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.

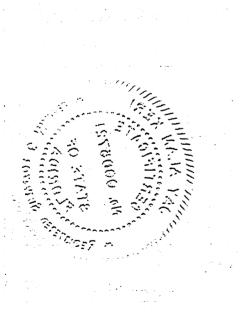
| SECTION A – PROPERTY INFORMATION FOR INSURANCE COMPANY | | | | | RANCE COMPANY USE | | |
|--|--|---|-----------|--------------------------|----------------------|---------------|-------------------------------|
| A1. Building Owner's Name Policy Number: | | | | | ber: | | |
| CAN'T TOPP THIS,LLC (PES 15130-D) | | | | | | | |
| A2. Building Street Box No. 8319 SURF DRIVE | · | luding Apt., Unit, Suite | e, and/o | r Bidg. No.) or P.O. | Route and | Company N | IAIC Number: |
| City State ZIP Code | | | | | | | |
| | MA CITY BEACH Florida | | | | 32408 | | |
| i • • | • • | d Block Numbers, Tax , EAST 37.5' OF LOT | | · - | • | AT BOOK 8, | PAGE 28 |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL | | | | | | | |
| A5. Latitude/Longi | tude: Lat. 30 | -09-49.1 N | Long. 8 | 5-47-08.7 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 Diagra | am Number _ | 6 | | | | | |
| A8. For a building | with a crawlsp | pace or enclosure(s): | | | | | |
| a) Square foo | tage of crawls | space or enclosure(s) | | 1,581 sq ft | | | |
| b) Number of | permanent flo | od openings in the cra | awlspac | e or enclosure(s) w | ithin 1.0 foot above | e adjacent gr | rade 0 |
| c) Total net ar | ea of flood op | enings in A8.b |)s | sq in | | | |
| d) Engineered | I flood opening | gs? 🗌 Yes 🗵 N | 0 | | | | |
| A9. For a building | with an attach | ed garage: | | | | | |
| _ | | ed garage0 | | sa ft | | | |
| | | ood openings in the att | | | oot above adiacent | orade | 0 |
| | | | 0 | sq in | | | |
| d) Engineered | • | | | | | | |
| d) Engineered | i ilood operiiri | gsr ∐ res ⊠ N | 10 | | | | |
| | SE | CTION B - FLOOD II | NSUR. | NCE RATE MAP | (FIRM) INFORM | ATION | |
| B1. NFIP Commun | ity Name & C | ommunity Number | | B2. County Name | 9 | | B3. State |
| BAY COUNTY 120 | 004 | | | BAY | | | Florida |
| B4. Map/Panel | B5. Suffix | B6. FIRM Index | | IRM Panel | B8. Flood Zone(s | B9. Ba | se Flood Elevation(s) |
| Number | | Date | R | ffective/ evised Date | 15 (E1) (15 (I) | ÌΙο | one AO, use Base od Depth) |
| 12005C 0316 | Н | 06/02/2009 | 06/02 | 2/2009 | "VE" / "X" | 13.0 | |
| B10 Indicate the s | source of the I | Base Flood Elevation | (BFE) d | ata or base flood d | enth entered in Iter | n B9: | |
| i | | Community Determ | · · · · . | | - | | |
| B11. Indicate elev | ation datum u | sed for BFE in Item B | 9: 🕅 N | IGVD 1929 ⊠ N | AVD 1988 | ther/Source: | |
| | | | | | | | |
| | B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🗵 No | | | | | | |
| Designation l | Date: | | CBRS | ☐ OPA | | | |
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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 US | | | | |
|--|------------------------------|----------------------------|---|--|
| Building Street Address (including Apt., Unit, Suite, and/or 8319 SURF DRIVE (UNIT D) | Policy Num | Policy Number: | | |
| City State PANAMA CITY BEACH Flori | | | Company N | NAIC Number |
| SECTION C – BUILDING ELE | VATION INFORMAT | ION (SURVEY | REQUIRED) | |
| C1. Building elevations are based on: Construction | | ding Under Con | struction* 🗵 | Finished Construction |
| *A new Elevation Certificate will be required when co C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), \ | | | AD/AE AD/A1 | A20 AD/ALL AD/A0 |
| Complete Items C2.a-h below according to the build Benchmark Utilized: MONUMENT "R-74" | | n Item A7. In Pu | | |
| Indicate elevation datum used for the elevations in ite | ems a) through h) below | ٧. | | |
| ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other/S Datum used for building elevations must be the same | - | | | |
| Datum used for building elevations must be the same | e as that used for the B | FE. | Check t | he measurement used. |
| a) Top of bottom floor (including basement, crawlspa | ace, or enclosure floor) | | | feet meters |
| b) Top of the next higher floor | | <u>21</u> . <u>3</u> | | feet meters |
| c) Bottom of the lowest horizontal structural member | (V Zones only) | <u>20</u> . <u>0</u> | X | feet meters |
| d) Attached garage (top of slab) | | N/A | | feet meters |
| e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Comr | icing the building nents) | 18. 2 | | feet meters |
| f) Lowest adjacent (finished) grade next to building | (LAG) | <u> </u> | | feet meters |
| g) Highest adjacent (finished) grade next to building | (HAG) | <u> </u> | | feet meters |
| h) Lowest adjacent grade at lowest elevation of deck structural support | or stairs, including | <u>8</u> . <u>6</u> | X | feet meters |
| SECTION D – SURVEYOR, | ENGINEER, OR ARC | HITECT CER | TIFICATION | |
| This certification is to be signed and sealed by a land sur- l certify that the information on this Certificate represents statement may be punishable by fine or imprisonment und | my best efforts to interest | pret the data av | d by law to certif ailable. I unders | y elevation information. stand that any false |
| Were latitude and longitude in Section A provided by a lice | ensed land surveyor? | ⊠Yes □ N | o Ched | ck here if attachments. |
| Certifier's Name JAY KERI | License Number 5721 | | | |
| Title PROFESSIONAL SURVEYOR & MAPPER | | | 1 | |
| Company Name POOLE ENGINEERING & SURVEYING, INC. | | | | Plice . |
| Address 2145 DELTA BOULEVARD, SUITE 100 | | | | Here Ye |
| City TALLAHASSEE | State Florida | ZIP Code 32303 | | |
| Signature | Date 09/24/2018 | Telephone (850) 386-511 | 7 | |
| Copy all pages of this Elevation Certificate and all attachmen | nts for (1) community off | ficial, (2) insuran | ce agent/compa | ny, and (3) building owner. |
| Comments (including type of equipment and location, per Elevation of 18.2 feet shown on C2e obtained on raised at Elevation of 8.6 feet shown on C2h obtained at end of wood | c unit on west side of re | | | |
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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 US | | | | |
|--|----------------------|-------------------------|---|--|
| Building Street Address (including Apt., Unit, Suite, an 8319 SURF DRIVE (UNIT D) |). Route and Box No. | Policy Number: | | |
| City PANAMA CITY BEACH | State Florida | ZIP Code 32408 | Company NAIC Number | |
| SECTION E - BUILDING EI FOR ZON | | | (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 the highest adjacent grade (HAG) and the lowest | | | er the elevation is above or below | |
| a) Top of bottom floor (including basement, crawlspace, or enclosure) is | | feet mete | ers above or below the HAG. | |
| b) Top of bottom floor (including basement, crawlspace, or enclosure) is | | feet | ers 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 | openings provided in | Section A Items 8 and/o | | |
| E3. Attached garage (top of slab) is | | | <u> </u> | |
| E4. Top of platform of machinery and/or equipment servicing the building is | | | ers above or below the HAG. | |
| E5. Zone AO only: If no flood depth number is availat floodplain management ordinance? | | | ccordance with the community's certify this information in Section G. | |
| SECTION F - PROPERTY OW | NER (OR OWNER'S | REPRESENTATIVE) C | 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 | e's Name | | | |
| Address | City | S | tate ZIP Code | |
| Signature | Date | e T | elephone | |
| Comments | | | | |
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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 US | | | | | | |
|---|---|----------------------------|---|--|--|--|
| Building Street Address (including Apt., Unit, St 8319 SURF DRIVE (UNIT D) | uite, and/or Bldg. No.) or F | P.O. Route and Box No. | Policy Number: | | | |
| City PANAMA CITY BEACH | State Florida | ZIP Code 32408 | Company NAIC Number | | | |
| SECTIO | N G - COMMUNITY INF | ORMATION (OPTIONAL) | | | | |
| Sections A, B, C (or E), and G of this Elevation | 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 Ricco only, enter meters. | | | | | |
| G1. The information in Section C was taken engineer, or architect who is authorized that a in the Comments area below.) | engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation | | | | | |
| G2. A community official completed Secti or Zone AO. | on E for a building located | d in Zone A (without a FEN | /IA-issued or community-issued BFE) | | | |
| G3. The following information (Items G4– | G10) is provided for comm | munity floodplain manager | nent purposes. | | | |
| G4. Permit Number | G5. Date Permit Issued | G6. | Date Certificate of Compliance/Occupancy Issued | | | |
| CB18-0012 | 2-19-18 | Y | | | | |
| G7. This permit has been issued for: | New Construction S | ubstantial Improvement | | | | |
| G8. Elevation of as-built lowest floor (including of the building: | g basement) | fee | et meters Datum | | | |
| G9. BFE or (in Zone AO) depth of flooding at the building site: feet meters | | | | | | |
| G10. Community's design flood elevation: | | | | | | |
| Local Official's Name Na. Inc. Torte | | Title | | | | |
| Community Name | | Telephone | | | | |
| Signature Date 7/78/Zolk | | | | | | |
| Comments xinoluding type of equipment and loc | cation, per C2(e), if applic | able) | | | | |
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7/28/2018

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

| IMPORTANT: In these spaces, copy t | FOR INSURANCE COMPANY USE | | |
|---|--------------------------------|---------------------------|---------------------|
| Building Street Address (including Apt., 8319 SURF DRIVE (UNIT D) | Unit, Suite, and/or Bldg. No.) | 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 One Caption FRONT



Photo Two

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BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

| IMPORTANT: In these spaces, copy th | FOR INSURANCE COMPANY USE | | |
|---|--------------------------------|---------------------------|---------------------|
| Building Street Address (including Apt., 8319 SURF DRIVE (UNIT D) | Unit, Suite, and/or Bldg. No.) | 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 One

Photo One Caption EAST



Photo Two

Note: The V Zone design certificate is not a substitute for the NFIP Elevation Certificate (see Fact Sheet No. 1.4, Lowest Floor Elevation), which is required to certify as-built elevations needed for flood insurance rating.

| V ZONE DESIGN CERTIFICATE |
|--|
| Name Cart Topo This, LLC Policy Number (Insurance Co. Use) |
| Building Address of Other Description Sure Dave Unit & D 8319 SURE DRIVE |
| Permit No. CB18-0012-thn CB18-0015city Payma City Beach State 7 zip Code 32408 |
| |
| SECTION I: Flood Insurance Rate Map (FIRM) Information |
| Community No. Bay County Panel No. Panel No. Suffix FIRM Date 6-Z-09 FIRM Zone(s) X, VE-13 |
| SECTION II: Elevation Information Used for Design |
| [NOTE: This section documents the elevations/depths used or specified in the design – it does not document surveyed elevations and is not equivalent to the as-built elevations required to be submitted during or after construction.] |
| 1. FIRM Base Flood Elevation (BFE) [3 feet |
| 2. Community's Design Flood Elevation (DFE) Bay County requires 1 foot freeboard |
| 3. Elevation of the Bottom of Lowest Horizontal Structure Member |
| 4. Elevation of Lowest Adjacent Grade |
| 5. Depth of Anticipated Scour/Erosion used for Foundation Design |
| 6. Embedment Depth of Pilings of Foundation Below Lowest Adjacent Grade |
| * Indicate elevation datum used in 1-4: NGVD29 NAVD88 Other |
| SECTION III: V Zone Design Certification Statement |
| I certify that: (1) I have developed or reviewed the structural design, plans, and specifications for construction of the above- |
| referenced building and (2) that the design and methods of construction specified to be used are in accordance with accepted standards of practice** for meeting the following provisions: |
| The bottom of the lowest horizontal structural member of the lowest floor (excluding piles and columns) is elevated to or above the BFE. |
| The pile and column foundation and structure attached thereto is anchored to resist flotation, collapse, and lateral movement due to the effects of the wind and water loads acting simultaneously on all building components. Water loading values used are those associated with the base flood***. Wind loading values used are those required by the applicable State or local building code. The potential for scour and erosion at the foundation has been anticipated for conditions associated with the base flood, including wave action. |
| SECTION IV: Breakaway Wall Design Certification Statement |
| [NOTE. This section must be certified by a registered engineer or architect when breakaway walls are designed to have resistance of more than 20 psf (0.96 kN/m2) determined using allowable stress design] |
| I certify that: (1) I have developed or reviewed the structural design, plans, and specifications for construction of breakaway walls to be constructed under the above-referenced building and (2) that the design and methods of construction specified to be used are in accordance with accepted standards of practice** for meeting the following provisions: |
| Breakaway wall collapse shall result from a water load less than that which would occur during the base flood***. |
| The elevated portion of the building and supporting foundation system shall not be subject to collapse, displacement, or other structural damage due to the effects of wind and water loads acting simultaneously on all building components (see Section III). |
| SECTION V: Certification and Seal |
| This certification is to be signed and sealed by a registered professional engineer or architect authorized by law to certificatural designs. I certify the V Zone Design Certification Statement (Section III) and the Breakaway Wall Design Certification Statement (Section IV, check if applicable). |
| Place Seal Here |
| Certifier's Name BRAN LOWBS License Number AROUT 14 1 Digitally |
| Title RESIDENT - ARCHITECT Company Name Brills D. GIMBS ANCHITET THE STORY Brian D Con |
| Address 308 COCONUT GROVE COURT |
| City Quyma City Basch State 1 Zip Code 32407 16:41:25 |
| Signature P Date 7-23-19 Telephone 650-236-6087 |

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