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 INSURANCE COMPANY USE			
A1. Building Owner's Name	Policy Number:			
CARILLON BEACH, LTD (PES No. 21-190)				
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Company NAIC Number:			
111 CARILLON MARKET STREET				
City State PANAMA CITY BEACH Florida	ZIP Code 32413			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PARCEL ID No. 36081-005-050 (OFFICIAL RECORDS BOOK 2881, PAGE 1960)				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) NON-RESIDEN	NTIAL			
A5. Latitude/Longitude: Lat. 30-15-55.5 N Long. 85-58-40.6 W Horizontal Date	ım: ☐ NAD 1927 🗷 NAD 1983			
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood inst	urance.			
A7. Building Diagram Number1A_				
A8. For a building with a crawlspace or enclosure(s):				
a) Square footage of crawlspace or enclosure(s) 0.00 sq ft				
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above	ve adjacent grade 0			
c) Total net area of flood openings in A8.b sq in				
d) Engineered flood openings? Yes No				
A9. For a building with an attached garage:				
a) Square footage of attached garage sq ft				
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent	t grade N/A			
c) Total net area of flood openings in A9.b N/A sq in				
d) Engineered flood openings? ☐ Yes 🗷 No				
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORM				
B1. NFIP Community Name & Community Number BAY COUNTY UNINCORPORATED 120004 B2. County Name BAY	B3. State Florida			
Number Date Effective/ Zone(s)	. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)			
12005C 0163 H 06-02-2009 Revised Date 06-02-2009 "AE"	8.0			
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 NAVD 1988 Other/Source:				
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Types 🗷 No				
Designation Date: CBRS DPA				

ELEVATION CERTIFICATE

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

			FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 111 CARILLON MARKET STREET			Policy Number:		
City State PANAMA CITY BEACH Flori			Company NAIC Number		
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					
*A new Elevation Certificate will be required when corce. C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), V Complete Items C2.a–h below according to the build! Benchmark Utilized: MONUMENT "BAY 1001"	/E, V1–V30, V (with BF ing diagram specified i Vertical Datum:	ng is complete. E), AR, AR/A, AR/ n Item A7. In Puert 10.18 FEET	 'AE, AR/A1-		
Indicate elevation datum used for the elevations in Ite	• •	v.			
☐ NGVD 1929 🗷 NAVD 1988 ☐ Other/Se Datum used for building elevations must be the same		FE.	Check	the measurement used.	
a) Top of bottom floor (including basement, crawlspa	ace, or enclosure floor)		9.6 ×		
b) Top of the next higher floor			22.8 ×	I	
c) Bottom of the lowest horizontal structural member	(V Zones only)		N/A ×	<u> </u>	
d) Attached garage (top of slab)			N/A ×	feet meters	
 e) Lowest elevation of machinery or equipment servi (Describe type of equipment and location in Comr 	icing the building nents)		9.5 ×	feet	
f) Lowest adjacent (finished) grade next to building	(LAG)		9.3 ×	feet meters	
g) Highest adjacent (finished) grade next to building	(HAG)		9.4 ×	feet meters	
 h) Lowest adjacent grade at lowest elevation of deck structural support 	or stairs, including		9.4 ×	feet meters	
SECTION D - SURVEYOR,	ENGINEER, OR ARC	HITECT CERTIF	ICATION		
This certification is to be signed and sealed by a land survive in the information on this Certificate represents statement may be punishable by fine or imprisonment under the control of	my best efforts to inter der 18 U.S. Code, Sec	pret the data availation 1001. 	able. I under 	rstand that any false	
Were latitude and longitude in Section A provided by a lic	ensed land surveyor?	¥Yes ∐No	☐ Che	eck here if attachments.	
Certifier's Name JAY KERI	License Number 5721		IIII	ALAN KAN	
Title PROFESSIONAL SURVEYOR & MAPPER			*:	CERTIFICA TO THE	
Company Name POOLE ENGINEERING & SURVEYING, INC.			REC	No. 0005721 STATE OF 第	
Address 2145 DELTA BOULEVARD, SUITE 100				CORD	
City TALLAHASSEE	State Florida	ZIP Code 32303	Till,	SURVEYORIN	
Signature Jay A Keri Digitally signed by Jay A Keri Date: 2022.12.15 10:46:39 -05'00'		Telephone (850) 386-5117	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) ELEVATION STATED ON C2.e OBTAINED ON TOP OF CONCRETE SLAB IN UTILITY/GEA THERMAL CONTROL ROOM LOCATED ON THE NORTH SIDE OF BUILDING. ELEVATION STATED ON C2.h OBTAINED AT END OF STAIRS ON THE SOUTH SIDE OF BUILDING BUILDING IS A MULTI-USE STRUCTURE. USES ARE AS FOLLOWS: 1ST FLOOR RETAIL, 2ND FLOOR STORAGE AND 3RD					
FLOOR RESIDENTIAL/APARTMENTS UNITS 301-306					

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.				ICE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 111 CARILLON MARKET STREET				
City	State	ZIP Code	Company NAIC	Number
PANAMA CITY BEACH	Florida	32413	(OT BEOLUBED)	
SECTION E – BUILDI FOR	R ZONE AO AND ZOI	ORMATION (SURVEY N NE A (WITHOUT BFE)		
For Zones AO and A (without BFE), complete Ite complete Sections A, B,and C. For Items E1–E4 enter meters.	l, use natural grade, if	avallable. Check the mea	surement used. III F	deno raco omy,
 E1. Provide elevation information for the following the highest adjacent grade (HAG) and the land an Top of bottom floor (including basement) 	owest adjacent grade (opriate boxes to show wh [LAG].		
crawispace, or enclosure) is		feet n	neters 🔲 above o	r ☐ below the HAG.
 Top of bottom floor (including basement crawlspace, or enclosure) is 			_	r 🗍 below the LAG.
E2. For Building Diagrams 6–9 with permanent the next higher floor (elevation C2.b in the diagrams) of the building is	flood openings provide	ed in Section A Items 8 ar		-2 of Instructions),r ☐ below the HAG.
E3. Attached garage (top of slab) is		feet 🔲 r	neters 🔲 above o	r Delow the HAG.
E4. Top of platform of machinery and/or equipr servicing the building is	ment	[] feet [] r	neters 🔲 above o	r 🗌 below the HAG.
E5. Zone AO only: If no flood depth number is floodplain management ordinance?	available, is the top of es	the bottom floor elevated nown. The local official r	in accordance with t nust certify this infor	he community's nation in Section G.
SECTION F - PROPER	TY OWNER (OR OWN	ER'S REPRESENTATIV	E) CERTIFICATION	
The property owner or owner's authorized repre- community-issued BFE) or Zone AO must sign Property Owner or Owner's Authorized Represe	here. The statements i	tes Sections A, B, and E f n Sections A, B, and E ar	or Zone A (without a e correct to the best	FEMA-issued or of my knowledge.
Property Owner of Owner's Authorized Represe	Silicative of Name			
Address		City	State	ZIP Code
Signature		Date	Telephone	
Comments				
Commence				
			Chec	k here if attachments.

ELEVATION CERTIFICATE

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

LEEVATION CERTIFICATE			Expiration Bater (18 to made 19)	
IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Su 111 CARILLON MARKET STREET	ite, and/or Bldg. No.) o	r P.O. Route and Box I	No. Policy Number:	
City	State	ZIP Code	Company NAIC Number	
PANAMA CITY BEACH	Florida	32413		
SECTIO	N G – COMMUNITY IN	FORMATION (OPTIO	NAL)	
The local official who is authorized by law or ord Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, ent	Certificate. Complete ti er meters.	he applicable item(s) a	nd sign below. Check the measurement	
G1. The information in Section C was take engineer, or architect who is authorized data in the Comments area below.)	en from other documen ed by law to certify elev	tation that has been signation information. (Indi	gned and sealed by a licensed surveyor, cate the source and date of the elevation	
G2. A community official completed Section or Zone AO.	on E for a building loca	ted in Zone A (without	a FEMA-issued or community-issued BFE)	
G3. The following information (Items G4–	G10) is provided for co	mmunity floodplain ma	nagement purposes.	
G4. Permit Number	G5. Date Permit Issu	ed	G6. Date Certificate of	
CB22-00359	C		Compliance/Occupancy Issued	
G7. This permit has been issued for:	New Construction	Substantial Improvem	ent	
G8. Elevation of as-built lowest floor (including basement) feet meters				
G9. BFE or (in Zone AO) depth of flooding at the building site: feet meters				
G10. Community's design flood elevation:				
Local Official's Name Title Planner				
Community Name Bas Count		Telephone 850 -	248-8250	
Signature Leval		Date 12 -	15-2022	
Comments (including type of equipment and loa	cation, per C2(e), if app	olicable)		
Elevation of				
			☐ Check here if attachments.	

BUILDING PHOTOGRAPHS

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

ELEVATION CERTIFICATE

See Instructions for Item A6.

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. 111 CARILLON MARKET STREET			Policy Number:	
City PANAMA CITY BEACH	State Florida	ZIP Code 32413	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 OF BUILDING

Clear Photo One



Photo Two Caption REAR OF BUILDING

Clear Photo Two

Replaces all previous editions.

FEMA Form 086-0-33 (12/19)

Form Page 5 of 6

BUILDING PHOTOGRAPHS

Continuation Page

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

ELEVATION CERTIFICATE 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. Policy Number:

ZIP Code State Company NAIC Number Florida 32413 PANAMA CITY BEACH

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 Caption LEFT SIDE OF BUILDING

111 CARILLON MARKET STREET

Clear Photo Three

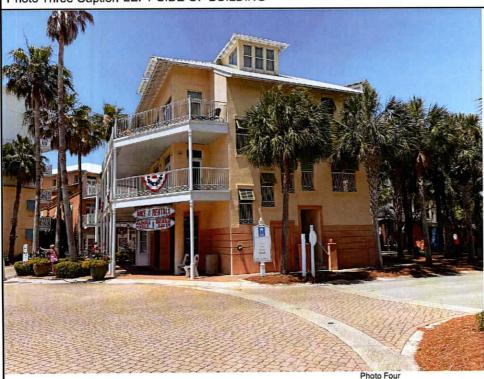


Photo Four Caption RIGHT SIDE OF BUILDING

Clear Photo Four

Replaces all previous editions.

FEMA Form 086-0-33 (12/19)

Form Page 6 of 6