U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008

Expiration Date: November 30, 2022

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 INSU	RANCE COMPANY USE		
A1. Building Ow DELORES P. K		Inclement 1 south	gardet	II bes	e de manger et	Policy Num	ber:	
A2. Building Str Box No. 1045 BAY CIRC		ncluding Apt., Unit, Su		L. V 1077		d Company N	NAIC Number:	
City PANAMA C						Desputation personal and a second a second and a second and a second and a second and a second a		
A3. Property De TAX PARCEL N		and Block Numbers, T 4-191-000			egal Description,	Market Control of Said of the	er-dvovi olimnotoga nellid	
A4. Building Use	e (e.g., Reside	ntial, Non-Residential	, Additio	n, Accessory,	etc.) RESIDEN	ΠAL	Mt. mar a Mari Bra A. a M	
A5. Latitude/Lor	gitude: Lat. 3	80°12'01.9"N	Long.	35°44'51.3"W	Horizon	tal Datum: NAD	1927 × NAD 1983	
A7. Building Dia A8. For a building	gram Number g with a crawl	space or enclosure(s)	:					
a) Square fo	ootage of craw	Ispace or enclosure(s			N/A sq ft			
		ood openings in the c			vos à Passario	NEW STATE HOW TOTALLY	The second second	
c) Total net	area of flood o	penings in A8.b		N/A sqi	n ia saap la culti-			
d) Engineer	ed flood openi	ngs? ☐ Yes ☒	No					
A9. For a building	g with an attac	hed garage:						
a) Square fo	otage of attac	ned garage	1.000	N/A sq1	First Short was			
b) Number o	of permanent fl	ood openings in the a	ttached (garage within				
c) Total net	area of flood o	penings in A9.b		N/A so	a in		made tato da	
12,711	d) Engineered flood openings? Yes No							
2 2 2		.ge	10					
	SI	ECTION B - FLOOD	INSURA	ANCE RATE	MAP (FIRM) IN	FORMATION	and the same of th	
		Community Number	41	B2. County	Name	100	B3. State	
BAY COUNTY U	NINCORPORA	ATED AREA 120004		BAY .			Florida	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Eff	RM Panel fective/ evised Date	B8. Flood Zone(s)	(Zone AO, us	. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)	
12005C0328	H	06-02-2009	06-02-	2009	AE	8.0		
		Base Flood Elevation Community Deter	marile vi	ner hand of the st		ed in Item B9:	i Radicio semplific vice	
B11. Indicate ele	vation datum i	used for BFE in Item E	39: 🔲 N	IGVD 1929	NAVD 1988	Other/Source:	NAVD 1988	
B12. Is the buildi	ng located in a	a Coastal Barrier Reso	ources S	ystem (CBRS	6) area or Otherw	ise Protected Area (DPA)? ☐ Yes ☒ No	
Designation	Date:		CBRS	☐ OPA				

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MPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, St 1045 BAY CIRCLE	Policy Number:		
City PANAMA CITY BEACH	State ZIP C Florida 3240		Company NAIC Number
SECTION C - BUI	LDING ELEVATION INFORMATI	ON (SURVEY RE	QUIRED)
C1. Building elevations are based on: *A new Elevation Certificate will be required.	• •	ing Under Constru g is complete.	ction* X Finished Construction
C2. Elevations – Zones A1–A30, AE, AH, A (Complete Items C2.a–h below according	(with BFE), VE, V1–V30, V (with BF of to the building diagram specified in	E), AR, AR/A, AR/ Item A7. In Puert	AE, AR/A1-A30, AR/AH, AR/AO. o Rico only, enter meters.
Benchmark Utilized: D-183	Vertical Datum:		
Indicate elevation datum used for the ele	vations in items a) through h) below	<i>1</i> .	
☐ NGVD 1929 ☑ NAVD 1988 Datum used for building elevations must		FE.	Check the measurement used.
a) Top of bottom floor (including baseme	ent, crawlspace, or enclosure floor)		10.50 X feet meters
b) Top of the next higher floor			N/A feet meters
c) Bottom of the lowest horizontal struct	ural member (V Zones only)		N/A feet meters
d) Attached garage (top of slab)	,		N/A feet meters
e) Lowest elevation of machinery or equ (Describe type of equipment and loca	uipment servicing the building ation in Comments)		10.2 X feet meters
f) Lowest adjacent (finished) grade nex	t to building (LAG)		6.10 X feet meters
g) Highest adjacent (finished) grade nex	• • •		6.7 X feet meters
h) Lowest adjacent grade at lowest elev structural support	-, .		N/A feet meters
SECTION D - SU	URVEYOR, ENGINEER, OR ARC	HITECT CERTIF	ICATION
This certification is to be signed and sealed be a certify that the information on this Certificate statement may be punishable by fine or improved.	e represents my best efforts to inten	pret the data availa	y law to certify elevation information. able. I understand that any false
Were latitude and longitude in Section A prov		⊠Yes □No	Check here if attachments.
Certifier's Name ROGER BLAIN ANGLIN	License Number 5521		
Title LAND SURVEYOR			
Company Name ANGLIN SURVEYING, LLC			II N N
Address 3712 CORNELIA LANE		:	03/3/2020
City PANAMA CITY	State Florida	ZIP Code 32409	03/17
Signature	Date 03-13-2020	Telephone (850) 271-4055	Ext. (\ N/A
Copy all pages of this Elevation Certificate and	i all attachments for (1) community of	ficial, (2) insurance	agent/company, and (3) building owner
Comments (including type of equipment and EQUIPMENT SERVICING BUILDING IS AN		IT ON RIGHT SID	E OF BUILDING.

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

INTO DE LA LE				-	
IMPORTANT: In these spaces, copy th		FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., 1045 BAY CIRCLE	Unit, Suite, and/or Bldg. No.)	or P.O. Route and B	ox No.	Policy Number:	Habita See Added Bucklic Ciricus
City readment shapt yangunud	State	ZIP Code		Company NAIC	Number
PANAMA CITY BEACH	Florida	32407			
SECTION E -	BUILDING ELEVATION IN FOR ZONE AO AND ZO			REQUIRED)	
For Zones AO and A (without BFE), con complete Sections A, B,and C. For Item enter meters.	nplete Items E1–E5. If the Ce ns E1–E4, use natural grade, i	ertificate is intended to	support a e measuren	LOMA or LOMF nent used. In Pu	R-F request, uerto Rico only,
E1. Provide elevation information for the the highest adjacent grade (HAG) a a) Top of bottom floor (including ba	and the lowest adjacent grade	propriate boxes to sho e (LAG).	ow whether	the elevation is	above or below
crawlspace, or enclosure) is	AMEDICAL TOTAL	feet	meters	above or	below the HAG.
 Top of bottom floor (including bacrawlspace, or enclosure) is 		feet	meters	above or	below the LAG.
E2. For Building Diagrams 6–9 with per the next higher floor (elevation C2.b.	rmanent flood openings provid 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 servicing the building is	r equipment	feet	meters	above or	below the HAG.
E5. Zone AO only: If no flood depth nun					
floodplain management ordinance?	last [1]	known. The local offi		and the second	ation in Section G.
SECTION F - PR	ROPERTY OWNER (OR OWN	NER'S REPRESENTA	ATIVE) CEI	RTIFICATION	
The property owner or owner's authorize community-issued BFE) or Zone AO must property Owner or Owner's Authorized F	ist sign here. The statements	in Sections A, B, and	E are corre	e A (without a Fect to the best o	-EMA-issued or f my knowledge.
	,			7.6	YEAR MENEYS
Address		City	Stat	e // 0	ZIP Code
0: 1	· storius i	•	•	•	· considerative minute.
Signature		Date	Tele	phone	
0	- Pari				1 multipe
Comments	2/11/2020				
					3. 1
	-				

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

MPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, S 1045 BAY CIRCLE	x No. Policy Number:				
City PANAMA CITY BEACH	State Florida	ZIP Code 32407	Company NAIC Number		
SECTION	ON G - COMMUNITY	INFORMATION (OPT	IONAL)		
The local official who is authorized by law or of Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, er G1. The information in Section C was takengineer, or architect who is authorized data in the Comments area below.)	n Certificate. Completenter meters. ken from other docume	the applicable item(s) entation that has been	plain management ordinance can complete and sign below. Check the measurement signed and sealed by a licensed surveyor, ndicate the source and date of the elevation		
G2. A community official completed Sector Zone AO.			ut a FEMA-issued or community-issued BFE)		
G3. The following information (Items G4	–G10) is provided for o	community floodplain n	nanagement purposes.		
G4. Permit Number G5. Date Permit Issued 6/18/2019			G6. Date Certificate of Compliance/Occupancy Issued		
Dar on the AT - LEE LE			organización (MC)		
G7. This permit has been issued for:G8. Elevation of as-built lowest floor (including of the building:	New Construction [ng basement)	Substantial Improve	ement ☐ feet ☐ meters Datum		
G9. BFE or (in Zone AO) depth of flooding at the building site: G10. Community's design flood elevation:			feet meters Datum		
Local Official's Name		Title			
Community Name		Telephone			
Signature		Date 3/13/202	e appare		
Comments (including type of equipment and lo	ocation, per C2(e), if a		- -		
OK for CO.					
			☐ Check here if attachment		
1 Aller X as had a suit			☐ Check here if attachment		

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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Building Street Address (including Apt., 1045 BAY CIRCLE	Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
City 136 314 Class was work?	State	ZIP Code	Company NAIC Number
PANAMA CITY BEACH	Florida	32407	HOWEL STEELERCH

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.

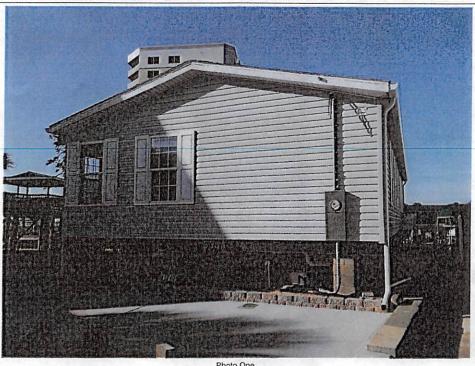


Photo One

Photo One Caption FRONT VIEW

03/09/2020

Clear Photo One



Photo Two

Photo Two Caption **REAR VIEW**

03/09/2020

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

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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. Policy Number: 1045 BAY CIRCLE ZIP Code City State Company NAIC Number 32407 Florida PANAMA CITY BEACH

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.

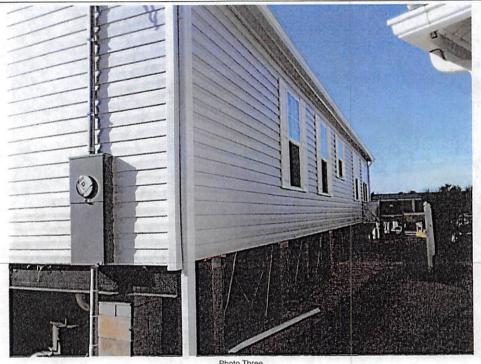


Photo Three

Photo Three Caption RIGHT SIDE VIEW

03/09/2020

Clear Photo Three

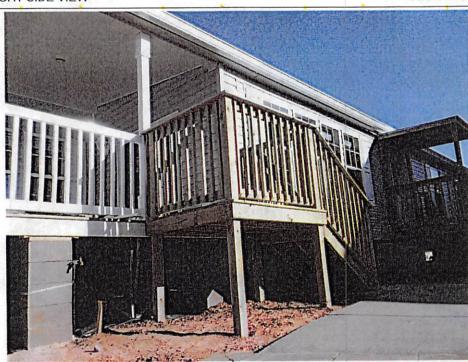


Photo Four

Photo Four Caption LEFT SIDE VIEW

03/09/2020

Clear Photo Four

FEMA Form 086-0-33 (12/19)

Replaces all previous editions.

Form Page 6 of 6