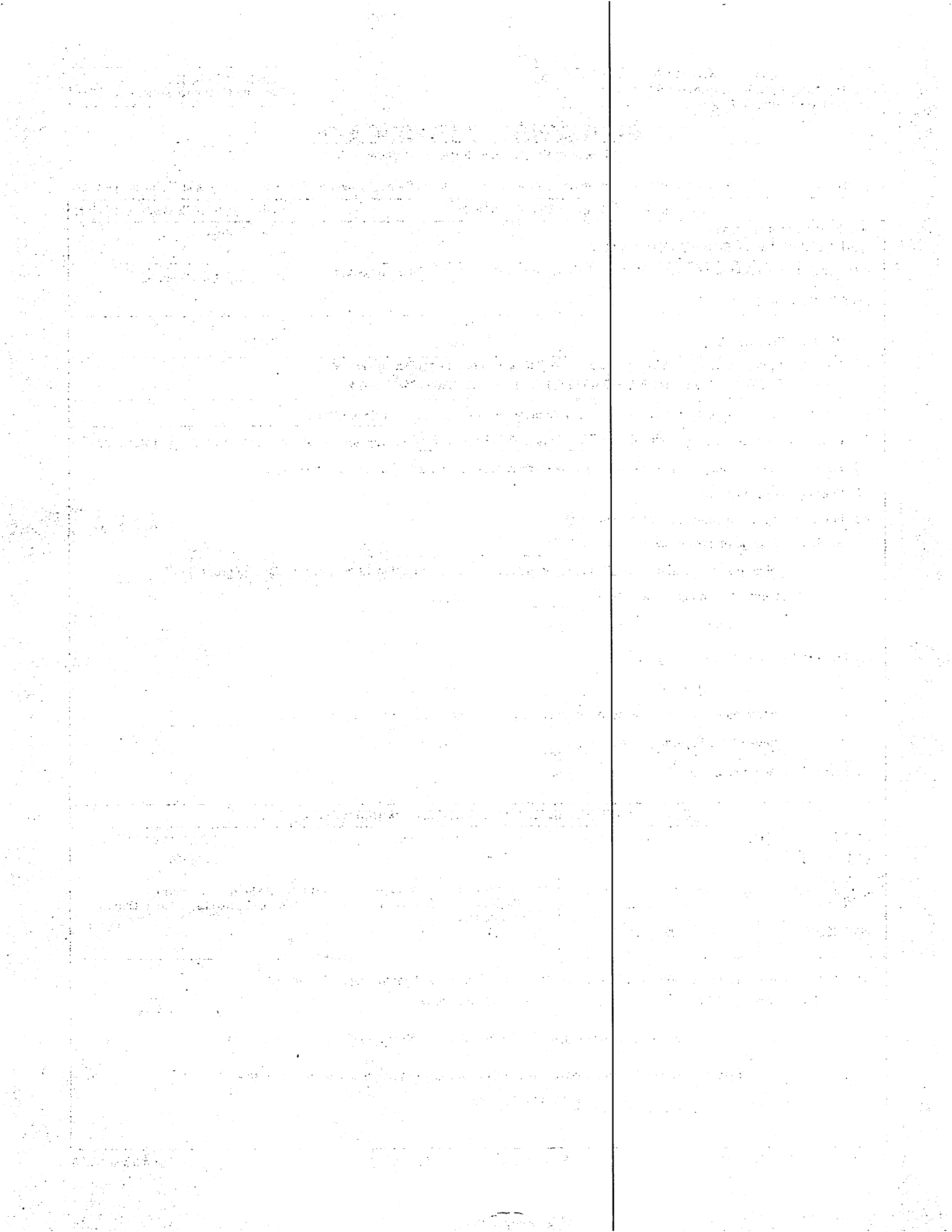


# ELEVATION CERTIFICATE

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 SOUTHERN PALM MOBILE HOME PARK LLC				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 9405 SONYA CIRCLE LOT 7				Company NAIC Number:	
City PANAMA CITY BEACH,		State Florida		ZIP Code 32407	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PORTION OF SECTION 31, T3S, R15W; PID#27571-030-014; O.R.B. 3966, PAGE 2094					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>30.1856 DEGREES</u> Long. <u>-85.7917 DEGREES</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>5</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 _____ sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____					
c) Total net area of flood openings in A9.b _____ sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number BAY COUNTY 120004			B2. County Name BAY		B3. State Florida
B4. Map/Panel Number 12005C0316	B5. Suffix H	B6. FIRM Index Date 06-02-2009	B7. FIRM Panel Effective/ Revised Date 06-02-2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 16.00'
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					



# ELEVATION CERTIFICATE

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 9405 SONYA CIRCLE LOT 7			Policy Number:
City PANAMA CITY BEACH,	State Florida	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 <i>MH 17-0018</i>	G5. Date Permit Issued <i>3-7-18</i>	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 <i>Wayne Porter</i>	Title
Community Name	Telephone
Signature <i>[Signature]</i>	Date <i>4/26/2018</i>

Comments (including type of equipment and location, per C2(e), if applicable)

*OK for C.O.  
WP*

Check here if attachments.

11/20/18

8-17-8

MM 13-0018

11/20/2018

Private Justice

WFA

OK for C.O.

WFA

# BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

## ELEVATION CERTIFICATE

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 9405 SONYA CIRCLE LOT 7			Policy Number:
City PANAMA CITY BEACH,	State Florida	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

Photo One Caption FRONT VIEW 04-24-2018

Clear Photo One



Photo Two

Photo Two Caption REAR VIEW 04-24-2018

Clear Photo Two

FEDERAL IDENTIFICATION NUMBER (SEE INSTRUCTIONS)	TAXPAYER'S NAME (SEE INSTRUCTIONS)	SALES TAXPAYER'S ADDRESS (SEE INSTRUCTIONS)
STATE IDENTIFICATION NUMBER (SEE INSTRUCTIONS)	SALES TAXPAYER'S CITY (SEE INSTRUCTIONS)	SALES TAXPAYER'S STATE (SEE INSTRUCTIONS)

If you are a partnership, you must file this return for each partner. If you are a partnership, you must file this return for each partner. If you are a partnership, you must file this return for each partner.

SALES TAXPAYER'S BUSINESS ADDRESS (SEE INSTRUCTIONS)	SALES TAXPAYER'S BUSINESS CITY (SEE INSTRUCTIONS)	SALES TAXPAYER'S BUSINESS STATE (SEE INSTRUCTIONS)
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SALES TAXPAYER'S BUSINESS ADDRESS (SEE INSTRUCTIONS)	SALES TAXPAYER'S BUSINESS CITY (SEE INSTRUCTIONS)	SALES TAXPAYER'S BUSINESS STATE (SEE INSTRUCTIONS)
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**ELEVATION CERTIFICATE**

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 9405 SONYA CIRCLE LOT 7			Policy Number:
City PANAMA CITY BEACH,	State Florida	ZIP Code 32407	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: NGS BE0764 Vertical Datum: NAVD88

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) \_\_\_\_\_ 19.65  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) \_\_\_\_\_ N/A  feet  meters
- e) Lowest elevation of machinery or equipment servicing the building  
(Describe type of equipment and location in Comments) \_\_\_\_\_ 19.69  feet  meters
- f) Lowest adjacent (finished) grade next to building (LAG) \_\_\_\_\_ 14.95  feet  meters
- g) Highest adjacent (finished) grade next to building (HAG) \_\_\_\_\_ 16.07  feet  meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support \_\_\_\_\_ N/A  feet  meters

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION**

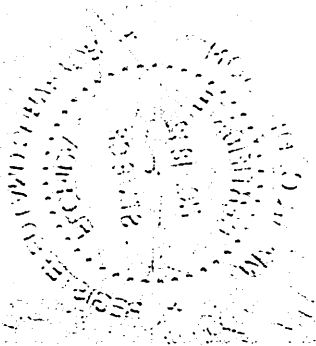
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable 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 MARK C. DRAGON		License Number FL LS NO. 4842	
Title PRESIDENT			
Company Name DRAGON LAND SURVEY, INC.			
Address 5328 CHERRY STREET			
City PARKER,	State Florida	ZIP Code 32404	
Signature 	Date 04-24-2018	Telephone (850) 763-7997	Ext.

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)  
THE EQUIPMENT LISTED IN ITEM C2e IS AN AIR CONDITIONER. THE LATITUDE AND LONGITUDE WERE TAKEN FROM THE BAY COUNTY PROPERTY APPRAISOR'S WEBSITE.





# ELEVATION CERTIFICATE

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 9405 SONYA CIRCLE LOT 7			Policy Number:
City PANAMA CITY BEACH,	State Florida	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
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Comments

Check here if attachments.

1. The first part of the document discusses the importance of maintaining accurate records of all transactions. It emphasizes that this is crucial for ensuring the integrity of the financial data and for facilitating audits.

2. The second part of the document outlines the various methods used to collect and analyze data. It includes a detailed description of the sampling techniques employed and the statistical models used to interpret the results.

3. The third part of the document presents the findings of the study. It shows that there is a significant correlation between the variables being studied, and it provides a clear explanation of the reasons behind this relationship.

4. The fourth part of the document discusses the implications of the findings. It suggests that the results have important implications for the field of study and that further research is needed to explore these findings in more detail.

5. The fifth part of the document concludes the study and provides a summary of the key points. It reiterates the importance of accurate record-keeping and the need for continued research in this area.

6. The sixth part of the document provides a detailed analysis of the data. It includes a series of tables and graphs that illustrate the trends and patterns in the data. This analysis is essential for understanding the underlying structure of the data and for identifying any anomalies or outliers.

7. The seventh part of the document discusses the limitations of the study. It acknowledges that there are several factors that could have influenced the results and that the study is not without its limitations. However, it also highlights the strengths of the study and the value of the findings.

8. The eighth part of the document provides a list of references. It includes a comprehensive list of the sources used in the study, which are essential for verifying the accuracy of the information presented in the document.

9. The ninth part of the document provides a list of appendices. These appendices contain additional information that is relevant to the study but that is not included in the main text. This information is essential for a complete understanding of the study and its findings.

10. The tenth part of the document provides a list of figures. These figures are essential for understanding the data and for identifying any trends or patterns. They are presented in a clear and concise manner, making it easy for the reader to understand the information they contain.