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 INSUF	RANCE COMPANY USE	
A1. Building Owner's Name KOEHNEMANN CONSTRUCTION COMPANY FOR BRIAN & FIONA ROBERTO, Policy Number:						ber:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7507 LOON'S CALL LANE Company NAIC Number:						AIC Number:		
City State PANAMA CITY BEACH Florida						ZIP Code 32413		
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 187 RIVERCAMPS ON CROOKED CREEK UNIT 2, TAX PARCEL NUMBER 32611-690-000							
A4. Building Use (A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL							
A5. Latitude/Longit	A5. Latitude/Longitude: Lat. 30°17′19.2" N Long. 85°49′04.5" W Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983							927 🗵 NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being ι	sed to	obtain flood ir	surance.	
A7. Building Diagra	am Number	6						
A8. For a building v	with a crawls	pace or enclosure(s):						
a) Square foot	age of crawl	space or enclosure(s)			790.00	sq ft		
b) Number of p	ermanent flo	ood openings in the cr	awispac	e or enclosure	e(s) with	hin 1.0 foot ab	ove adjacent gra	ade <u>0</u>
c) Total net are	ea of flood o	penings in A8.b		0.00 sq in	ı			
d) Engineered	flood openir	ngs? 🗌 Yes 🗵 N	lo					
A9. For a building w	A9. For a building with an attached garage:							
a) Square footage of attached garage 00.00 sq ft								
b) Number of p	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0							
c) Total net are	c) Total net area of flood openings in A9.b 0.00 sq in							
d) Engineered flood openings? ☐ Yes ☒ No								
	SE	CTION B - FLOOD I	NSURA	NCE RATE	MAP (I	FIRM) INFOR	RMATION	
	B1. NFIP Community Name & Community Number BAY COUNTY 120004 B2. County Name BAY B3. State Florida							
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/	B8. FI Zone(9. Base Flood E (Zone AO, us	levation(s) e Base Flood Depth)
12005C0190 H 06-02-2009 06-02-2009 AE 9.0'								
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 NAVD 1988 Other/Source:								
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🔲 Yes 🗵 No								
Designation D	Designation Date: CBRS DPA							

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IMPORTANT: In these spaces, copy the corresponding inform	FOR INSURAN	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. I 7507 LOON'S CALL LANE	Policy Number:					
City State	ZIP Co		Company NAIC	Number		
PANAMA CITY BEACH Florida	32413					
SECTION C – BUILDING ELEVATI	ON INFORMATION	ON (SURVEY RE	EQUIRED)			
C1. Building elevations are based on: Construction Draw *A new Elevation Certificate will be required when construction.	_	_	ıction* 🗵 Fini	ished Construction		
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: USCG&GS L-175 Vertical Datum: 88						
Indicate elevation datum used for the elevations in items a)	CONTRACTOR OF THE CONTRACTOR O			n		
□ NGVD 1929 ☒ NAVD 1988 □ Other/Source:						
Datum used for building elevations must be the same as th		E				
				neasurement used.		
 a) Top of bottom floor (including basement, crawlspace, or 	r enclosure floor)		9.12 × feet	t meters		
b) Top of the next higher floor	-		19.62 × feet	t meters		
c) Bottom of the lowest horizontal structural member (V Zo	ones only)		N/A [] feet	t meters		
d) Attached garage (top of slab)	-		N/A [] feet	t meters		
 e) Lowest elevation of machinery or equipment servicing t (Describe type of equipment and location in Comments) 	he building) -		11.40 × feet	t meters		
f) Lowest adjacent (finished) grade next to building (LAG)			8.10 × feet	t meters		
g) Highest adjacent (finished) grade next to building (HAG	5)		9.00 ⊠ feet	t meters		
h) Lowest adjacent grade at lowest elevation of deck or st						
structural support	ano, molaamg		7.90 × feet	t meters		
SECTION D – SURVEYOR, ENGI	NEER, OR ARCH	IITECT CERTIFI	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		⊠Yes □ No		ere if attachments.		
Certifier's Name Licer ZANNIE THOMAS WHITE, JR 6041	nse Number 1					
Title PRESIDENT			-	Mace		
Company Name Z'S LAND SURVEYING & MAPPING, INC			Ju	s thulk		
Address PO BOX 396/ 2281 SEAY ROAD				5420		
City State COTTONDALE Flori		ZIP Code 32431				
Signature Date 05-0		Telephone (850) 579-2315	Ext.			
Copy all pages of this Elevation Certificate and all attachments for	(1) community office	cial, (2) insurance	agent/company,	and (3) building owner.		
Comments (including type of equipment and location, per C2(e) A5. LATITUDE AND LONGITUDE WERE DERIVED FROM THE B.10. THE FIS PROFILE DID NOT CONDUCT A STUDY OF TI C2(e) AIR CONDITIONER SERVICING THE RESIDENCE	HE BAY COUNTY I					

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the correspondi	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/7507 LOON'S CALL LANE	Policy Number:					
•	tate ZIP lorida 324	Code 13	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 b) Top of bottom floor (including basement,		feet meter				
crawlspace, or enclosure) is E2. For Building Diagrams 6–9 with permanent flood or	menings provided in Section	feet meter				
the next higher floor (elevation C2.b in the diagrams) of the building is		feet meter				
E3. Attached garage (top of slab) is		feet meter	s 🔲 above or 🔲 below the HAG.			
E4. Top of platform of machinery and/or equipment servicing the building is		☐ feet ☐ meter	s 🔲 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 OWN	ER (OR OWNER'S REP	RESENTATIVE) CE	RTIFICATION			
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	Sta	ate ZIP Code			
Signature	Date	Te	lephone			
Comments						
			:			
			·			
			☐ Check here if attachments.			

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Su					
7507 LOON'S CALL LANE	11.0. Notice and Box	Tolloy Number.			
City	State	ZIP Code	Company NAIC Number		
PANAMA CITY BEACH	Florida	32413	Company in the Hamber		
SECTIO	N G – COMMUNITY IN	FORMATION (OPTIC	ONAL)		
The local official who is authorized by law or on Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete th				
			igned and sealed by a licensed surveyor, licate the source and date of the elevation		
G2. A community official completed Section or Zone AO.	on E for a building locat	ed in Zone A (without	a FEMA-issued or community-issued BFE)		
G3. The following information (Items G4–	G10) is provided for cor	mmunity floodplain ma	anagement purposes.		
G4. Permit Number	G5. Date Permit Issue	ed	G6. Date Certificate of		
RB19-01057	7/3/2019		Compliance/Occupancy Issued		
	New Construction	Substantial Improvem	nent		
G8. Elevation of as-built lowest floor (including of the building:	g basement)		☐ feet ☐ meters Datum		
G9. BFE or (in Zone AO) depth of flooding at t	the building site:		☐ feet ☐ meters Datum		
G10. Community's design flood elevation:	-		☐ feet ☐ meters Datum		
Local Official's Name Wayne Total		Title			
Community Name		Telephone			
Signature	Date				
Comments (including type of equipment and loc	cation, per C2(e), if appl	5/18/2020 icable)	0		
as to a Col sad Co.					
ox for find and co.					
₩ V					
			Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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City	State	ZIP Code	Company NAIC Number
PANAMA CITY BEACH	Florida	32413	

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

FRONT VIEW 05/06/2020 Photo One Caption

Clear Photo One



Photo Two

Photo Two Caption AC VIEW 05/06/2020 Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy th	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., 17507 LOON'S CALL LANE	Policy Number:		
City PANAMA CITY BEACH	State Florida	ZIP Code 32413	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 REAR VIEW 05/06/2020

Clear Photo Three



Photo Four

Photo Four Caption RIGHT SIDE FRONT VIEW 05/06/2020

Clear Photo Four