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 D.R. Horton, Inc.				Policy Num	ber:			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.5124 Emma Grace Drive				Company N	AIC Number:			
City Panama City				State Florida			ZIP Code 32404	
A3. Property Desc Lot 77, Sunset Villa		nd Block Numbers, Ta Parcel ID 05860-600		Number, Leg	gal Descri	ption, etc.)	
A4. Building Use (A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential							
A5. Latitude/Longi	tude: Lat. <u>3</u>	0°14'13.38" N	Long. 8	5°34'17.83" V	<u>- ۷</u>	lorizontal	Datum: 🔲 NAD 1	927 × NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being ι	sed to ob	tain flood	insurance.	
A7. Building Diagra	am Number	1A						
A8. For a building	with a crawls	pace or enclosure(s):						
a) Square foo	tage of craw	space or enclosure(s)			s	q ft		
b) Number of p	permanent flo	ood openings in the cr	awispace	or enclosure	e(s) within	1.0 foot a	above adjacent gra	ide
c) Total net ar	ea of flood o	penings in A8.b		sq ir	1			
d) Engineered	l flood openir	ngs? 🗌 Yes 🔲 N	٥V					
A9. For a building v	vith an attacl	ned garage:						3
a) Square footage of attached garage439.00 sq ft								
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade								
c) Total net area of flood openings in A9.b sq in								
d) Engineered	flood openin	gs? ☐ Yes ☐ N	No					
-,g								
	SI	ECTION B - FLOOD	INSURA		<u>·</u>	RM) INFO	PRMATION	r
B1. NFIP Commun Bay County - 1200	-	Community Number		B2. County Bay	Name			B3. State Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Floo Zone(s)		B9. Base Flood E (Zone AO, use	levation(s) Base Flood Depth)
12005C0352	н	06-02-2009	06-02-	-	AE		49.0'	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:								
☐ FIS Profile	e ⊠ FIRM	Community Deter	mined [Other/Sou	rce:			
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	Date:	□	CBRS	☐ OPA S	tate of F	itherford Iorida, L	icense Ruther	ly signed by Scot C. ford, P.E., State of Florida, a No. 70041
				N	lo. 7004	1		021.03.05 15:26:04 -06'00'

ELEVATION CERTIFICATE

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

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. 5124 Emma Grace Drive	Policy Number:			
City State ZIP Code Panama City Florida 32404	Company NAIC Number			
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY R	EQUIRED)			
C1. Building elevations are based on: Construction Drawings* Building Under Constretal Name Relevation 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 Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puer Benchmark Utilized: NGS BM 46-03-D-04V EL 49.6243' Vertical Datum: NAVD 88 Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 NAVD 1988 Other/Source: Datum used for building elevations must be the same as that used for the BFE. a) Top of bottom floor (including basement, crawlspace, or enclosure floor) b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) g) Highest adjacent grade at lowest elevation of deck or stairs, including	VAE, AR/A1–A30, AR/AH, AR/AO.			
structural support	N/A feet meters			
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIF	CATION			
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by a certify that the information on this Certificate represents my best efforts to interpret the data available 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	y law to certify elevation information. able. I understand that any false Check here if attachments.			
Certifier's Name License Number Scot C. Rutherford PE 70041	Digitally signed by Scot C. Rutherford, P.E., State of Fiorida,			
Title Civil Engineer/Vice President Company Name SCR & Associates NWFL, Inc. Address P O Box 958 City State ZIP Code	DN: cn=Scot C. Rutherford, P.E., State of Florida, License No. 70041 ON: C E No. 10041 ON 70041 STATE OF State of Florida, License No. 70041 STATE OF State of Florida, License No. 70041, o=This item has been eld by Scot C. Rutherford, P.E. on the date adjacent to the seal a using a SHA authentication code, our-Printed copies of this document are not considered signed and sealed and the SHA authentication code must be verified on any electronic copies, email=scot@scr.us.com, c=US Date: 2021.03.05 15:25:25 -06:00'			
Lynn Haven Florida 32444	Adobe Acrobat version: 2021.001.20142			
Signature Scot C. Rutherford, P.E., State of Florida, License No. 70041 Date: 2021.03.05 15:25:42 -06:00' Date: 2021.03.05 15:25:42 -02:20 -00:00' Date: 2021.03.05 15:25:42 -02:20 -00:00' Date: 2021.03.05 15:25:42 -00:00' Date: 2021.03.05 15:25:42 -02:20 -00:00' Date: 2021.03.05 15:25 -00:00' Date: 2021.03.05 15:25 -00:00' Date: 2021.03.05 15:25 -00:00' Date: 2021.03.05 15:25 -	Ext.			
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.				
Comments (including type of equipment and location, per C2(e), if applicable) *** Engineer or Surveyor will not be responsible for any elevation data that has been changed by o valid unless initialed, dated and seal on bottom right of page 2. B8 and B9. LOMR CASE No.: 13-04-8550P, Effective Date, December 26, 2014 C2.e) Lowest machinery taken from bottom of HVAC unit.	thers. *** Signature on page 2 is not			

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IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/ 5124 Emma Grace Drive	Policy Number:				
	·	Code 104	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		feet meter	s 🔲 above or 🔲 below the HAG.		
 Top of bottom floor (including basement, crawlspace, or enclosure) is 	 ,	☐ feet ☐ meter	s 🔲 above or 🔲 below the LAG.		
E2. For Building Diagrams 6–9 with permanent flood op the next higher floor (elevation C2.b in	enings provided in Sect	on A Items 8 and/or	9 (see pages 1–2 of Instructions),		
the diagrams) of the building is		☐ feet ☐ meter	s 🗌 above or 🗌 below the HAG.		
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 REF	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	Те	lephone		
Comments					
			Check here if attachments.		

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IMPORTANT: In these spaces, copy the corresp	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite 5124 Emma Grace Drive	Policy Number:				
City Panama City	State Florida	ZIP Code 32404	Company NAIC Number		
SECTION	G - COMMUNITY INFO	RMATION (OPTIONAL)			
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 or Zone AO.	E for a building located i	n Zone A (without a FEM	A-issued or community-issued BFE)		
G3. The following information (Items G4–G1	0) is provided for commu	unity floodplain managem	ent purposes.		
G4. Permit Number G	55. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued		
KB 20 - 006/9	011/20				
G7. This permit has been issued for:	lew Construction Sub	ostantial Improvement			
G8. Elevation of as-built lowest floor (including ba of the building:	asement)	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:		feet	meters Datum		
Local Official's Name	Tit	le			
Community Name	Te	lephone			
Signature Date 3 2021					
Comments (including type of equipment and location, per C2(e), if applicable)					
ok for co.					
\mathcal{N}'					
•					
			Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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IMPORTANT: In these spaces, c	FOR INSURANCE COMPANY USE		
Building Street Address (including 5124 Emma Grace Drive	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Panama City	Florida	32404	

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 02/26/2021

Clear Photo One



Photo Two

Photo Two Caption Le

Left Side View

02/26/2021

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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

IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including A 5124 Emma Grace Drive	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Panama City	Florida	32404	

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 02/26/2021

Clear Photo Three



Photo Four

Photo Four Caption Right Side View 02/26/2021

Clear Photo Four