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 Number:				
SLAV DOLIS/ALPHA FIRST CONSTRUCTION					
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or I Box No.9129 ABBA LANE	P.O. Route and Company NAIC Number:				
City State	ZIP Code				
PANAMA CITY BEACH Florida	32407				
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 9 OUR FATHER'S UNRECORDED (PARCEL NO. 27550-060-009)					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, et	c.) RESIDENTIAL				
A5. Latitude/Longitude: Lat. 30°11'13.5"N Long. 85°47'24.8"W	Horizontal Datum: NAD 1927 X NAD 1983				
A6. Attach at least 2 photographs of the building if the Certificate is being us	ed to obtain flood insurance.				
A7. Building Diagram Number1A					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) o sq	ft				
b) Number of permanent flood openings in the crawlspace or enclosure((s) within 1.0 foot above adjacent grade0				
c) Total net area of flood openings in A8.b sq in					
d) Engineered flood openings? ☐ Yes ☒ No					
A9. For a building with an attached garage:					
a) Square footage of attached garage 420 sq ft	•				
b) Number of permanent flood openings in the attached garage within 1.	.0 foot above adjacent grade 0				
c) Total net area of flood openings in A9.b 0 sq in	·				
d) Engineered flood openings? ☐ Yes ☒ No					
d) Engineered nood openings.					
SECTION B - FLOOD INSURANCE RATE M	IAP (FIRM) INFORMATION				
B1. NFIP Community Name & Community Number B2. County N	i				
BAY COUNTY 120004 BAY	Florida				
B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date	B8. Flood Zone(s) B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)				
12005C0316 H 06/02/2009 06/02/2009	AE 16.0'				
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				
B12. Is the building located in a Coastal Barrier Resources System (CBRS) and Designation Date: CBRS OPA	area or Otherwise Protected Area (OPA)?				

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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 Box No. 9129 ABBA LANE				Policy Number:		
City State ZIP Code			Company I	NAIC Number		
PANAMA CITY BEACH	Florida	32407		H - J - HE		
SECTION C - BUILDING	ELEVATION INFOR	RMATION (S	URVEY R	EQUIRED)		
C1. Building elevations are based on: Construction Cartificate will be required who				uction* 🗵	Finished Construction	
C2. Elevations – Zones A1–A30, AE, AH, A (with BF Complete Items C2.a–h below according to the Benchmark Utilized: USC&GS Q-182	building diagram spec	vith BFE), AR dified in Item A datum: NAVD 8	7. In Puer	/AE, AR/A1– to Rico only,	A30, AR/AH, AR/AO. enter meters.	
Indicate elevation datum used for the elevations	ser van Philosoph John a			1 -		
☐ NGVD 1929 ※ NAVD 1988 ☐ Oti		i i Xou	Fn a E			
Datum used for building elevations must be the		the BFE.	Proposition	f0	The Property of the Control of the C	
TARRETS				Check t	the measurement used.	
 a) Top of bottom floor (including basement, cra 	wlspace, or enclosure	floor)	18. 33	X	feet meters	
b) Top of the next higher floor			N/A	X	feet meters	
c) Bottom of the lowest horizontal structural me	mber (V Zones only)		N/A	X	feet meters	
d) Attached garage (top of slab)		8	17, 90		feet meters	
e) Lowest elevation of machinery or equipment	servicing the huilding		17, 90	_	feet meters	
(Describe type of equipment and location in	Comments)				leet meters	
f) Lowest adjacent (finished) grade next to buil	ding (LAG)	-	17. 0	X	feet meters	
g) Highest adjacent (finished) grade next to bui			17, 40	[X]	feet meters	
		na	N/A			
 h) Lowest adjacent grade at lowest elevation of structural support 	deck of stairs, include	ng		X	feet meters	
SECTION D - SURVEY	OR, ENGINEER, OF	ARCHITEC	T CERTIF	ICATION		
This certification is to be signed and sealed by a land I certify that the information on this Certificate representatement may be punishable by fine or imprisonment	d surveyor, engineer, o	or architect at	thorized b	y law to certi	fy elevation information. stand that any false	
Were latitude and longitude in Section A provided by	a licensed land surve	yor? 🗵 Ye	s 🗌 No	Che	ck here if attachments.	
Certifier's Name ZANNIE THOMAS WHITE, JR	License Numbe LS 6041	r 1	L L K	mayo na tik	6 de jar de de	
Title PRESIDENT	o sermo				11.14	
Company Name Z'S LAND SURVEYING & MAPPING, INC.	m 32 m		u de la constante de la consta		Place In bell Seal Here!	
Address PO BOX 396/ 2281 SEAY ROAD	en That		-		III 18	
City	State	ZIP C	ode			
COTTONDALE	Florida	32431				
Signature Ju WIII	Date 02/16/2018		579-2315	27 1 13 5	s set ent fa	
Copy all pages of this Elevation Certificate and all attac	DOMESTIC STATE	and the second second	insurance	agent/compa	any, and (3) building owner.	
Comments (including type of equipment and location A 5. LATITUDE AND LONGITUDE WERE DERIVED C2. (e) AIR CONDITIONER SERVICING THE RESIDENCE.	FROM THE BAY CO		PERTY AP	PRAISER W	EBSITE	
frity) of the order to the common			6 S			
			2			

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the correspon	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, ar 9129 ABBA LANE	nd/or Bldg. No.) or P.O	. Route and Box No.	Policy Number:		
City	State	ZIP Code	Company NAIC Number		
PANAMA CITY BEACH	Florida	32407			
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	Photo One				
Thoto One Caption					
·					
	Photo Two	•			
	Photo Two				
Photo Two Caption					

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy th	ne corresponding information	on from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., 9129 ABBA LANE	Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box N	o. Policy Number:
City 1000 1000 1000 1000 1000 1000 1000 10	State	ZIP Code	Company NAIC Number
PANAMA CITY BEACH	Florida	32407	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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 02/15/2018



Photo Two

Photo Two Caption REAR VIEW 02/15/2018

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IMPORTANT: In these spaces, copy the corresponding information from Section A.				ICE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 9129 ABBA LANE					
City PANAMA CITY BEACH	State Florida	ZIP Code 32407	Company NAIG	C Number	
SECTION E – BUILDING E FOR ZO		RMATION (SURVEY EA (WITHOUT BFE)	NOT REQUIRED)		
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		feet	meters	below the HAG.	
 Top of bottom floor (including basement, crawlspace, or enclosure) is 			meters	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		· _ ·	-2 of Instructions), □ below the HAG.	
E3. Attached garage (top of slab) is				 r ☐ below the HAG.	
E4. Top of platform of machinery and/or equipment servicing the building is		feet	meters 🔲 above o	r ∐below the HAG.	
E5. Zone AO only: If no flood depth number is availa floodplain management ordinance?					
SECTION F - PROPERTY O	WNER (OR OWNER	S REPRESENTATIV	E) CERTIFICATION		
The property owner or owner's authorized representations community-issued BFE) or Zone AO must sign here.	ative who completes The statements in S	Sections A, B, and E a	for Zone A (without a re correct to the best	FEMA-issued or of my knowledge.	
Property Owner or Owner's Authorized Representation	ve's Name				
Address	С	ity	State	ZIP Code	
Signature	D	ate	Telephone		
Comments					
			☐ Check	here if attachments.	

FEMA Form 086-0-33 (7/15)

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corre	sponding informatio	n from Section A. \mid		FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and B 9129 ABBA LANE				Policy Number:	
City PANAMA CITY BEACH	State Florida	ZIP Code 32407		Company NAIC Number	
SECTIO	N G - COMMUNITY I	NFORMATION (OP	TIONAL)		
The local official who is authorized by law or ord Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, ent G1. The information in Section C was take engineer, or architect who is authorized data in the Comments area below.)	Certificate. Complete e er meters. en from other documer	the applicable item(s	s) and sign b	below. Check the measurement I sealed by a licensed surveyor,	
G2. A community official completed Section or Zone AO.	on 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	managemer	nt purposes.	
G4. Permit Number R B 17-0744	G5. Date Permit Issu	ued		ate Certificate of impliance/Occupancy Issued	
G7. This permit has been issued for: New Construction Substantial Impro G8. Elevation of as-built lowest floor (including basement) of the building:				meters	
G9. BFE or (in Zone AO) depth of flooding at the	ne building site:		☐ feet ☐ meters Datum		
G10. Community's design flood elevation:			feet meters Datum		
Local Official's Name () Gune Porter		Title			
Community Name	· · · · · · · · · · · · · · · · · · ·	Telephone			
Signafture		3/6/2018			
Comments (including type of equipment and loc	ашоп, рег С <i>2</i> (е), п арр	nicable)			
				☐ Check here if attachments.	