#### 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 F				FOR INSUR	RANCE COMPANY USE	
A1. Building Owner's Name Rick Koehnemann					Policy Num	ber:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7500 MORNING MARSH TRAIL					Company N	AIC Number:
City PANAMA CITY BEACH			State Florida		ZIP Code 32413	
A3. Property Description (Lot a LOT 176 RIVER CAMP ON CR			Number, Leg	gal Description, etc	<b>:.)</b>	
A4. Building Use (e.g., Resider	ntial, Non-Residential,	Addition,	Accessory,	etc.) RESIDEN	ΓIAL	
A5. Latitude/Longitude: Lat. 3	0°17'21.3" N.	Long. 85	5°48'53.5" W.	Horizontal	Datum: NAD 1	927 🔀 NAD 1983
A6. Attach at least 2 photograp	hs of the building if the	e Certific	ate is being u	sed to obtain flood	l insurance.	
A7. Building Diagram Number	6					
A8. For a building with a crawls	space or enclosure(s):					
a) Square footage of craw	Ispace or enclosure(s)	_	1	061.00 sq ft		
b) Number of permanent flo	ood openings in the cra	awispace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ade 4
c) Total net area of flood o	penings in A8.b	1	090.00 sq in			
d) Engineered flood opening	ngs? ⊠ Yes □ N	lo				
A9. For a building with an attacl	hed garage:					
a) Square footage of attact	a) Square footage of attached garage0.00 sq ft					
b) Number of permanent fl	ood openings in the at	ached g	arage within	1.0 foot above adja	acent grade 0	
c) Total net area of flood o	penings in A9.b		0.00 sq	in		•
d) Engineered flood openir	ngs? ☐ Yes ☒ N	lo				
SI SI	ECTION B - FLOOD I	NSURA	NCE RATE	MAP (FIRM) INF	ORMATION	
B1. NFIP Community Name & (			B2. County	<del></del>		B3. State
BAY COUNTY 120004	·		BAY			Florida
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	Effe	RM Panel ective/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	levation(s) e Base Flood Depth)
12005C0190 H 06-02-2009 Revised Date 06-02-2009 AE 9.0'						
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:						
☐ FIS Profile 区 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:	П	CBRS	☐ OPA			
-						

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IMPORTANT: In these spaces, copy the correspondi	ng information fi	om Section A.	FO	R INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and 7500 MORNING MARSH TRAIL	or Bldg. No.) or F	O. Route and Bo	ox No. Pol	licy Number:
and the second second of the second s	tate Iorida	ZIP Code 32413	Co	mpany NAIC Number
SECTION C – BUILDING E	LEVATION INF	ORMATION (SU	RVEY REQU	IRED)
C1. Building elevations are based on: Construct  *A new Elevation Certificate will be required when  C2. Elevations – Zones A1–A30, AE, AH, A (with BFE Complete Items C2.a–h below according to the building construction.	), VE, V1–V30, V	(with BFE), AR,	plete. AR/A, AR/AE,	AR/A1–A30, AR/AH, AR/AO.
Benchmark Utilized: USCG & GS L-175		Datum: NAVD 88		30 only, enter meters.
Indicate elevation datum used for the elevations in				7 JAN 1 SYAR
☐ NGVD 1929 区 NAVD 1988 ☐ Othe		sixe <sup>n</sup>		
Datum used for building elevations must be the sa	ame as that used			Check the measurement used.
a) Top of bottom floor (including basement, crawled)	Ispace, or enclosu	ire floor)	5.7	
b) Top of the next higher floor			17.2	
c) Bottom of the lowest horizontal structural mem	ber (V Zones only	n) after the the trail	N/	
d) Attached garage (top of slab)		-	N/	/A feet meters
<ul> <li>e) Lowest elevation of machinery or equipment s (Describe type of equipment and location in Co</li> </ul>	omments)	ng (Januar) est	11.4	
f) Lowest adjacent (finished) grade next to buildi	ng (LAG)		4.9	
g) Highest adjacent (finished) grade next to build	ing (HAG)		5.2	20 X feet meters
<ul> <li>h) Lowest adjacent grade at lowest elevation of d structural support</li> </ul>	leck or stairs, incl	uding	5.0	00 × feet meters
SECTION D - SURVEYO	R, ENGINEER,	OR ARCHITECT	CERTIFICA	TION
This certification is to be signed and sealed by a land a land a land that the information on this Certificate representatement may be punishable by fine or imprisonment	nts my best efforts	s to interpret the	lata available.	to certify elevation information.  I understand that any false
Were latitude and longitude in Section A provided by a	licensed land su	rveyor? 🗵 Yes	□No	Check here if attachments.
Certifier's Name ZANNIE THOMAS WHITE, JR	License Num 6041	ber	S. Herm Jr	
Title PRESIDENT	ALCOHOLD STORY	L DEWORKS C	ST 146.1700 2	Place
Company Name Z'S LAND SURVEYING & MAPPING, INC	90 J. L. 19			for his light
Address PO BOX 396/ 2281 SEAY ROAD	- 5 M	(3 &	214	Here
City COTTONDALE	State Florida	ZIP Co 32431	de	
Signature	Date 04-15-2018	Telepho (850) 5		ext. I/A
Copy all pages of this Elevation Certificate and all attach	ments for (1) com	munity official, (2)	insurance ager	nt/company, and (3) building owner.
Comments (including type of equipment and location, particle) A 5. LATITUDE AND LONGITUDE WERE DERIVED A.8 (b,c,d) THERE ARE TWO FLOOD VENTS 12" BY PER VENT FOR A TOTAL COVERAGE AREA OF 100 BY 24" ENGINEERED (MODEL NUMBER 1224CS R. 1340 SQUARE FEET).  C.2 (E) AIRCONDITIONER SERVICING THE RESIDE	FROM THE BAY 720" ENGINEER! 00 SQUARE FEE ATED AT 670 SQ	COUNTY PROPI ED (MODEL NUI T. THERE ARE T	MBER 1220CS WO THERE A	RATED AT 500 SQUARE FEET ARE TWO FLOOD VENTS 16"

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MPORTANT: In these spaces, copy the corresponding	FOR INSURANCE	COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/o	or Bldg. No.) or P.O. Route and	Box No.	Policy Number:	
	ate ZIP Code orida 32413		Company NAIC N	umber
SECTION E - BUILDING ELEY FOR ZONE	VATION INFORMATION (SU AO AND ZONE A (WITHOU		REQUIRED)	
For Zones AO and A (without BFE), complete Items E1–E complete Sections A, B,and C. For Items E1–E4, use nat enter meters.	E5. If the Certificate is intenderural grade, if available. Check	d to support a L the measurem	OMA or LOMR-F ent used. In Puert	request, o Rico only,
E1. Provide elevation information for the following and change the highest adjacent grade (HAG) and the lowest adjacent ground including basement,	neck the appropriate boxes to jacent grade (LAG).	show whether	the elevation is ab	ove or below
crawlspace, or enclosure) is b) Top of bottom floor (including basement,	[ fo	eet	above or	] below the HAG.
crawlspace, or enclosure) is		eet meters		below the LAG.
E2. For Building Diagrams 6–9 with permanent flood open the next higher floor (elevation C2.b in the diagrams) of the building is		eet		below the HAG.
E3. Attached garage (top of slab) is	f	eet 🔲 meters	above or	below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is		eet	above or	below the HAG.
E5. Zone AO only: If no flood depth number is available, floodplain management ordinance? Yes T	is the top of the bottom floor on the local	elevated in acco	ordance with the certify this information	ommunity's on in Section G.
SECTION F - PROPERTY OWNE	R (OR OWNER'S REPRESE	NTATIVE) CEI	RTIFICATION	
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	who completes Sections A, B, statements in Sections A, B,	, and E for Zon and E are corre	e A (without a FEI	MA-issued or ny knowledge.
Property Owner or Owner's Authorized Representative's	Name		: ``	
Address	City	Stat	te .	ZIP Code
Signature	Date	Tele	ephone	
			prioric	
Comments	•			
Comments		· ·		
Comments				
Comments		,		
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Comments				
Comments				

## **ELEVATION CERTIFICATE**

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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 E 7500 MORNING MARSH TRAIL	ox No.	Policy Number:
CityStateZIP CodePANAMA CITY BEACHFlorida32413		Company NAIC Number
SECTION G - COMMUNITY INFORMATION (OP	TIONAL)	
The local official who is authorized by law or ordinance to administer the community's floc Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(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 engineer, or architect who is authorized by law to certify elevation information. (data in the Comments area below.)		
G2. A community official completed Section E for a building located in Zone A (with or Zone AO.	out a FEM/	A-issued or community-issued BFE)
G3. The following information (Items G4–G10) is provided for community floodplain	managem	ent purposes.
G4. Permit Number G5. Date Permit Issued	G6. [	Date Certificate of Compliance/Occupancy Issued
RB17-0688 9-13-17		compliance/occupancy issued
G7. This permit has been issued for:   New Construction  Substantial Improvement	ement	·
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 Title		
Community Name Telephone		
Signature Date 4/18/18	,	
Comments (including type of equipment and location, per C2(e), if applicable)		
C. U.		
Late		
V		
		Check here if attachments.

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

See Instructions for Item A6.

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IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Ap 7500 MORNING MARSH TRAIL	Policy Number: 38 X IS AMAJAA		
City so no to his ylungur we so king	significant is rough State	ZIP Code	Company NAIC Number
PANAMA CITY BEACH	Florida	32413	with date takent "Front View" at

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 4/10/18 Clear Photo One



Photo Two

REAR VIEW 4/10/18 Photo Two Caption

Clear Photo Two

IMPORTANT: In these spaces, copy the co	orresponding informatio	n from Section A.		FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, 7500 MORNING MARSH TRAIL	Suite, and/or Bldg. No.) o	or P.O. Route and B	ox No.	Policy Number:
City PANAMA CITY BEACH	State Florida	ZIP Code 32413		Company NAIC Number
If submitting more photographs than will f with: date taken; "Front View" and "Rea photographs must show the foundation with	it on the preceding page ar View"; and, if require a representative examples	, affix the additiona d, "Right Side Vie s of the flood openin	photogra w" and "l gs or vent	phs below. Identify all photographs Left Side View." When applicable, s, as indicated in Section A8.
	Photo	Three		
	Photo '	Three		
Photo Three Caption				Clear Photo Three
	Photo	Four		
	Photo	Four		
Photo Four Caption				Clear Photo Four
FEMA Form 086-0-33 (7/15)	Replaces all pro	evious editions.	1	Form Page 6 of

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# Certification of Engineered Flood Openings

In accordance with the Code of Federal Regulations for the National Flood Insurance Program

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 Code of Federal Regulations for the National Flood Insurance Program (NFIP) 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. Vent opening measurements were measured and certified by Mr. Christopher Mark Loney, Virginia P.E. NO. 029000. Detailed calculations were prepared as outlined In "Review of certification of Engineered Flood Openings," prepared by Dr. Georg Reichard, Associate Professor of Building Construction, Virginia Tech (available upon request from Crawl Space Door Systems, Inc. billy@crawlspacedoors.com)

#### **Design Characteristics**

Section 2.6.2.2 of ASCE/SEI 24-05 provides an equation to determine the required <u>net area</u> of engineered openings (A<sub>o</sub>) for a given <u>enclosed area</u> (A<sub>e</sub>). 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 restricted flow rate through the main frame opening in case the louver is blown out during a flood event; 2) the flow rate through the individual openings between louver blades; and 3) the flow rate through projected openings between louver blades following hydraulic short-tube theory. The maximum total enclosed area (A<sub>e</sub>) 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 at a minimum rate of 5 feet/hour;
- The (maximum) difference between the exterior and interior floodwater levels shall not exceed 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<sub>o</sub>) as provided by the manufacturer.

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 subject to flooding;
- The bottom of all openings shall be no higher than one foot above the higher of the interior or exterior grade that is immediately under each opening;
- 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 data or analyses indicate more rapid rates of rise and fall, the required number of openings shall be increased to account for those different conditions. The number or size of the openings may be decreased if data or analyses indicate rates of rise and fall are less than 5 feet per hour.

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

Table 1 Maximum total <u>enclosed</u> <u>area</u>  $(A_e)$  that can be serviced by each individual model based on the given <u>net area</u> of engineered openings  $(A_o)$ 

#### **Certifying Design Professional**

Name	Steve A. Geci	Title	President	WEVE A. GOOD
Company	Geci & Associates Engineers, Inc.		*	SON TICENSTRUCT
Address	2950 N 12 <sup>th</sup> Avenue, Pensacola, FL 32503			No. 33658
License	Florida	License	e No. 33658	STATE OF
Signature		Date:	11/29/17	SORIOR CHILL

Identification of the Building and Installed Flood Vents (By Others)

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

Building Address

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