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

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

21-092EC

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 Owner's Name						Policy Num	ber:
EMPIRE PIPE							
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number:							IAIC Number:
2133 BROKEN BRANCH WAY City State ZIP Code							
City State							
PANAMA CITY FLORIDA 32405 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)							
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 14907-100-410							
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) COMMERCIAL							
A5. Latitude/Longitude: Lat. 30.18443 Long85.61715 Horizontal Datum: NAD 1927 X NAD 1983							
·		ns of the building if the	_		o obtain flood insur	ance.	<u> </u>
A7. Building Diagra	m Number 1	IA					
A8. For a building	with a crawlsp	pace or enclosure(s):					
a) Square foot	age of crawls	space or enclosure(s)	N/A	sq ft			
b) Number of i	permanent flo	od openings in the cra	wispac	e or enclosure(s) w	ithin 1.0 foot above	e adiacent or	ade N/A
·		enings in A8.b _{N/A}		g in			1077
·	•			NG 111			
d) Engineered	noca opening	gs? ☐ Yes ☒ No)				
A9. For a building v	vith an attach	ed garage:					
a) Square foot	age of attach	ed garage N/A		sq ft			
b) Number of	permanent flo	ood openings in the atta	ached g	parage within 1.0 fo	ot above adjacent	grade N/A	
c) Total net are	ea of flood op	enings in A9.b _{N/A}		. sq in			
d) Engineered	flood opening	gs? ☐ Yes 🕱 No	0				
						-	
	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Communi	ity Name & C	ommunity Number		B2. County Name	•		B3. State
	BAY COUNTY	120004			BAY		FLORIDA
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date] E	IRM Panel ffective/ evised Date	B8. Flood Zone(s	B9. Bas (Zone Flood	se Flood Elevation(s) AO, use Base Depth)
12005C0361H - 0361	н	6/2/2009		06/02/09	X AND A	38.0	
32300							
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 X NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Tyes X No							
Designation Date: N/A CBRS OPA							
Designation Date. N/A CBR3 CI OFA							

ELEVATION CERTIFICATE

21-092EC

IMPORTANT: In these spaces, copy the corresponding	information from Sec	tion A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or	Bldg. No.) or P.O. Rou	te and Box No.	Policy Number:
2133 BROKEN BRANCH WAY			
City State	ZIP	Code	Company NAIC Number
PANAMA CITY FLORI	DA 3240	05	
SECTION C – BUILDING ELE	VATION INFORMAT	TON (SURVEY R	EQUIRED)
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when co	nstruction of the buildi		
 Elevations – Zones A1–A30, AE, AH, A (with BFE), V Complete Items C2.a–h below according to the building 	ng diagram specified	n Item A7. In Puer	o Rico only, enter meters.
Benchmark Utilized: FDOT CONTROL; 46-11-A05V; 34.9			
Indicate elevation datum used for the elevations in ite	Account to the second second	N.	
□ NGVD 1929 ☑ NAVD 1988 □ Other/So		r-	
Datum used for building elevations must be the same	as that used for the E	FE.	Check the measurement used.
a) Top of bottom floor (including basement, crawlspa	ace, or enclosure floor	<u>41</u> . 82	X feet meters
b) Top of the next higher floor		N/A	
c) Bottom of the lowest horizontal structural member	(V Zones only)	N/A.	
d) Attached garage (top of slab)	(* 201100 0111)	N/A.	
e) Lowest elevation of machinery or equipment servi	icing the building	41.75	
(Describe type of equipment and location in Comr	ments)		
f) Lowest adjacent (finished) grade next to building	(LAG)	41.62	x feet meters
g) Highest adjacent (finished) grade next to building	(HAG)	<u>41</u> . <u>66</u>	x feet meters
 h) Lowest adjacent grade at lowest elevation of deck structural support 	or stairs, including	N/A	X feet meters
SECTION D - SURVEYOR,	ENGINEER, OR ARC	HITECT CERTIF	ICATION
This certification is to be signed and sealed by a land surv	evor, engineer, or arc	hitaat authorized h	law to portify playation information
I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment und	mv best efforts to inter	pret the data availa	hible. I understand that any false
I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment und Were latitude and longitude in Section A provided by a lice	my best efforts to inter der 18 U.S. Code, Sec	pret the data availation 1001.	ble. I understand that any false Check here if attachments.
statement may be punishable by fine or imprisonment und	my best efforts to inter der 18 U.S. Code, Sec	pret the data availation 1001.	able. I understand that any false
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Statement may be punishable by fine or imprisonment und Were latitude and longitude in Section A provided by a lice Certifier's Name	my best efforts to interder 18 U.S. Code, Secensed land surveyor? License Number	pret the data availation 1001.	able. I understand that any false
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Statement may be punishable by fine or imprisonment und Were latitude and longitude in Section A provided by a lice Certifier's Name JUSTIN THOMLEY, PSM Title PROFESSIONAL LAND SURVEYOR Company Name PLS GROUP, INC. Address 326 TWIN LAKES DRIVE City PANAMA CITY BEACH Signature	my best efforts to interder 18 U.S. Code, Sections and surveyor? License Number 7039 State FLORIDA Date 2/17/2021 Ints for (1) community of	ZIP Code 32413 Telephone P: 1-850-588-5354	Place Seal Here
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ELEVATION CERTIFICATE

21-092EC

IMPORTANT: In these spaces, copy the corresponding		FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/o	x No.	Policy Number:			
2133 BROKEN BRANCH WAY City Sta	ate	ZIP Code	-	Company NAIC Number	
			Ì	Company IV no Ivambor	
	ORIDA	32405	EV NOT	PEOLURED)	
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 	0 . 16	x feet	meter	s 🛣 above or 🔲 below the HAG.	
 Top of bottom floor (including basement, crawlspace, or enclosure) is 	0 . 20	x feet	meter	s 🗓 above or 🗌 below the LAG.	
E2. For Building Diagrams 6–9 with permanent flood ope	enings provide	d in Section A Items	8 and/or	9 (see pages 1–2 of Instructions),	
the next higher floor (elevation C2.b in the diagrams) of the building is	-	_	meter		
E3. Attached garage (top of slab) is	N/A	X feet	meter	s above or below the HAG.	
E4. Top of platform of machinery and/or equipment servicing the building is	0. 0s	x feet	meter	s 🗓 above or 🗌 below the HAG.	
E5. Zone AO only: If no flood depth number is available, floodplain management ordinance? Yes I	is the top of th	ne bottom floor eleva own. The local office	ated in accial must o	cordance with the community's certify this information in Section G.	
SECTION F - PROPERTY OWNE	R (OR OWNE	R'S REPRESENTA	TIVE) 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	City	Sta		
Property Owner or Owner's Authorized Representative's	Name		Sta		
Property Owner or Owner's Authorized Representative's Address	Name	City	Sta	ate ZIP Code	
Property Owner or Owner's Authorized Representative's Address Signature	Name	City	Sta	ate ZIP Code	
Property Owner or Owner's Authorized Representative's Address Signature	Name	City	Sta	ate ZIP Code	
Property Owner or Owner's Authorized Representative's Address Signature	Name	City	Sta	ate ZIP Code	
Property Owner or Owner's Authorized Representative's Address Signature	Name	City	Sta	ate ZIP Code	
Property Owner or Owner's Authorized Representative's Address Signature	Name	City	Sta	ate ZIP Code	
Property Owner or Owner's Authorized Representative's Address Signature	Name	City	Sta	ate ZIP Code	
Property Owner or Owner's Authorized Representative's Address Signature	Name	City	Sta	ate ZIP Code	
Property Owner or Owner's Authorized Representative's Address Signature	Name	City	Sta	ate ZIP Code	
Property Owner or Owner's Authorized Representative's Address Signature	Name	City	Sta	ate ZIP Code	
Property Owner or Owner's Authorized Representative's Address Signature	Name	City	Sta	ate ZIP Code	

ELEVATION CERTIFICATE

21-092EC

IMPORTANT: In these spaces, copy the corresponding information	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.)	Policy Number:	
2133 BROKEN BRANCH WAY		
City	ZIP Code	Company NAIC Number
PANAMA CITY FLORIDA	32405	
SECTION G - COMMUNITY	INFORMATION (OPTIONAL	-)
The local official who is authorized by law or ordinance to administer Sections A, B, C (or E), and G of this Elevation Certificate. Complete used in Items G8–G10. In Puerto Rico only, enter meters.	e the applicable item(s) and s	ign below. Check the measurement
G1. The information in Section C was taken from other docume engineer, or architect who is authorized by law to certify eledata in the Comments area below.)	entation that has been signed evation information. (Indicate	and sealed by a licensed surveyor, the source and date of the elevation
G2. A community official completed Section E for a building loc or Zone AO.	cated in Zone A (without a FE	:MA-issued or community-issued BFE)
G3. The following information (Items G4–G10) is provided for o	community floodplain manage	ement purposes.
G4. Permit Number G5. Date Permit Iss	sued G6	Date Certificate of
CB20-00132 8/19/20	20	Compliance/Occupancy Issued
G7. This permit has been issued for:	Substantial Improvement	
G8. Elevation of as-built lowest floor (including basement) of the building:	fe	eet meters Datum
G9. BFE or (in Zone AO) depth of flooding at the building site:	fe	eet meters Datum
G10. Community's design flood elevation:	fe	eet meters Datum
Local Official's Name	Title	
Community Name	Telephone	-
Signature	Date 2/19/207	/
Comments (including type of equipment and location, per C2(e), if ap	oplicable)	
\mathcal{O}		
OK for co.		
\mathcal{M}		
		☐ Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6. 21-092EC

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

IMPORTANT: In these spaces,	FOR INSURANCE COMPANY USE		
Building Street Address (including	ng Apt., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
2133 BROKEN BRANCH WAY			
City	State	ZIP Code	Company NAIC Number
PANAMA CITY	FLORIDA	32405	

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.





Front View

Rear View Date: 2/18/2021





Left Side View

Rear View

Right Side View

Right Side View: 2/18/2021

Front View Date: 2/18/2021

Left Side View: 2/18/2021

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

21-092EC

IMPORTANT: in these spaces, copy the correspon	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, a	Policy Number:		
2133 BROKEN BRANCH WAY			
City	State	ZIP Code	Company NAIC Number
PANAMA CITY	FLORIDA	32405	
If submitting more photographs than will fit on the with: date taken; "Front View" and "Rear View"; photographs must show the foundation with represe	preceding page	ed. "Right Side View" and "L	eft Side View." When applicable,
Photo One			Photo Two
Photo Three			Photo Four