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 ERICA HARRISON	Policy Number:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.2417 34TH PLACE	Company NAIC Number:		
City State PANAMA CITY Florida	ZIP Code 32405		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL NUMBER: 11834-010-000	. (
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL			
A5. Latitude/Longitude: Lat. 30°12'38.8"N Long. 85°37'48.7"W Horizontal Datur	m: NAD 1927 NAD 1983		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insur	ance.		
A7. Building Diagram Number1A			
A8. For a building with a crawlspace or enclosure(s):			
a) Square footage of crawlspace or enclosure(s) N/A sq ft			
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above	e adjacent grade N/A		
c) Total net area of flood openings in A8.b N/A sq in			
d) Engineered flood openings? Yes No	4		
A9. For a building with an attached garage:			
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0			
c) Total net area of flood openings in A9.b 0.00 sq in			
d) Engineered flood openings? 🗵 Yes 🗌 No			
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORM	ATION		
B1. NFIP Community Name & Community Number B2. County Name	B3. State		
BAY COUNTY UNINCORPORATED AREA 120004 BAY	Florida		
	Base Flood Elevation(s) (Zone AO, use Base Flood Depth)		
12005CO335 H H 06-02-2009 06-02-2009 A	33.0		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:			
☐ FIS Profile ☐ FIRM 区 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)? 🗌 Yes 🗵 No			
Designation Date:			

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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 Boulding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Boulding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Boulding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Boulding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Boulding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Boulding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Boulding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Boulding Street Address (including Apt., Unit, Suite, and/or Bldg. No.)	ox No. Policy Number:			
City State ZIP Code PANAMA CITY Florida 32405	Company NAIC Number			
SECTION C - BUILDING ELEVATION INFORMATION (SU	IRVEY REQUIRED)			
C1. Building elevations are based on: Construction Drawings* Building Und *A new Elevation Certificate will be required when construction of the building is corr				
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: RM 351-1 Vertical Datum: NAVD 1988				
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.	Check the measurement used.			
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	31.8 X feet meters			
b) Top of the next higher floor	N/A feet meters			
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A feet meters			
d) Attached garage (top of slab)	31.2 X feet meters			
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	31.8 X feet meters			
f) Lowest adjacent (finished) grade next to building (LAG)	30.7 X feet meters			
g) Highest adjacent (finished) grade next to building (HAG)	31.4 X feet meters			
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	N/A 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?	☐ No ☐ Check here if attachments.			
Certifier's Name License Number ROGER BLAIN ANGLIN 5521	WANTED THE			
Title PROFESSIONAL SURVEYOR AND MAPPER				
Company Name ANGLIN SURVEYING, LLC	CSELVE OF STATE OF ST			
Address 3712 CORNELIA LANE	a direction			
City State ZIP Cor PANANA CITY Florida 32409	PROFESSION			
	71-4055			
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) 1) EQUIPMENT SERVICING BUILDING IS A WATER HEATER INSIDE OF HOUSE. 2) THE PRELIMINARY FEMA FLOOD MAP #12005C0334J, DATED 10/25/2019, WHICH	HS AVAILABLE FOR PUBLIC VIEWING ON			
THE NORTHWEST FLORIDA WATER MANAGEMENT DISTRICTS PORTAL, INDICATI FLOOD ZONE "A".	S THAT THIS PARCEL WILL REMAIN IN			

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. 2417 34TH PLACE			Policy Number:	
		Code 405	Company NAIC Number	
SECTION E – BUILDING ELE FOR ZONE	VATION INFORMATION AO AND ZONE A (WI		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) isb) Top of bottom floor (including basement,		☐ feet ☐ meter	rs 🔲 above or 🔲 below the HAG.	
crawlspace, or enclosure) is		feet meter		
E2. For Building Diagrams 6–9 with permanent flood op- the next higher floor (elevation C2.b in the diagrams) of the building is	enings provided in Sect	ion A items 8 and/or		
E3. Attached garage (top of slab) is		☐ feet ☐ meter	rs above or below the HAG.	
E4. Top of platform of machinery and/or equipment servicing the building is		☐ feet ☐ meter	rs 🔲 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	PRESENTATIVE) CE	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	elephone	
Comments	9			
			4	
8				
			Check here if attachments.	

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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSU	RANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2417 34TH PLACE			Policy Num	ber:
City PANAMA CITY	State ZIP Co Florida 32405		Company N	IAIC Number
SECTIO	ON G - COMMUNITY INFORMATIO	N (OPTIONAL)		
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	n Certificate. Complete the applicable ater meters.	item(s) and sign	below. Ched	ck 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 Zone AO.	ion E for a building located in Zone A	(without a FEM	A-issued or c	ommunity-issued BFE)
G3. The following information (Items G4-	-G10) is provided for community flood	dplain managem	ent purposes	
G4. Permit Number	G5. Date Permit Issued		Date Certifica Compliance/C	te of occupancy Issued
G7. This permit has been issued for:	New Construction ☐ Substantial I	mprovement		
G8. Elevation of as-built lowest floor (including of the building:	g basement)	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	Title			
Community Name	Telephone			
Signature	Date			
Comments (including type of equipment and loc	cation, per C2(e), if applicable)			
			☐ Ch	eck here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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			■ 2 - P (n) 200 0 (n) 10000 (n) 100
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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2417 34TH PLACE			Policy Number:
City	State	ZIP Code	Company NAIC Number
PANAMA CITY	Florida	32405	- A

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 06/06/2023

Clear Photo One

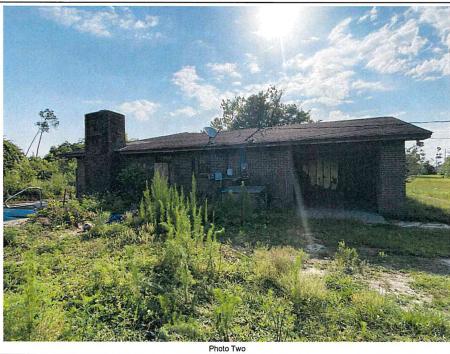


Photo Two Caption

REAR VIEW

06/06/2023

Clear Photo Two

BUILDING PHOTOGRAPHS

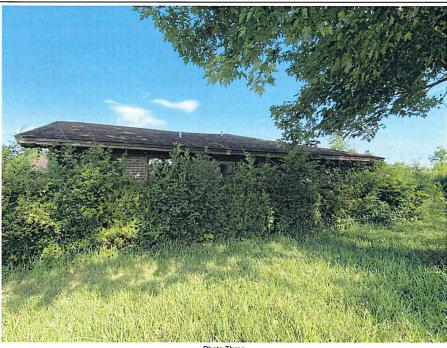
ELEVATION CERTIFICATE

Continuation Page

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2417 34TH PLACE			Policy Number:
City PANAMA CITY	State Florida	ZIP Code 32405	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.



06/06/2023 Photo Three Caption RIGHT SIDE VIEW Clear Photo Three



Photo Four Caption

LEFT SIDE VIEW

06/06/2023

Clear Photo Four