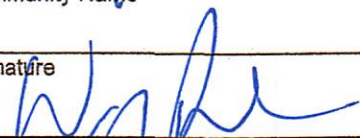
G7. This permit has been issued for: New Construction Substantial Improvement

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 4/24/2018.
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Comments (including type of equipment and location, per C2(e), if applicable)

**OK for C.O.
wp**

Check here if attachments.

FINED

FINED

4/24/2018

Wagner State

Wagner State

OK for CO.
m

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.

Policy Number:

6624 HARBOUR BLVD.

City

State

ZIP Code

Company NAIC Number

PANAMA CITY BEACH FL

32407

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

VIEW NORTH OF FRONT TAKEN 3-1-18



Photo Two

Photo Two Caption

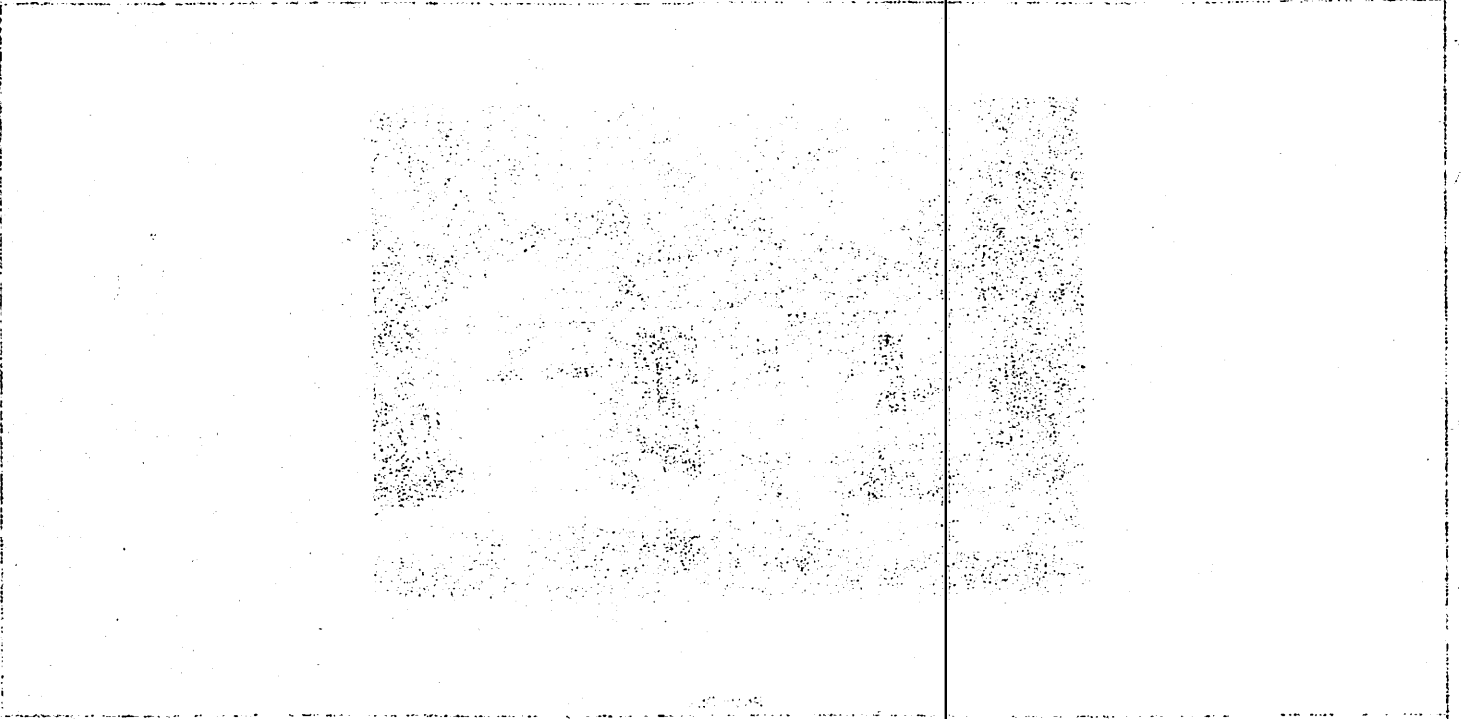
VIEW WEST ACROSS REAR TAKEN 3-1-18

See instructions for item A8

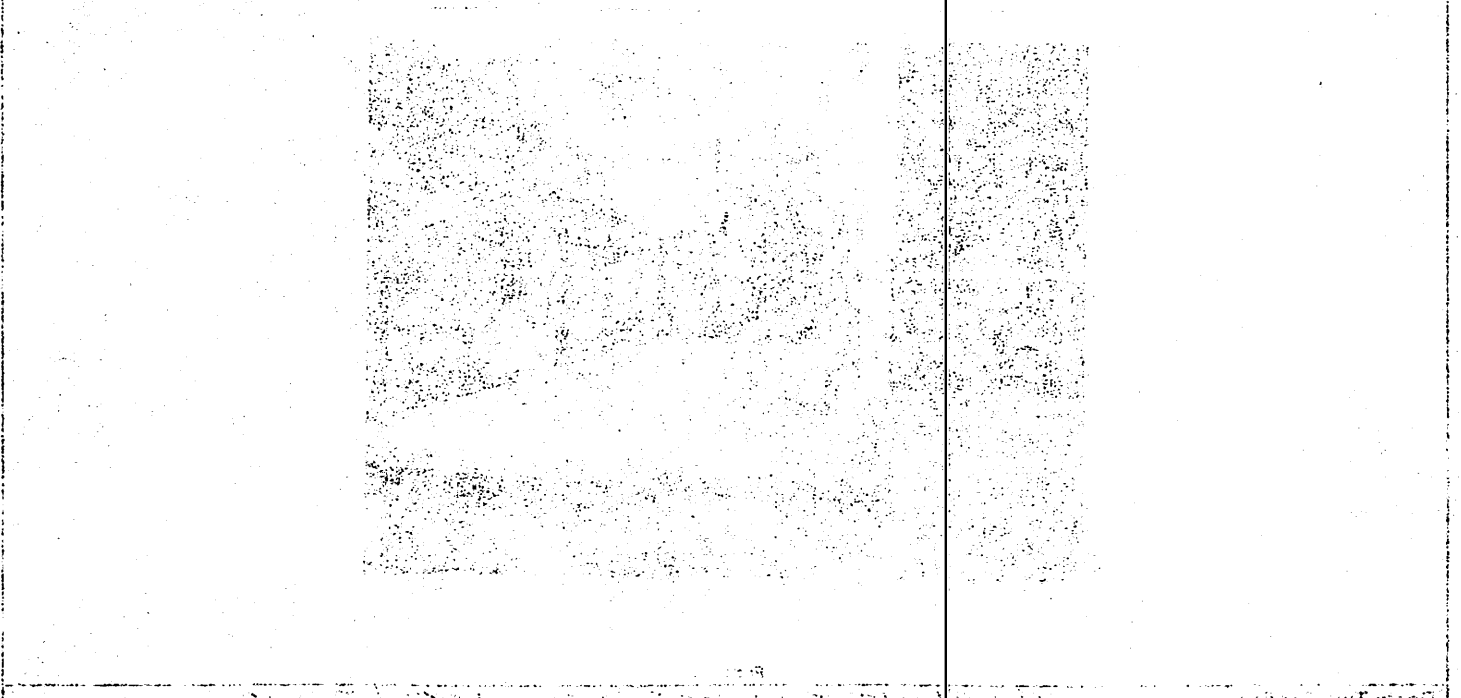
FOR SUBSCRIBER COMPANY USE Billing Street Address (including Apt., Unit, Suite and Box No.) Billing City	Billing State Billing ZIP Code	Billing Country
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Company Name	Billing State	Billing ZIP Code
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If using the service, please refer to the "Getting Started" section of the user manual for more information. If you are not using the service, please refer to the "Getting Started" section of the user manual for more information. If you are not using the service, please refer to the "Getting Started" section of the user manual for more information.



Page One of One



Form No. 100-1008
Revised Date: November 01, 2010

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.

Policy Number:

6624 HARBOUR BLVD

City

State

ZIP Code

Company NAIC Number

PANAMA CITY BEACH, FL

32407

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 VIEW NORTH OF EAST SIDE TAKEN 3-1-18



Photo Two

Photo Two Caption VIEW SOUTH OF WEST SIDE TAKEN 3-1-18

STANDARD INDUSTRIAL CLASSIFICATION

See instructions for item 10.

OMB No. 1545-0047
Expiration Date: November 30, 2018

FIRM, INDUSTRY OR COMPANY USE Primary Industry	Reporting Information from 8 rows A Reporting Information from 8 rows A	REPORTING INFORMATION Reporting Information from 8 rows A
Company Name	COMPANY NAME COMPANY NAME	COMPANY NAME COMPANY NAME

IF YOU ARE REPORTING INFORMATION FROM 8 ROWS A, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS B, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS C, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS D, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS E, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS F, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS G, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS H, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS I, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS J, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS K, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS L, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS M, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS N, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS O, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS P, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS Q, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS R, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS S, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS T, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS U, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS V, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS W, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS X, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS Y, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE. IF YOU ARE REPORTING INFORMATION FROM 8 ROWS Z, YOU MUST REPORT THE NAME OF THE FIRM, INDUSTRY OR COMPANY AND THE NAME OF THE PRODUCT OR SERVICE.

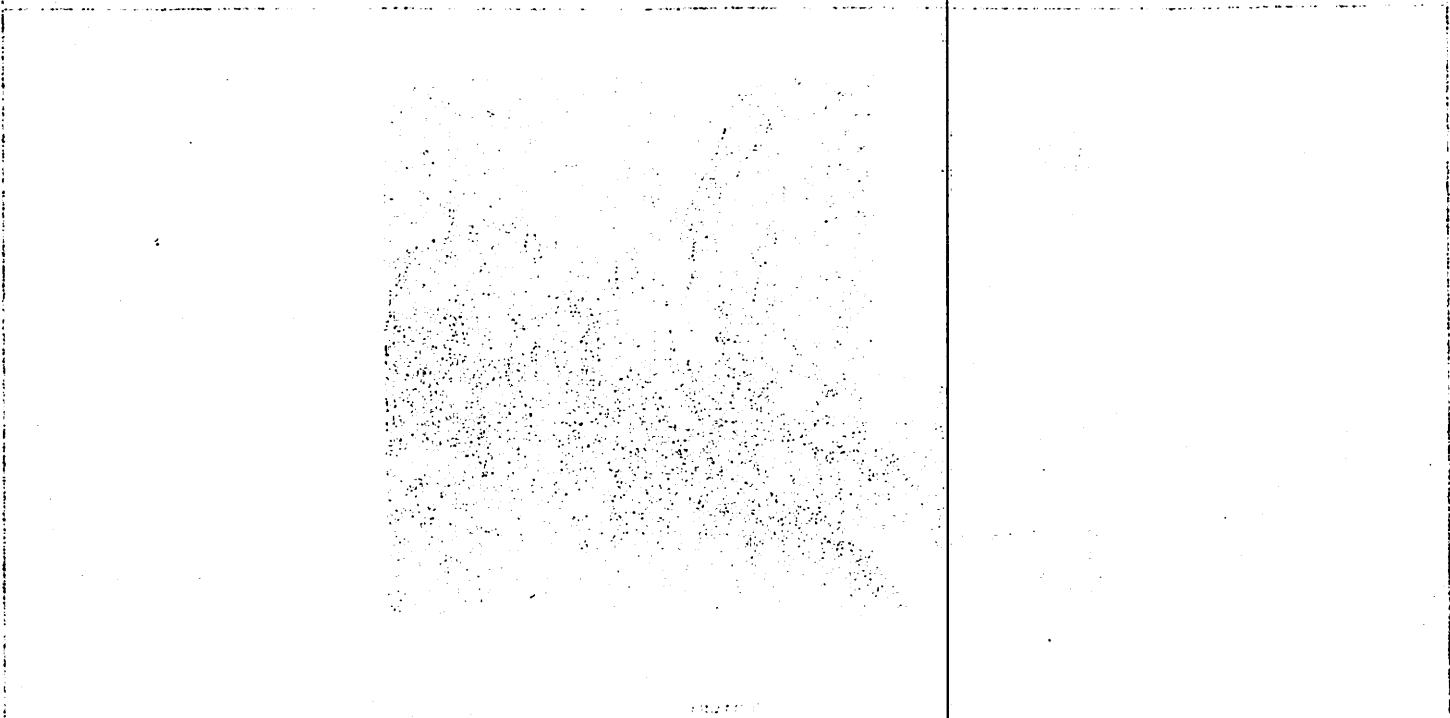


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BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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. 6624 HARBOUR BLVD			Policy Number:
City PANAMA CITY BEACH FL	State	ZIP Code 32407	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.

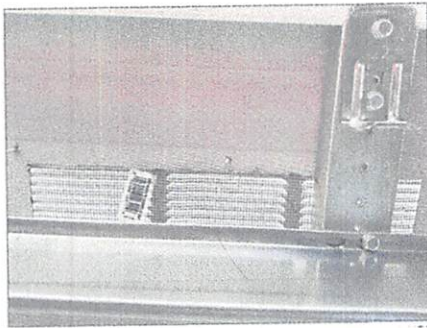


Photo One Caption

VENT PHOTOS TAKEN 3-22-18

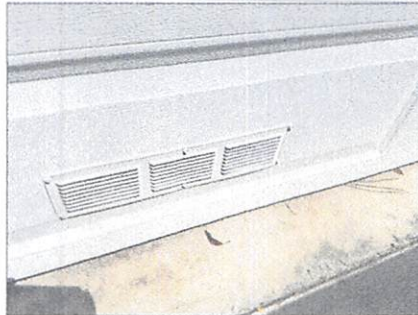
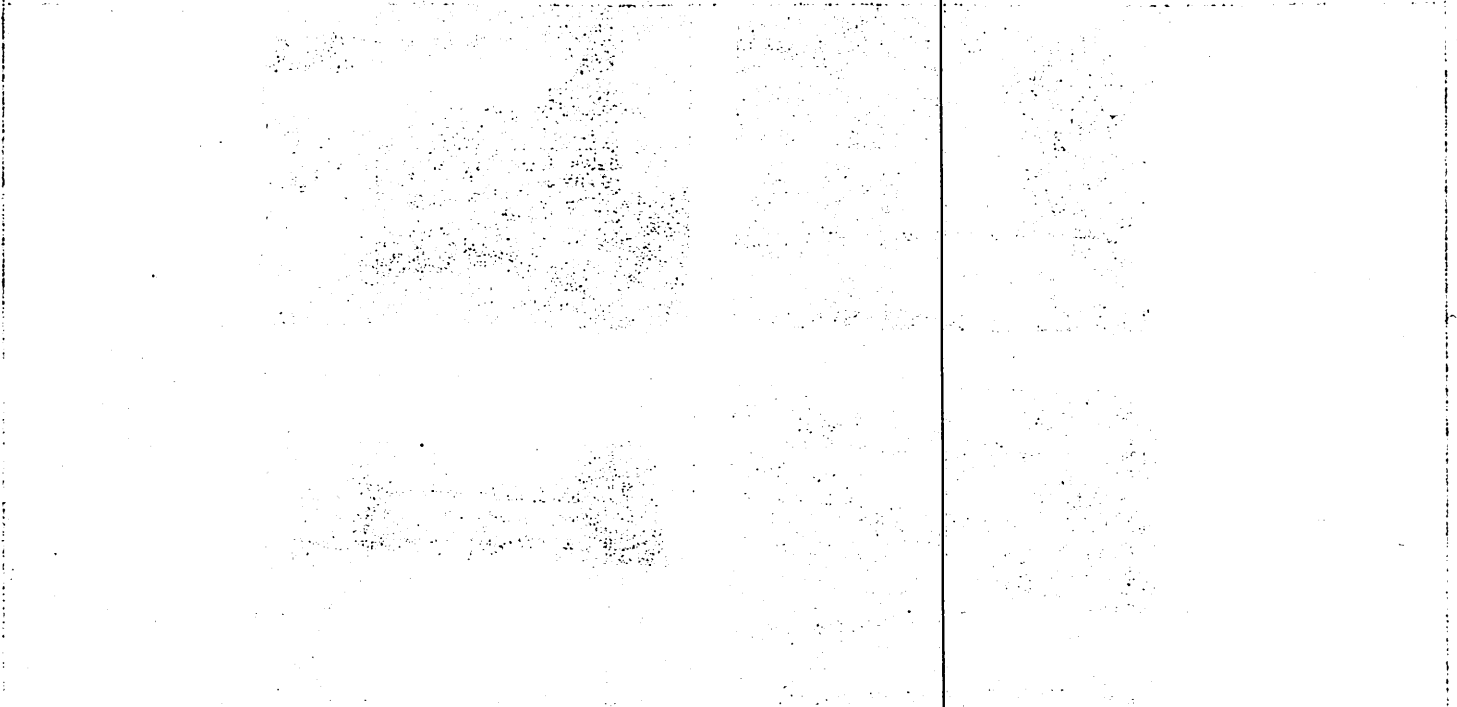


Photo Two Caption

VENT PHOTOS TAKEN 3-22-18

LIFE INSURANCE COMPANY USE Policy Number	Building Information from Section A Building Street Address (Include Apt. No. if applicable) and P.O. Route and Box No.	Building Name City
Company's Full Name	ZIP Code	State

This form is to be filled out by the insured or the policyowner. It is to be filled out in duplicate. One copy is to be retained by the insured or the policyowner and the other copy is to be retained by the insurance company. This form is to be filled out at the time the policy is issued and is to be filled out again if there is a change of address or if the insured or the policyowner moves to a new residence.



Description of Building (This area is mostly blank and contains very faint, illegible text.)	Description of Building (This area is mostly blank and contains very faint, illegible text.)	Description of Building (This area is mostly blank and contains very faint, illegible text.)
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Certification of Engineered Flood Openings

In accordance with NFIP, FEMA TB 1-08, and ASCE/SEI 24-05

I hereby certify that the Crawl Space Door Systems flood vents **816CS, 1220CS, 1232CS, 1616CS, 1624CS, 1632CS, 2032CS, 2424CS, and 2436CS** are designed in accordance with the requirements of the NFIP "Flood Insurance Manual" (2011) to provide automatic equalization of hydrostatic flood forces by allowing for the entry and exit of floodwaters, when properly installed and sized as set forth below. This certification follows the design requirements and specifications established in FEMA Technical Bulletin 1-08, "Openings in Foundation Walls and Walls of Enclosures Below Elevated Buildings in Special Flood Hazard Areas", and the ASCE Standard for "Flood Resistant Design and Construction" (ASCE/SEI 24-05).

Design Characteristics

Section 2.6.2.2 of ASCE 24 provides an equation to determine the required net area of engineered openings (A_o) for a given enclosed area (A_e). This equation is based on the hydraulic formula for the flow rate across sharp edged orifices. I have utilized this equation to calculate 1) the respected flow rate through the individual openings between louvers; 2) the flow rate through the main frame opening in case the louver is blown out during a flood event; and 3) the flow rate of water flowing through louver blades following hydraulic short tube theory. The ultimate maximum total enclosed area (A_e) that can be serviced by a single vent has then been determined by utilizing the lowest flow rate of the three assessed scenarios for each vent and is listed in Table 1.

These values are based on the following assumptions:

- In absence of reliable data, the rates of rise and fall have been assumed with 5 feet/hour;
- The (maximum) difference between the exterior and interior floodwater levels has been assumed with 1 foot during base flood conditions;
- A factor of safety of 5 has been assumed, which is consistent with design practices related to protection of life and property;
- The net area of openings (A_o) as provided by the manufacturer.

*)	Model	H x W [in]	A_o [in ²]	A_e [ft ²]
<input type="checkbox"/>	816CS	8 x 16	105	205
<input type="checkbox"/>	1220CS	12 x 20	235	500
<input type="checkbox"/>	1232CS	12 x 32	305	645
<input type="checkbox"/>	1616CS	16 x 16	180	395
<input type="checkbox"/>	1624CS	16 x 24	310	670
<input type="checkbox"/>	1632CS	16 x 32	405	835
<input type="checkbox"/>	2032CS	20 x 32	630	1240
<input type="checkbox"/>	2424CS	24 x 24	570	1230
<input type="checkbox"/>	2436CS	24 x 36	850	1765

Table 1 Maximal total enclosed area (A_e) that can be served by each individual model based on the given net area of engineered openings (A_o)

Installation Requirements and Limitations

This certification will be voided if the following installation requirements and limitations are not enforced:

- There shall be a minimum of two openings on different sides of each enclosed area;
- The bottom of each required opening shall be no more than 1ft above the adjacent ground level;
- No temporary (e.g. during cold weather) or permanent solid cover may be placed into or over the flood vent that would block the automatic entry or exit of floodwaters at any time;
- Where analysis indicates rates of rise and fall greater than 5 ft/hr, the total enclosed area as given in Table 1 shall be reduced accordingly to account for the higher rates of rise and fall.

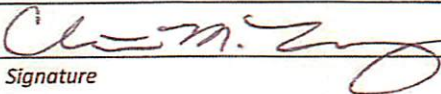
Identification of the Building and Installed Flood Vents

The flood vent models marked in Table 1*) are being installed at the following building:

Building Address

Certifying Design Professional

<i>Name</i>	Christopher Mark Loney
<i>Title</i>	Mechanical Engineer
<i>Address</i>	1675 Meredith Road, Virginia Beach, VA 23455
<i>Type of License</i>	Professional Engineer
<i>License #</i>	0402029000
<i>Issuing State</i>	Virginia



Signature

