#### 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 ROBERT CURTI,JR.	Policy Number:										
<ul><li>A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.</li><li>5229 DEBI ROAD</li></ul>	Company NAIC Number:										
City State PANAMA CITY Florida	ZIP Code 32404										
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PARCEL I.D. NO. 05867-020-000											
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL											
	m: NAD 1927 X NAD 1983										
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insu	rance.										
A7. Building Diagram Number5											
A8. For a building with a crawlspace or enclosure(s):											
a) Square footage of crawlspace or enclosure(s) 1108.00 sq ft											
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above	e adjacent grade 0										
c) Total net area of flood openings in A8.b 0.00 sq in											
d) Engineered flood openings?											
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 0										
c) Total net area of flood openings in A9.b 0.00 sq in											
d) Engineered flood openings? ☐ Yes ☒ No											
THE RESERVE THE PART OF THE PA	ATION										
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORM	B3. State										
B1. NFIP Community Name & Community Number UNINC. BAY CO. 120004  B2. County Name BAY	Florida										
Number Date Effective/ Zone(s)	Base Flood Elevation(s) (Zone AO, use Base Flood Depth)										
12005C0356 H 06-02-2009 Revised Date 06-02-2009 A & X 49.0	00 FEET NAVD 88										
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 ☐ C	Other/Source:										
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Pro	tected Area (OPA)?  Yes  No										
Designation Date: CBRS  OPA											

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## **ELEVATION CERTIFICATE**

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE										
Building Street Address (including Apt., Unit, Suite, and/5229 DEBI ROAD	Policy Numb										
	tate Iorida	ZIP Code 32404	Company NAIC Number								
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)											
C1. Building elevations are based on: Construction Drawings* Building Under Construction*											
*A new Elevation Certificate will be required when C2. Elevations – Zones A1–A30, AE, AH, A (with BFE		355	AF AR/A1_A	30 AR/AH AR/AO							
Complete Items C2.a–h below according to the bu Benchmark Utilized: NAIL AND DISK IN P/P	uilding diagram speci	fied in Item A7. In Puert tum: <u>NAVD 88 ELEVAT</u>	o Rico only, er	nter meters.							
Indicate elevation datum used for the elevations in	items a) through h)	below.									
☐ NGVD 1929 ☒ NAVD 1988 ☐ Other  Datum used for building elevations must be the sa		the BEE									
Datum used for building elevations must be the sa	The as that used for	ine BFC.	Check the	e measurement used.							
a) Top of bottom floor (including basement, crawle	space, or enclosure	floor)	54.40 × fe								
b) Top of the next higher floor		Walliam	N/A × fe								
c) Bottom of the lowest horizontal structural mem	ber (V Zones only)		N/A × fe								
d) Attached garage (top of slab)		-	N/A × fe	eet meters							
<ul> <li>e) Lowest elevation of machinery or equipment se (Describe type of equipment and location in Co</li> </ul>	ervicing the building omments)			eet meters							
f) Lowest adjacent (finished) grade next to building	ng (LAG)		49.90 × fe	eet  meters							
g) Highest adjacent (finished) grade next to buildi	ng (HAG)		52.00 × fe	eet  meters							
<ul> <li>h) Lowest adjacent grade at lowest elevation of destructural support</li> </ul>	eck or stairs, includir	ng 	N/A ⋉ fe	eet  meters							
SECTION D - SURVEYOR	R, ENGINEER, OR	ARCHITECT CERTIF	ICATION								
This certification is to be signed and sealed by a land s I certify that the information on this Certificate represen- statement may be punishable by fine or imprisonment	its my best efforts to	interpret the data availa	law to certify ble. I understa	elevation information. and that any false							
Were latitude and longitude in Section A provided by a	licensed land survey	/or? ⊠Yes □No	Check	here if attachments.							
Certifier's Name	License Number										
HENRY C. RITCHIE, II	L.B.#5288			w hit							
Title REGISTERED LAND SURVEYOR				Place							
Company Name RITCHIE AND ASSOCIATES, INC.				Sel							
Address 949 JENKS AVENUE				Lere 3							
City	State	ZIP Code	1/20	alaglia							
PANAMA CITY	Florida	32401	N	9/03/19							
Signature Len C Males	Date 09-23-2019	Telephone (850) 914-2774	Ext.								
Copy all pages of this Elevation Certificate and all attachn	nents for (1) commun	ity official, (2) insurance a	agent/company	, and (3) building owner.							
Comments (including type of equipment and location, p BENCH MARK: 60 D NAIL AND DISK IN POWER PO ELEVATION=29.74 FT NAVD 88			AT S.E. QUA	DRANT DEBI RD.							
NOTE: ELEVATIONS ON SITE VARY FROM 46.5 IS AIR CONDITIONER PAD AT 54.22 FT NAVD 88	FT. TO 52	.3 FT. NOTE;	LOWEST MA	CHINERY ELEVATION							

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### **ELEVATION CERTIFICATE**

IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, an 5229 DEBI ROAD	d/or Bldg. No.) or P.0	D. Route and Box No.	Policy Number:
City PANAMA CITY	State Florida	ZIP Code 32404	Company NAIC Number
SECTION E – BUILDING EI FOR ZON	LEVATION INFORM IE AO AND ZONE A		REQUIRED)
For Zones AO and A (without BFE), complete Items E complete Sections A, B,and C. For Items E1–E4, use enter meters.	1–E5. If the Certificat natural grade, if avail	e is intended to support a able. Check the measure	LOMA or LOMR-F request, ment used. In Puerto Rico only,
E1. Provide elevation information for the following and the highest adjacent grade (HAG) and the lowest a) Top of bottom floor (including basement,	d check the appropria adjacent grade (LAG	ite boxes to show whethe	r the elevation is above or below
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet _ meter	
crawlspace, or enclosure) is  E2. For Building Diagrams 6–9 with permanent flood	anoninga providad in	feet meter	
the next higher floor (elevation C2.b in the diagrams) of the building is	openings provided in		
E3. Attached garage (top of slab) is		feet  meter	rs above or below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is			rs above or below the HAG.
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	ole, is the top of the b	ottom floor elevated in ac . The local official must (	cordance with the community's certify this information in Section G.
SECTION F - PROPERTY OW	NER (OR OWNER'S	REPRESENTATIVE) CE	ERTIFICATION
The property owner or owner's authorized representat community-issued BFE) or Zone AO must sign here. T	ive who completes So The statements in Sec	ections A, B, and E for Zoctions A, B, and E are cor	one A (without a FEMA-issued or rect to the best of my knowledge.
Property Owner or Owner's Authorized Representative	e's Name		
Address	City	St	ate ZIP Code
Signature	Date	e Te	lephone
Comments			
			•
·			
			Check here if attachments.

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### **ELEVATION CERTIFICATE**

IMPORTANT: In these spaces, copy the cor	FOR INSURANCE COMPANY USE										
Building Street Address (including Apt., Unit, S 5229 DEBI ROAD	Policy Number:										
City PANAMA CITY	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 comr	nunity floodplain managen	nent purposes.								
G4. Permit Number	G5. Date Permit Issued	G6.	Date Certificate of Compliance/Occupancy Issued								
MH19-00448	8-13-19		,								
G7. This permit has been issued for:	New Construction S	ubstantial Improvement									
G8. Elevation of as-built lowest floor (including of the building:	ng basement)	fee	t  meters Datum								
G9. BFE or (in Zone AO) depth of flooding a	t the building site:	fee	t meters Datum								
G10. Community's design flood elevation:	8	fee	t meters Datum								
Local Official's Name	7	litle little									
Community Name	1	Γelephone									
Signature		Date									
C. L. Frank and L.	postion per C2(a) if applic	ahle)									
Comments (including type of equipment and I	ocation, per C2(e), il applic	abic)									
OK to	final. 8. 9-2	6-19									
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			Check here if attachments.								

#### **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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

**ELEVATION CERTIFICATE** FOR INSURANCE COMPANY USE IMPORTANT: In these spaces, copy the corresponding information from Section A. Policy Number: Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

32404

5229 DEBI ROAD State ZIP Code Company NAIC Number City

Florida

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the





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

PANAMA CITY

Replaces all previous editions.

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### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

Continuation Page

IMPORTANT: In these spaces, copy the corresp	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite 5229 DEBI ROAD	Policy Number:			
City PANAMA CITY	State Florida	ZIP Code 32404	Company NAIC Number	
If submitting more photographs than will fit on t with: date taken; "Front View" and "Rear Vie photographs must show the foundation with repre	w": and, if required	d. "Right Side View" and "	Left Side View." When applicable,	
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