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	FOR INSURANCE COMPANY USE		
A1. Building Owner's Name LMWS, LLC. Policy Number:					per:		
A2. Building Street Address (inc Box No. 8587 Good Life Way					AIC Number:		
City Panama City Beach		State Florida		ZIP Code 32413	2		
A3. Property Description (Lot ar	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 164, Latitude at Watersound Area 1 Phase 3, Parcel ID 32503-250-328						
A4. Building Use (e.g., Residen	tial, Non-Residential, Addi	ition, Accessory, e	tc.) Residential				
A5. Latitude/Longitude: Lat. N		ng. W085°51'33.12		Datum: NAD 1	927 X NAD 1983		
A6. Attach at least 2 photograph	ns of the building if the Cer	ertificate is being us	 sed to obtain flood i	nsurance.			
A7. Building Diagram Number	1B						
A8. For a building with a crawls	pace or enclosure(s):						
a) Square footage of crawls	space or enclosure(s)		0.00 sq ft				
b) Number of permanent flo	od openings in the crawlsp	space or enclosure	(s) within 1.0 foot a	bove adjacent gra	de 0		
c) Total net area of flood or	penings in A8.b	0.00 sq in					
d) Engineered flood opening	gs? Yes 🗵 No						
A9. For a building with an attach	ed garage:						
a) Square footage of attach	ed garage	476.00 sq ft					
b) Number of permanent flo			.0 foot above adjac	cent grade 0			
c) Total net area of flood or	penings in A9.b	0.00 sq	in				
d) Engineered flood openin	gs? ☐ Yes ☒ No	·					
SE	SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
	B1. NFIP Community Name & Community Number B2. County Name B3. State						
Bay County - 120004		Bay			Florida		
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date B7	7. FIRM Panel Effective/ Revised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)		
12005C0190H H 06-02-2009 06-02-2009 AE & X 18.7							
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:							
In Image: Second State In Image: Second Secon							
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 X No							
Designation Date: CBRS DPA							

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR I	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 8587 Good Life Way			0. 50505.	Policy Number:			
City Panar	ma City Beach	State Florida		ZIP Code 32413	Compa	any NAIC N	lumber
	SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
C1.	Building elevations are based	on: Construction I	Drawings* 🔲 E	Building Under Constr	uction*		ed Construction
	*A new Elevation Certificate v	ALEX SECTION OF PERSONS ACCOUNTING OF SECTION					
C2.	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: NGS BM - Y784 Vertical Datum: NAVD88						
	Indicate elevation datum used	for the elevations in item	ns a) through h) b	elow.			
		AVD 1988 Other/Sou		- DEE			
	Datum used for building eleva	tions must be the same a	as that used for tr	ie BrE.	Ch	eck the me	asurement used.
	a) Top of bottom floor (include	ing basement, crawlspac	e, or enclosure fl	oor)	21.83	X feet	meters meters
	b) Top of the next higher floo	or		10	0.0	★ feet	meters
	c) Bottom of the lowest horiz	ontal structural member (V Zones only)		0.0	★ feet ★	meters
	d) Attached garage (top of s	ab)			21.30	X feet	meters
	e) Lowest elevation of machi (Describe type of equipme	nery or equipment servicent and location in Comme	ing the building ents)		21.24		meters
	f) Lowest adjacent (finished)	grade next to building (L	AG)		21.01	× feet	meters meters
	g) Highest adjacent (finished) grade next to building (H	HAG)	-	21.30	★ feet	meters meters
	h) Lowest adjacent grade at structural support	lowest elevation of deck	or stairs, including	g 	0.0	X feet	meters
	SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION						
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.						
	tifier's Name eph G. Rager, P.S.M.		License Number LS7205				Digitally
Title			207200				sian ad by
	ector of North Florida Operation	ns			١,	S Leenas Number	Joseph
Con	npany Name					Joenso Nunder To	
Geo	Point Surveying, Inc.				- Indian	STATE OF FLORIDA	Date:
107 10.709 000 NA	ress 7 Steel Field Road				"	Mary Surveyor and serveyor	2022.09.1
10/20742			State	ZIP Code	_		5 14:48:45
City Par	nama City Beach		Florida	32413			-05'00'
	nature	Digitally signed by Joseph Rager Date: 2022.09.15 14:48:56 -05'00'	Date	Telephone (850) 740-0650	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) A5. AutoCAD conversion from Boundary Survey in State Plane Florida North, NAD83-2011 Adjustment B.10 LOMR 19-04-4735P EFFECTIVE 02-16-2021 C2. Reference Benchmark is a National Geodetic Survey Designation Y784 / PID DQ5762 C2d: Elevation at top of garage C2e: Elevation at top of Air Conditioner Pad							

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 8587 Good Life Way			Policy Number:		
City Sta Panama City Beach Flo	ite ZIP 0 rida 3241		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 ch the highest adjacent grade (HAG) and the lowest adj a) Top of bottom floor (including basement,		es to show whether	r the elevation is above or below		
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		☐ feet ☐ meter	s above or below the HAG.		
crawlspace, or enclosure) is		☐ feet ☐ meter	s above or below the LAG.		
E2. For Building Diagrams 6–9 with permanent flood oper the next higher floor (elevation C2.b in	nings provided in Sectio				
the diagrams) of the building is E3. Attached garage (top of slab) is		☐ feet ☐ meter			
E4. Top of platform of machinery and/or equipment					
servicing the building is E5. Zone AO only: If no flood depth number is available,	is the top of the bottom f	feet meter floor elevated in ac			
floodplain management ordinance? Yes N	No Unknown. The	local official must	certify this information in Section G.		
SECTION F - PROPERTY OWNE	R (OR OWNER'S REP	RESENTATIVE) CE	ERTIFICATION		
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	who completes Sections statements in Sections	A, B, and E for Zo A, B, and E are cor	one A (without a FEMA-issued or rect to the best of my knowledge.		
Property Owner or Owner's Authorized Representative's	Name				
Address	City	St	ate ZIP Code		
Signature	Date	Te	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 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. 8587 Good Life Way	Policy Number:				
City State ZIP Code Panama City Beach Florida 32413	Company NAIC Number				
SECTION G - COMMUNITY INFORMATION (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 at engineer, or architect who is authorized by law to certify elevation information. (Indicate the data in the Comments area below.)	nd sealed by a licensed surveyor, e source and date of the elevation				
G2. A community official completed Section E for a building located in Zone A (without a FEM or Zone AO.	A-issued or community-issued BFE)				
G3. The following information (Items G4–G10) is provided for community floodplain management	ent purposes.				
	Date Certificate of				
1/31/22	Compliance/Occupancy Issued				
G7. This permit has been issued for: New Construction Substantial Improvement					
G8. Elevation of as-built lowest floor (including basement) of the building:	meters Datum				
G9. BFE or (in Zone AO) depth of flooding at the building site:	meters Datum				
G10. Community's design flood elevation:	meters Datum				
Local Official's Name Title Planner					
Community Name Telephone					
Bay County 800-248-	8250				
Signature 9/16/22					
Comments (including type of equipment and location, per C2(e), if applicable)					
FEC orlator find inspection and C.O.					
i de april i	TIMS				
	☐ Check here if attachments.				

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 8587 Good Life Way			Policy Number:
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

Photo One Caption Front View

Clear Photo One



Photo Two

Photo Two Caption Rear View

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.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 8587 Good Life Way			Policy Number:
City	State	ZIP Code	Company NAIC 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 View

Clear Photo Three



Photo Four

Photo Four Caption Right View

Clear Photo Four