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 INSUI | RANCE COMPANY USE | | |
|--|---|---------------------------------|------------|--------------------|----------------------|--|---|
| A1. Building Owne SCENIC HIGHWAY | | S, LLC | | | (PES No. 19 | Policy Num | ber: |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 22015 FRONT BEACH ROAD | | | | Company N | NAIC Number: | | |
| City PANAMA CITY | BEACH | | | State Florida | | ZIP Code 32413 | |
| 3 | A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PARCEL ID No. 36036-000-000, (LOT 14 AND WEST 5' OF 15, BLOCK 7 OF KISKA BEACH, PB 3, PG 24) | | | | | | |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTAL | | | | | | | |
| A5. Latitude/Longit | tude: Lat. 3 | 0-15-18.98 N | Long. 8 | 5-57-36.46 W | Horizontal | Datum: NAD | 1927 × NAD 1983 |
| A6. Attach at least | 2 photograp | ohs of the building if the | e Certific | ate is being u | | | |
| A7. Building Diagra | am Number | 6 | | | | | |
| A8. For a building | with a crawls | space or enclosure(s): | | | | | |
| a) Square foo | a) Square footage of crawlspace or enclosure(s) 1920.00 sq ft | | | | | | |
| b) Number of p | permanent fl | ood openings in the cr | awispac | e or enclosure | e(s) within 1.0 foot | above adjacent gra | ade 0 |
| c) Total net are | ea of flood o | penings in A8.b | | 0.00 sq ir | ı | | |
| d) Engineered | flood openii | ngs? ☐ Yes ⊠ N | No | | | | |
| A9. For a building v | vith an attacl | ned garage: | | | | | |
| a) Square foot | age of attacl | ned garage | | 151.00 sq ft | | | |
| b) Number of p | ermanent flo | ood openings in the at | tached q | arage within | 1.0 foot above adia | acent grade N/A | |
| b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A c) Total net area of flood openings in A9.b N/A sq in | | | | | | | |
| | | | | | | | |
| d) Engineered flood openings? | | | | | | | |
| | SI | CTION B - FLOOD | INSURA | NCE RATE | MAP (FIRM) INFO | ORMATION | |
| B1. NFIP Communi BAY COUNTY UNI | - | Community Number ATED 120004 | | B2. County BAY | Name | | B3. State Florida |
| B4. Map/Panel Number | B5. Suffix | B6. FIRM Index Date | Effe | RM Panel ective/ | B8. Flood Zone(s) | B9. Base Flood E (Zone AO, us | I levation(s) e Base Flood Depth) |
| 12005C 0164 | н | 06-02-2009 | 06-02-2 | vised Date 2009 | "VE" / "X" | | 13.0 |
| 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 X 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 Date: CBRS DPA | | | | | | | |
| | | | | | | | |
| | | | | | | ······································ | |

ELEVATION CERTIFICATE

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

| IMPORTANT: In these spaces, copy the corresponding information | FOR INSURANCE COMPANY USE | | | |
|--|---|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) 22015 FRONT BEACH ROAD | Policy Number: | | | |
| City State PANAMA CITY BEACH Florida | ZIP Code 32413 | Company NAIC Number | | |
| SECTION C – BUILDING ELEVATION | INFORMATION (SURVEY RI | EQUIRED) | | |
| C1. Building elevations are based on: Construction Drawings *A new Elevation Certificate will be required when construction C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V3 Complete Items C2.a–h below according to the building diagral Benchmark Utilized: MONUMENT "Q 177" Indicate elevation datum used for the elevations in items a) through the properties of the same as that used for building elevations must be the same as that used in the properties of the lowest horizontal structural member (V Zones d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the benchmark (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) g) Highest adjacent (finished) grade next to building (HAG) | Building Under Construof the building is complete. O, V (with BFE), AR, AR/A, AR/m specified in Item A7. In Puertical Datum: 27.83 FEET bugh h) below. Sed for the BFE. Closure floor) only) uilding | iction* X Finished Construction | | |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, structural support | including | 9.6 X feet meters | | |
| SECTION D – SURVEYOR, ENGINEE | R, OR ARCHITECT CERTIFI | CATION | | |
| 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 License I JAY KERI 5721 | Number | Transmitte . | | |
| Title PROFESSIONAL SURVEYOR & MAPPER Company Name POOLE ENGINEERING & SURVEYING, INC. Address 2145 DELTA BOULEVARD, SUITE 100 | | Place Scal | | |
| City State TALLAHASSEE Florida | ZIP Code 32303 | The Zame of | | |
| Signature Date 04-21-20 | Telephone 21 (850) 386-5117 | Ext. | | |
| Copy all pages of this Elevation Certificate and all attachments for (1) of | ommunity official, (2) insurance a | agent/company, and (3) building owner. | | |
| Comments (including type of equipment and location, per C2(e), if a ELEVATION STATED ON C2.e OBTAINED ON TOP OF WOOD ACELEVATION STATED ON C2.h OBTAINED AT SOUTHERLY END | PAD ON THE EASTERLY SID | DE OF RESIDENCE. R BEACH ACCESS. | | |



ELEVATION CERTIFICATE

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

| IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR | | | FOR INSURANCE COMPANY USE | |
|--|------------------------------------|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 22015 FRONT BEACH ROAD | | | Policy Number: | |
| | State Florida | ZIP Code 32413 | Company NAIC Number | |
| SECTION E – BUILDING EL FOR ZON | EVATION INFORMA E AO AND ZONE A | | 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 b) Top of bottom floor (including basement, | | | rs 🔲 above or 🔲 below the HAG. | |
| crawlspace, or enclosure) is | | feet meter | | |
| E2. For Building Diagrams 6–9 with permanent flood of the next higher floor (elevation C2.b in the diagrams) of the building is | openings provided in S | Section A Items 8 and/or | , | |
| E3. Attached garage (top of slab) is | | | | |
| E4. Top of platform of machinery and/or equipment servicing the building is | | feet | rs 🔲 above or 🔲 below the HAG. | |
| E5. Zone AO only: If no flood depth number is availab floodplain management ordinance? Yes | ele, is the top of the bo | ttom floor elevated in ac The local official must | cordance with the community's certify this information in Section G. | |
| SECTION F - PROPERTY OW | NER (OR OWNER'S | REPRESENTATIVE) 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 | St | ate ZIP Code | |
| Signature | Date | Те | lephone | |
| Comments | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | ☐ Check here if attachments. | |

ELEVATION CERTIFICATE

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

| IMPORTANT: In these spaces, copy the corresponding information | FOR INSURANCE COMPANY USE | | | |
|--|---------------------------------|---|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) 22015 FRONT BEACH ROAD | Policy Number: | | | |
| City State PANAMA CITY BEACH Florida | ZIP Code 32413 | Company NAIC Number | | |
| SECTION G - COMMUNITY I | 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. | the applicable item(s) and sign | below. Check the 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 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–G10) is provided for co | ommunity floodplain manageme | ent purposes. | | |
| G4. Permit Number G5. Date Permit Issu | | Pate Certificate of compliance/Occupancy Issued | | |
| CB 20 - 000 85 9/21/202 | 20 | | | |
| G7. This permit has been issued for: | Substantial Improvement | | | |
| G8. Elevation of as-built lowest floor (including basement) of the building: | feet | meters Datum | | |
| G9. BFE or (in Zone AO) depth of flooding at the building site: feet _ meters Datum | | | | |
| G10. Community's design flood elevation: | | | | |
| Local Official's Name Title | | | | |
| Community Name | Telephone | | | |
| Signature | 5/4/2021 | 7 7 7 7 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| Comments (including type of equipment and location, per C2(e), if app | | | | |
| OK far co. | | | | |
| | | | | |
| | | | | |
| | | 5 - 25 | | |
| | | | | |
| | | | | |
| | | Check here if attachments. | | |
| | | ss.k nore it attachiments. | | |

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

| IMPORTANT: In these spaces, copy the corresponding information from Section A. | | | FOR INSURANCE COMPANY USE Policy Number: |
|--|---------|----------|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 22015 FRONT BEACH ROAD | | | |
| 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 OF RESIDENCE Photo One Caption

Clear Photo One



Photo Two Caption REAR OF RESIDENCE

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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

| IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 22015 FRONT BEACH ROAD | | | FOR INSURANCE COMPANY USE Policy Number: |
|--|---------|-------|--|
| | | | |
| PANAMA CITY BEACH | Florida | 32413 | |

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 LEFT SIDE OF RESIDENCE

Clear Photo Three



Photo Four Caption RIGHT SIDE OF RESIDENCE

Clear Photo Four

Note: The V Zone design certificate is not a substitute for the NFIP Elevation Certificate (see Fact Sheet No. 1.4, Lowest Floor Elevation), which is required to certify as-built elevations needed for flood insurance rating.

| V ZONE DESIGN CERTIFICATE |
|--|
| Name SEENIC HIGHWAY PARTNERS Policy Number (Insurance Co. Use) |
| Building Address of Other Description 22015 PRINTREACH RD. |
| Permit No. City PANAMA CITY BEACH State FL Zip Code 37413 |
| SECTION I: Flood Insurance Rate Map (FIRM) Information Community No. 12004 Panel No. 20164 Suffix FIRM Date 5-2-9 FIRM Zone(s) X, VE-13 |
| Community 140. 120 00 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| SECTION II: Elevation Information Used for Design |
| [NOTE: This section documents the elevations/depths used or specified in the design – it does not document surveyed elevations and is not equivalent to the as-built elevations required to be submitted during or after construction.] |
| 1. FIRM Base Flood Elevation (BFE) |
| 2. Community's Design Flood Elevation (DFE) Bay County requires 1 foot freeboard |
| 3. Elevation of the Bottom of Lowest Horizontal Structure Member |
| 4. Elevation of Lowest Adjacent Grade |
| 5. Depth of Anticipated Scour/Erosion used for Foundation Design |
| 6. Embedment Depth of Pilings of Foundation Below Lowest Adjacent Grade |
| * Indicate elevation datum used in 1-4: 🗆 NGVD29 💢 NAVD88 🖂 Other |
| SECTION III: V Zone Design Certification Statement |
| I certify that: (1) I have developed or reviewed the structural design, plans, and specifications for construction of the above-referenced building and (2) that the design and methods of construction specified to be used are in accordance with accepted standards of practice** for meeting the following provisions: |
| The bottom of the lowest horizontal structural member of the lowest floor (excluding piles and columns) is elevated to or above the BFE. |
| • The pile and column foundation and structure attached thereto is anchored to resist flotation, collepse, and lateral movement due to the effects of the wind and water loads acting simultaneously on all building components. Water loading values used are those associated with the base flood***. Wind loading values used are those required by the applicable State or local building code. The potential for scour and erosion at the foundation has been anticipated for conditions associated with the base flood, including wave action. |
| SECTION IV: Breakaway Wall Design Certification Statement |
| [NOTE. This section must be certified by a registered engineer or architect when breakaway walls are designed to have a resistance of more than 20 psf (0.98 kN/m2) determined using allowable stress design] |
| certify that: (1) I have developed or reviewed the structural design, plans, and specifications for construction of breakaway walls to be constructed under the above-referenced building and (2) that the design and methods of construction specified to be used are in accordance with accepted standards of practice** for meeting the following provisions: |
| Breakaway wall collapse shall result from a water load less than that which would occur during the base flood***. |
| The elevated portion of the building and supporting foundation system shall not be subject to collapse, displacement, or other structural damage due to the effects of wind and water loads acting simultaneously on all building components (see Section III). |
| SECTION V: Certification and Seal |
| This certification is to be signed and sealed by a registered professional engineer or architect authorized by law to certify structural designs. I certify the V Zone Design Certification Statement (Section III) and the Breakaway Wall Design Certification Statement (Section IV, check if applicable). |
| المنافذة الم |
| Certifier's Name DEREK GARDNER License Number 14830 Place !:eaghthme |
| Title_UI CE PRESIDENT Company Name CASTLINE ENGINERING PETABO PETABO |
| Address 1905 CAULEY AVE |
| City PANAMA CITY BEACH State FL Zip Corle 32407 15:3402 |
| Signature |
| |