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 INF		FOR INSURANCE COMPANY USE		
A1. Building Owner's Name		Policy Numb	per:	
Bay County Board of County Commissioners				
 A2. Building Street Address (including Apt., Unit, Suite, ar Box No. 5700 Star Lane 	nd/or Bldg. No.) or	P.O. Route and	Company N	AIC Number:
City	State		ZIP Code	
Panama City	Florida		32404	
A3. Property Description (Lot and Block Numbers, Tax Par Tax Parcel Numbers 05908-000-000 and 05906-060-000		al Description, etc	2.)	
A4. Building Use (e.g., Residential, Non-Residential, Addi	ition, Accessory, e	tc.) Non-Resid	ental	
A5. Latitude/Longitude: Lat. 30°13'34" N Lon	ng. 85°33'43"W	Horizontal	Datum: NAD 1	927 NAD 1983
A6. Attach at least 2 photographs of the building if the Ce	rtificate is being u		_	
A7. Building Diagram Number 1A				
A8. For a building with a crawlspace or enclosure(s):				
a) Square footage of crawlspace or enclosure(s)		N/A sq ft		
		·	-h	
b) Number of permanent flood openings in the crawls		(s) Within 1.0 foot	above adjacent gra	ade N/A
c) Total net area of flood openings in A8.b	N/A sq in			
d) Engineered flood openings?				
A9. For a building with an attached garage:				
a) Square footage of attached garage	N/A sq ft			
b) Number of permanent flood openings in the attache	ed garage within 1	.0 foot above adja	cent grade N/A	
c) Total net area of flood openings in A9.b	N/A sq	in		
d) Engineered flood openings?				
e, engineere acces aparinings.				
SECTION B - FLOOD INSU	JRANCE RATE	MAP (FIRM) INF	ORMATION	
B1. NFIP Community Name & Community Number	B2. County I			B3. State
Bay County 120004	Bay			Florida
	FIRM Panel Effective/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
12005C0356H H 06-02-2009 06-	Revised Date 02-2009	X, A	55.0	
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 [☑ NAVÞ 1988	Other/Source:	
R12 Is the building located in a Coastal Barrier Resource	s System (CRPS)	area or Othonwice	- Brotostod Assa (C	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Designation Date:			Firsted Area (C	vr∧jr ∐ tes ⊠ No
CBH	RS OPA			

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/o 5700 Star Lane			Policy Number:			
	ate ZIP Cod orida 32404	е	Company NAIC Number			
SECTION C – BUILDING E	LEVATION INFORMATION	I (SURVEY RI	EQUIRED)			
*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 bu Benchmark Utilized: R 88 BE0661 (USGS) Indicate elevation datum used for the elevations in NGVD 1929 × NAVD 1988 Other	construction of the building is not be provided by the construction of the building is not be provided by the construction of the building is not be provided by the construction of the building is not be provided by the building is not be provided by the building is not be provided by the building is not building is	AR, AR/A, AR/ em A7. In Puert	/AE, AR/A1–A30, AR/AH, AR/AO.			
Datum used for building elevations must be the sai	me as that used for the BFE.		Check the measurement used.			
 a) Top of bottom floor (including basement, crawls 	space, or enclosure floor) _		58.6 X feet meters			
b) Top of the next higher floor	_	_	67.3 \boxtimes feet \square meters			
c) Bottom of the lowest horizontal structural memb	per (V Zones only)		N/A feet meters			
d) Attached garage (top of slab)		11	N/A feet meters			
e) Lowest elevation of machinery or equipment se (Describe type of equipment and location in Co	ervicing the building mments) —		57.5 X feet meters			
f) Lowest adjacent (finished) grade next to building	g (LAG)		57.1 X feet meters			
g) Highest adjacent (finished) grade next to building	ng (HAG)		58.6 X feet meters			
 h) Lowest adjacent grade at lowest elevation of de structural support 	eck or stairs, including —		N/A feet meters			
SECTION D – SURVEYOR	R, ENGINEER, OR ARCHI	ECT CERTIF	ICATION			
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 Robert E. Zierden	License Number FL# 4966		, maketi .			
Title County Surveyor			THE EX			
Company Name Bay County Public Works		_ Seal = 5				
Address 840 West 11th Street			Here			
City	Ctoto	20-1-				
Panama City		Code 401	The second of th			
Signature Holet & Zial		lephone 50) 248-8301	Ext.			
Copy all pages of this Elevation Certificate and all attachm	ents for (1) community official	, (2) insurance a	agent/company, and (3) building owner.			
Comments (including type of equipment and location, per Latitude/Longitude was derived utilizing Bay County GIS C2(e) the lowest adjacent machinery or equipment is an located at the west side of the building. The building consists of a one and two story precast materials building. The elevation of the floor of the main building is box C2(a) see photos	S Division's ESRI software. It electric generator situated of asonry structure with a new	n a concrete sl	lab, not attached to the building,			

and the second of the second o and the second of the second o e ig krádicznych enw zwięka zew Partificiany w isto-ekinyt dai skily v jel grów kolosowani kolo Jegopatyjnykia y Noberni II. zwact nnoedny pomienia pomienia noe elimnosi, and i gwy i i skily in in the Confedence of the Confedence of the saterian 🐔 mossife et si kalama ustjorati egit mossimo. Et et e et si សាស្រាស់ ខេត្ត មានស្រាស់ ១១៥ ang ang kalamatan kalamatan ng kalamatan kalamatan kalamatan kalamatan kalamatan kalamatan kalamatan kalamatan e personal angles et la selle aprenta aplica e i di la di la ellega presensió i la 建燃烧的复数形式 医外部 化二烷基 gan kali kuju dine kasi sandan nine ji dasebaga kila kila kandi. Kabaka Arii kila ali badi dase jina ali dina kuli kila ali ali kuli kandi. Maria Colonia de la martina de o je pod pod oberski progradnika se kolonica. reservation to the first term of the contract BARLEY FRANCISCO DE DE PARAMENTA APARTO DE PARAMENTO ้นไท้เก็บข้อง (การเก็บวันเหมือนที่ ซึ่งได้เมื่อง ได้เก็บจะที่สุดใน ครั้งได้ เรียบ เพราะสัมคับสามารถใช้สายสมาร ที่ 9 สัมคับ (การสมารณ (การสมารณ (การสมารณ) เมื่อวันที่ ผู้ใน แก้งเล่น (การสมารณ) และ (การสมารณ) เรียบการสมารณ (การสมารณ)



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ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corresponding	g information from Sec	tion A		FOR INSURAN	CE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/o 5700 Star Lane	r Bldg. No.) or P.O. Rou	ite and	Box No.	Policy Number:		
City Sta	ate ZIP	Code		Company NAIC	Number	
Panama City Flo	orida 324	04				
SECTION E – BUILDING ELE FOR ZONE	VATION INFORMATION AO AND ZONE A (WIT	N (SU THOUT	RVEY NOT FBFE)	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). a) Top of bottom floor (including basement, 						
crawlspace, or enclosure) is		☐ fe	et mete	rs above or	below the HAG.	
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		☐ fe	et mete	rs above or	below the LAG.	
FO F Building Bi C Ouith		- A 14	0	-0/1	O of Instructions)	
E2. For Building Diagrams 6–9 with permanent flood oper the next higher floor (elevation C2.b in the diagrams) of the building is	enings provided in Secu		et mete	_	below the HAG.	
E3. Attached garage (top of slab) is E4. Top of platform of machinery and/or equipment		те	et mete	rs above or	below the HAG.	
servicing the building is		☐ fe	et 🗌 mete	rs above or	below the HAG.	
E5. Zone AO only: If no flood depth number is available, floodplain management ordinance? Yes	is the top of the bottom No Unknown. The					
SECTION F - PROPERTY OWNE	R (OR OWNER'S REP	RESE	NTATIVE) 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's Name						
Address	City		S	tate	ZIP Code	
Signature	Date		Te	elephone		
Comments						
				Check h	ere if attachments.	

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corre	esponding information fr	om Section A	A.	FOR INSURANCE	E COMPANY USE
Building Street Address (including Apt., Unit, St. 5700 Star Lane	uite, and/or Bldg. No.) or P	.O. Route and	Box No.	Policy Number:	
City Panama City	State Florida	ZIP Code 32404		Company NAIC N	lumber
SECTIO	N G - COMMUNITY INFO	ORMATION (OPTIONAL)		
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can com Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurem used in Items G8–G10. In Puerto Rico only, enter meters.					e can complete measurement
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 Secti or Zone AO.	on E for a building located	in Zone A (w	ithout a FEMA	A-issued or commu	nity-issued BFE)
G3. The following information (Items G4–	G10) is provided for comm	nunity floodpla	in manageme	ent purposes.	
G4. Permit Number	G5. Date Permit Issued			Date Certificate of compliance/Occupa	ancy Issued
G7. This permit has been issued for:	New Construction Su	ıbstantial Impi	rovement		
G8. Elevation of as-built lowest floor (including of the building:	basement)		_ feet	meters Datu	m
G9. BFE or (in Zone AO) depth of flooding at t	he building site:		_ feet	meters Datu	m
G10. Community's design flood elevation:	-		_ feet	meters Datu	m
Local Official's Name	Ti	tle			
Community Name	Te	elephone			
Signature	D	ate			
Comments (including type of equipment and loc	ation, per C2(e), if applica	ble)			
				- Sept. 104.10	
				Check her	re if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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

IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including 5700 Star Lane	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Panama City	Florida	32404	

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 (EAST ELEVATION) 3/6/2019

Clear Photo One



Photo Tw

Photo Two Caption REAR VIEW 03/06/2019

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

MPORTANT: In these spaces, copy the corresp	onding information	from Section	Α.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite 5700 Star Lane	, and/or Bldg. No.) or	P.O. Route and	d Box No.	Policy Number:
City Panama City	State Florida	ZIP Code 32404		Company NAIC Number
If submitting more photographs than will fit on the with: date taken; "Front View" and "Rear View photographs must show the foundation with representation.	w": and, if required	. "Right Side '	View" and "L	eft Side View." When applicable.
	Photo T	hree		
Photo Three Queri	Photo The	ree		
Photo Three Caption				Clear Photo Three
	Photo F	our		
Dhata Farr Canting	Photo For	ır		
Photo Four Caption				Clear Photo Four