# U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

#### National Flood Insurance Program **ELEVATION CERTIFICATE**

ELEVATION CERTIFICATE

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 8-15

OMB Control Number: 1660-0008

Expiration: 11/30/2018

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

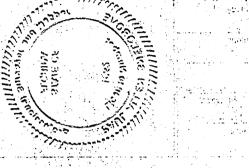
SECTION A - PROPERTY INFORMATION FOR INSURANCE COMPANY USE				
A1. Building Owner's Name				
James D. Piller	Policy Number:			
Tames Dr Dilley  A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Company NAIC			
6711 Davis Road	Number:			
City Panama C/+y  A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.	orida Zip Code 32404			
	)			
Tax Parcel Number 05470-030-000				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential	ential			
A5. Latitude/Longitude: Lat. <u>36° /6′ 47, 02′</u> ルLong. <u>85°32′23,7</u> ) <sup>H</sup> orizontal Datum:				
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood	insurance.			
A7. Building Diagram Number				
A8. For a building with a crawlspace or enclosure(s):  A9. For a building	ng with an attached garage:			
a) Square footage of crawispace or enclosure(s) N/A sq ft a) Square footage	ge of attached garage			
1	ermanent flood openings ad garage within 1.0 foot nt grade			
<b>'</b>	a of flood openings in A9.b N/A sq in			
d) Engineered flood openings? CYes X No d) Engineered fi				
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INI	· •			
B1. NFIP Community Name & Community Number   B2. County Name	B3. State			
Bay County 12004 Bay Cour B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ B8.	ity FL			
B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ B8. Revised Date	Flood Zone(s) B9. Base Flood Elevation(s) (Zone AO, use base flood			
12005C0243 H June 2,2009 June 2,2009	A depth 42.0feet			
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: ONGVD 1929 X NAVD 1988 O	ther/Source:			
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise (	Protected Area (OPA)? C Yes & No			
Designation Date: CBRS OPA				
SECTION C - BUILDING ELEVATION INFORMATION (SURV	EY REQUIRED)			
C1. Building elevations are based on: C Construction Drawings* C Building Under Const	ruction* 🎖 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				
Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  Florida Department of Transportation				
Benchmark Utilized: Benchmark 46-03-A02G Vertical Datum: Elevation 33.87 feet NAVD 1988				
Indicate elevation datum used for the elevations in items a) through h) below. C NGVD 1929 X NAVD 1988				
C 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)				
b) Top of the next higher floor  N/A .				
c) Bottom of the lowest horizontal structural member (V Zones only)				
d) Attached garage (top of slab)  N/A  .	C feet C meters			
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)  43.				
f) Lowest adjacent (finished) grade next to building (LAG)	✓ feet C meters			
g) Highest adjacent (finished) grade next to building (HAG) $43$ .	_6 K feet C meters			
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	7 Speet Cometers			

13.2. A.S. The Thirty was back to prove you to be food to come and the second The complete strain and a major of the strain of the strain of the strain of la pring proprio i la calendario naviga e en man application of a transport of may be in The Contact of the Property of Authority and the control of th rosef fram the first and and selfmany promise and a maker in the contract of the case of the and the first of the second of ament to see the first telescope the The second secon कर अवस्ति के के हैं। इस कार्य का कार्य में इस के अब हुन अपना हा औ Ben de la facilità de l'Esta de l'Esta de la companya de la companya de la companya de la companya de la compa and the state of t ta en como a como para en esperante de la esta en en especial de la especial de l केर अधिर साम्प्रकीर देखे देखे हैं। Same Comment The same is the same of the same of the same of the applied a control of the first of the first of the forest of the first artificity (mill) del el sup de la use ya trijak ji denazakan ka wakata ta But a market make the market of the trail The second of the back and the second of to make the The later of the state of the s refer to er en regent han eller gerende han beter an and and a second 

# **ELEVATION CERTIFICATE**, page 2

OMB Control Number: 1660-0008 Expiration: 11/30/2018

	IMPORTANT: In these spaces, copy the corresponding information from Section A.			
Building Street Address (including Apt., Unit, S				
6711 Davis Roa	Policy Number:			
City Panama City		Zip Code	Company NAIC Number:	
	SURVEYOR, ENGINEER, O			
This certification is to be signed and sealed by				
that the information on this Certificate represent				
punishable by fine or imprisonment under 18 U.	S. Code, Section 1001.	Γ		
Check here if attachments.	Were latitude and longitude provided by a licensed lan		STATE TO THE TOTAL	
Certifier's Name	Yes ONo	Number		
		11	E 3/2	
Paul A, Snelgrove	Company Name	152		
C Para laut	Paragraphic street	' 544	이 한 지 원 기타에 존경 기울을 기	
Address	Snelgrove Survey	ate   Zip Code	영병 지역 연극기	
4325A Layfayette Street	1	-L 32446		
Signature	7.7. 7.0 (1.0.0)	lephone		
Parla Selv	4-16-2019 85			
Copy all pages of this Elevation Certificate for (	1) community official, (2) inse	urance agent/company,	and (3) building owner.	
Comments (including type of equipment and loc	cation, per C2(e), if applicable	e)		
The equipment refe conditioner unit loc	erred to in s	section CZ	(e) is an air	
conditioner unit lac	sted in the	hackof	the building.	
Loridi I Torice. Sept. 1 702			9	
Signature			Date	
SECTION E - BUILDING ELEVATION INF	ORMATION (SURVEY NOT	REQUIRED) FOR ZOI	NE AO AND ZONE A (WITHOUT BFE)	
For Zones AO and A (without BFE), complete It Sections A. B. and C. For Items E1-E4, use nat	ems 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 nat	ural grade, if available. Chec ng and check the appropriate	k the measurement use	d. In Puerto Rico only, enter meters.	
Sections A, B, and C. For Items E1-E4, use nat E1. Provide elevation information for the following	ural grade, if available. Chec ng and check the appropriate st adjacent grade (LAG).	k the measurement use	d. In Puerto Rico only, enter meters. r the elevation is above or below the	
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## **ELEVATION CERTIFICATE**, page 3

OMB Control Number: 1660-0008 Expiration: 11/30/2018

IMPORTANT: In these spaces, copy the corre	seponding information from Se	ction A	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Su	TOK INGOKANGE GOMEANT GGE				
	Policy Number:				
City Carls Road	State Zip Coo Florida 324	de	Company NAIC		
Panama City	Florida 324 ON G - COMMUNITY INFORMA	04	Number:		
Sections A, B, C (or E), and G of this Elevation C	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-G1	0) is provided for community floo	dplain managemen	nt purposes.		
G4. Permit Number  MH19-00135	G5. Date Permit Issued	G6. Date Certifica	ate of Compliance/Occupancy Issued		
G7. This permit has been issued for: New Co	onstruction C Substantial Impro	ovement			
G8. Elevation of as-built lowest floor (including both of the building:	easement)	C feet C meters	s Datum		
G9. BFE or (in Zone AO) depth of flooding at the building site:	·	C feet C meters	s Datum		
G10. Community's design flood elevation:		C feet C meters	s Datum		
Local Official's Name	Title				
Community Name	Telephone	3			
Signature 6	Date	1/17/201	9		
Comments (including type of equipment and local	ation, per C2(e), if applicable)	1111			
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#### **BUILDING PHOTOGRAPHS**

# **ELEVATION CERTIFICATE**, page 4

See instructions for Item A6.

OMB Control Number: 1660-0008 Expiration: 11/30/2018

IMPORTANT: In these spaces, copy the corresponding informa	FOR INSURANCE COMPANY USE Policy Number:	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.		
City State Panama City Florida	Zip Code 324-04-	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 BACK



Photo Two

Photo Two Caption FRONT

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#### **BUILDING PHOTOGRAPHS**

## **ELEVATION CERTIFICATE**, page 5

Continuation Page

OMB Control Number: 1660-0008 Expiration: 11/30/2018

IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and	Policy Number:		
City Panama City	State Florida	Zip Code 32404	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 Three

### Photo Three Caption SIDE AND FRONT



Photo Four

Photo Four Caption SIDE