#### 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 USE		
A1. Building Owner's Name					Policy Num	nber:	
JEFF JOHNSTON							
<ul><li>A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.</li><li>722 GAINOUS ROAD</li></ul>						Company N	NAIC Number:
City							
PANAMA CITY BEACH Florida						ZIP Code 32413	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX ID NUMBER 35277-030-000							
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL							
A5. Latitude/Longitud	de: Lat. <u>30</u>	°16'05.6" N.	Long. <u>8</u>	5°57'42.3"W.	Horizontal Datur	n: 🔲 NAD	1927 🗵 NAD 1983
A6. Attach at least 2	photograph	s of the building if the	Certific	ate is being used to	o obtain flood insur	ance.	
A7. Building Diagram	n Number	6					
A8. For a building wi	- th a crawlsp	ace or enclosure(s):					
_	·	pace or enclosure(s)	:	2,550 sq ft			
b) Number of pe	ermanent flo	od openings in the cra	wlspac	e or enclosure(s) w	ithin 1.0 foot above	e adjacent g	rade 58
c) Total net area	of flood op	enings in A8.b 3,4	06 s	g in			
	-	gs? ☐ Yes ⊠ N					:
A9. For a building wit		· · · · · · · · · · · · · · · · · · ·	•				
				aa #			
		ed garage 0			at about adiacont	do	•
		od openings in the att			ot above adjacent (	grade	0
c) Total net area			0	sq in			
d) Engineered fl	ooa opening	gs? ∐ Yes ⊠ N	0				
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Community		ommunity Number		B2. County Name			B3. State
BAY COUNTY 120004 Florida							
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	) E	IRM Panel ffective/	B8. Flood Zone(s	(Zc	se Flood Elevation(s) one AO, use Base
12005C0164 H 06/02/2009 Revised Date 06/02/2009 AE Flood Depth) 8.0'					od Depuily		
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 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 DPA							

# **ELEVATION CERTIFICATE**

IMPORTANT: In these spaces, copy the corresponding information from Section A.						FOR INSURANCE COMPANY USE
	ing Street Address (including Apt., Unit, Suite, BAINOUS ROAD	and/or Bldg. No.) or	P.O. Route a	nd Bo	ox No.	Policy Number:
City PANA	AMA CITY BEACH	State Florida	ZIP Coo 32413	le		Company NAIC Number
	SECTION C - BUILDIN	NG ELEVATION IN	FORMATION	v (SU	RVEY R	EQUIRED)
C1.	Building elevations are based on: Cons *A new Elevation Certificate will be required v	struction Drawings* when construction of	Building			uction* X Finished Construction
C2.	Elevations – Zones A1–A30, AE, AH, A (with Complete Items C2.a–h below according to the	he building diagram s	specified in Ite	em A	7. In Puert	/AE, AR/A1–A30, AR/AH, AR/AO. to Rico only, enter meters.
	Benchmark Utilized: NGS -Q177		al Datum: NA	VD 19	988	8 3 414 1120
	Indicate elevation datum used for the elevation		gh h) below.			
	☐ NGVD 1929 ☒ NAVD 1988 ☐ ©  Datum used for building elevations must be the		d for the BEE			THE VIEW SAIN SAIN
	Datum used for building elevations must be ti	le same as mai used	u ioi ille bre.			Check the measurement used.
	a) Top of bottom floor (including basement, of	crawlspace, or enclos	sure floor)		15. 45	× feet  meters
	b) Top of the next higher floor		<u>-</u>		21. 45	
	c) Bottom of the lowest horizontal structural	member (V Zones or	nly)	<u> </u>	N/A	X feet meters
	d) Attached garage (top of slab)	± 100 days (100 days	_	١	N/A	X feet  meters
	e) Lowest elevation of machinery or equipme (Describe type of equipment and location	ent servicing the build in Comments)	ding	_	17, 95	x feet meters
	f) Lowest adjacent (finished) grade next to b	ouilding (LAG)	1.5	1	15. 45	X feet  meters
	g) Highest adjacent (finished) grade next to l	ter Zara ux		1	19, 25	X feet  meters
	h) Lowest adjacent grade at lowest elevation structural support		cluding	1	N/A	x feet meters
	SECTION D - SURVI	EVOR ENGINEER	OR ARCHI	TECT	CERTIE	ICATION
l cei stati	s certification is to be signed and sealed by a la rtify that the information on this Certificate repo ement may be punishable by fine or imprisonn	and surveyor, engine resents my best effor ment under 18 U.S. C	eer, or archite rts to interpre Code, Section	ct aut t the o	horized by data availa	y law to certify elevation information. able. I understand that any false
Wer	e latitude and longitude in Section A provided	by a licensed land s	surveyor?	∐ Yes	∐ No	Check here if attachments.
	tifier's Name NNIE THOMAS WHITE, JR	License Nu 6041	mber		Park Agrici	
Title PRE	e ESIDENT	75 MI 27 (4.4) (5	E A	- **		
	npany Name LAND SURVEYING & MAPPING, INC	into a resident.		TE TE		mrsdin well
	lress BOX 396/ 2281 SEAY ROAD	3 3 1 Eq.	14	i u		557618
City	TTONDALE	State Florida		P Co 2431	de	
Sigr	nature The Left	Date 03/16/2018		elepho 50) 5	one 79-2315	
Cop	y all pages of this Elevation Certificate and all at	ttachments for (1) con	nmunity officia	al, (2)	insurance	agent/company, and (3) building owner.
A 5. A8(b	nments (including type of equipment and locat LATITUDE AND LONGITUDE WERE DERIND) OPENINGS ARE ONE INCH, SPACES IN TOPENING THE RESIDENT OF T	VED FROM THE BAY	Y COUNTY P			

# **ELEVATION CERTIFICATE**

IMPORTANT: In these spaces, copy the correspon	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, a 722 GAINOUS ROAD	Policy Number:					
City PANAMA CITY BEACH		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).						
Top of bottom floor (including basement, crawlspace, or enclosure) is			rs above or below the HAG.			
<ul> <li>Top of bottom floor (including basement, crawlspace, or enclosure) is</li> </ul>		_	rs above or below the LAG.			
E2. For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in the diagrams) of the building is	d openings provided in Se	ection A Items 8 and/or				
E3. Attached garage (top of slab) is						
E4. Top of platform of machinery and/or equipment servicing the building is		∏feet ∏mete	rs  above or below the HAG.			
E5. Zone AO only: If no flood depth number is availa floodplain management ordinance? Yes		om floor elevated in ac	cordance with the community's			
SECTION F - PROPERTY O	WNER (OR OWNER'S R	EPRESENTATIVE) CI	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.						
community-issued BFE) or Zone AO must sign here.	The statements in Section	ons A, B, and E for 20 ons A, B, and E are cor	rect to the best of my knowledge.			
community-issued BFE) or Zone AO must sign here.  Property Owner or Owner's Authorized Representation	The statements in Section	ons A, B, and E are cor	rect to the best of my knowledge.			
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community-issued BFE) or Zone AO must sign here.  Property Owner or Owner's Authorized Representati	The statements in Section	ons A, B, and E are con	rect to the best of my knowledge.			
community-issued BFE) or Zone AO must sign here.  Property Owner or Owner's Authorized Representati  Address	The statements in Section ve's Name  City	ons A, B, and E are con	ate ZIP Code			
community-Issued BFE) or Zone AO must sign here.  Property Owner or Owner's Authorized Representati  Address  Signature	The statements in Section ve's Name  City	ons A, B, and E are con	ate ZIP Code			
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community-Issued BFE) or Zone AO must sign here.  Property Owner or Owner's Authorized Representati  Address  Signature	The statements in Section ve's Name  City	ons A, B, and E are con	ate ZIP Code			

# **ELEVATION CERTIFICATE**

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, St 722 GAINOUS ROAD	ox No. Policy Number:		
City PANAMA CITY BEACH	State Florida	ZIP Code 32413	Company NAIC Number
SECTION	ON G - COMMUNITY I	NFORMATION (OP	TIONAL)
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete		
	n signed and sealed by a licensed surveyor, Indicate the source and date of the elevation		
G2. A community official completed Sect or Zone AO.	ion E for a building loca	ated in Zone A (with	out a FEMA-issued or community-issued BFE)
G3.  The following information (Items G4-	-G10) is provided for co	ommunity floodplain	management purposes.
G4. Permit Number	G5. Date Permit Issu  12-14-		G6. Date Certificate of Compliance/Occupancy Issued
RB17-1280	12 19-	/ /	
G7. This permit has been issued for:	New Construction	] Substantial Improv	ement
G8. Elevation of as-built lowest floor (including of the building:	g basement)		☐ 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 Official's Name Forter		Title	
Community Name/		Telephone	
Signature		Date 3/19/20	12
Comments/(including type of equipment and lo	cation, per C2(e), if app	olicable) '	
ok for c.o.			
ω <sub></sub> P			
		!	
			☐ Check here if attachments.

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE Policy Number:		
Building Street Address (including Apt., U 722 GAINOUS ROAD			
City reduced OlAVI valence	State	ZIP Code	Company NAIC Number
PANAMA CITY BEACH	Florida	32413	DANAMA CITY BEACH

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 03/12/2018



Photo Two

Photo Two Caption REAR VIEW 03/12/2018

#### **BUILDING PHOTOGRAPHS**

# **ELEVATION CERTIFICATE**

**Continuation Page** 

IMPORTANT: In these spaces, copy the correspon	ding information from	Section A.		FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, at 722 GAINOUS ROAD	nd/or Bldg. No.) or P.O.	Route and E	ox No.	Policy Number:
City	State	ZIP Code		Company NAIC Number
PANAMA CITY BEACH	Florida	32413		
If submitting more photographs than will fit on the with: date taken; "Front View" and "Rear View"; photographs must show the foundation with represe	and, if required, "Ric	aht Side Vie	w" and "L	.eft Side View." When applicable,
	Photo One			
	CHOIO ONG			
	Photo One			
Photo One Caption				
	<b></b>			
	Photo Two			
	en · · ·			
Photo Two Caption	Photo Two			