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 INSUR	ANCE COMPANY USE	
A1. Building Owner's Name DONALD PAYNE				Policy Numb	oer:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.7221 WIREGRASS BLVD			Company N	AIC Number:		
City SOUTHPORT	· ·			ZIP Code 32409		
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PID 08413-245-000 - NORTH BAY ESTATES UNIT ONE LOT 21					
A4. Building Use (e.g., Res	idential, Non-Residential,	Addition,	Accessory, e	tc.) RESIDEN	ΓIAL	
A5. Latitude/Longitude: La	at. 30°16'58.1" N	Long. 85	5°39'53`.7" W	Horizontal	Datum: NAD 1	927 × NAD 1983
A6. Attach at least 2 photog						
A7. Building Diagram Numl	per5					
A8. For a building with a cr	awispace or enclosure(s):					
a) Square footage of c	rawispace or enclosure(s)			N/A sq ft		
b) Number of permane	nt flood openings in the cra	awispace	or enclosure	(s) within 1.0 foot	above adjacent gra	de <u>0</u>
c) Total net area of floo	od openings in A8.b		0.00 sq in			
d) Engineered flood op	oenings? 🗌 Yes 🗵 N	lo				
A9. For a building with an a	A9. For a building with an attached garage:					
a) Square footage of a	a) Square footage of attached garageN/A sq ft					
b) Number of permane	nt flood openings in the att	tached g	arage within 1	I.O foot above adja	cent grade 0	
c) Total net area of floo	nd openings in A9.b		0.00 sq	in		
d) Engineered flood op	d) Engineered flood openings?					
<u> </u>	SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number BAY COUNTY 120004			B2. County Name BAY			B3. State Florida
B4, Map/Panel B5, Su Number B5, Su	ffix B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
12005C 0220 H	06-02-2009	06-02-2		Α	14.0'	
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 OPA						
1						

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City State SOUTHPORT Florida	ZIP Code 32409	Company NAIC Number			
SECTION C - BUILDING ELEVATION	ON INFORMATION (SURVEY	REQUIRED)			
C1. Building elevations are based on: Construction Draw *A new Elevation Certificate will be required when construct C2. Elevations – Zones A1–A30. AF. AH. A (with BFF). VF. V1.	tion 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/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: QUINCY 2 (259.55') Vertical Datum: NAVD 1988					
Indicate elevation datum used for the elevations in items a) NGVD 1929 X NAVD 1988 Other/Source:					
Datum used for building elevations must be the same as th		Check the measurement used.			
a) Top of bottom floor (including basement, crawlspace, or	enclosure floor)	18.3 × feet meters			
b) Top of the next higher floor		N/A feet meters			
c) Bottom of the lowest horizontal structural member (V Zo	nes only)	16.4 X feet meters			
d) Attached garage (top of slab)		N/A feet meters			
e) Lowest elevation of machinery or equipment servicing to (Describe type of equipment and location in Comments)	ne building	18.5 × feet meters			
f) Lowest adjacent (finished) grade next to building (LAG)		13.7 X feet meters			
g) Highest adjacent (finished) grade next to building (HAG		14.2 × feet meters			
h) Lowest adjacent grade at lowest elevation of deck or state structural support		14.3 X feet meters			
SECTION D - SURVEYOR, ENGI	NEER, OR ARCHITECT CERT	IFICATION			
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.				
Octimer 5 Marie	nse Number 6297				
Title PROFESSIONAL SURVEYOR AND MAPPER		Place			
Company Name SAME	1	Seal			
Address 13 S CALHOUN ST		HEIRE			
City State QUINCY Flori					
Douglas VV. 144 Harriano	6-2021 (850) 627-778				
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) A5) WVDEP SITE; A7) MOBILE HOME ON CONCRETE BLOCK PIERS; B8) ENTIRE STRUCTURE IN ZONE A; B10) PER BAY COUNTY FLOOD PLAIN MANAGER; C2.a) FINISHED FLOOR; C2c) BOTTOM OF I-BEAM, (NOT IN A V ZONE); C2e) AC UNIT ON LEFT SIDE ON RAISED PAD; C2h) ALL DECKS AND STAIRS ARE ATTACHED					

ELEVATION CERTIFICATE

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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. 7221 WIREGRASS BLVD			Policy Number:		
SOUTHPORT	Florida 3	ZIP Code 32409	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.					
the highest adjacent grade (HAG) and the lowest a	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,	·		s 🗌 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	penings provided in Se	ection 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			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	NER (OR OWNER'S R	EPRESENTATIVE) 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 corresp	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7221 WIREGRASS BLVD			Policy Number:		
City SOUTHPORT	State Florida	ZIP Code 32409	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 in	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 manageme	ent purposes.		
	5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued		
m H21-00066	5/19/2021				
G7. This permit has been issued for:	ew Construction Sub	stantial Improvement			
G8. Elevation of as-built lowest floor (including be 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	Titl	е			
Community Name	Tel	ephone			
Signature Date 5/19/2021					
Comments (including type of equipment and location, per C2(e), if applicable)					
of for co.					
$\mathcal{C}_{\mathcal{M}}$					
			Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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City SOUTHPORT	State Florida	ZIP Code 32409	Company NAIC Number

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 RIGHT 07-06-2021

Clear Photo One



Photo Two

Photo Two Caption FRONT LEFT 07-06-2021

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE			
Building Street Address (including A 7221 WIREGRASS BLVD	pt., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:	
City SOUTHPORT	State Florida	ZIP Code 32409	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 RIGHT REAR 07-06-2021

Clear Photo Three



Photo Four

Photo Four Caption LEFT REAR 07-06-2021

Clear Photo Four