### 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.

AJ. Building Owner's Name ADAMS HOMES 2205-2820  A2. Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No.  A194 MCCALL LANE  City Florida S15tate Florida S2404  A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 67 CHEROKEE HEIGHTS PH 3 PARCEL NO. 05860-387-000  A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)  A5. Latitude/Longitude: Lat. 30:236358 Long. 85.562999 Horizontal Datum: NAD 1927 NAD 1983  A6. Attach at least 2 pholographs of the building if the Certificate is being used to obtain flood insurance.  A7. Building Use for a building with a crawfspace or enclosure(s): a) Square footage of crawfspace or enclosure(s): a) Square footage of crawfspace or enclosure(s) b) Number of permanent flood openings in the crawfspace or enclosure(s) within 1.0 foot above adjacent grade N/A  C) Total net area of flood openings in A8.b N/A sq in d) Engineered flood openings? Yes No  A9. For a building with an attached garage  a) Square footage of attached garage  b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A  C) Total net area of flood openings in the attached garage within 1.0 foot above adjacent grade N/A  B1. NFIP Community Name & Community Number  B2. County Name  B3. State BAY COUNTY UNICORPORATED AREAS 120004  B4. Map/Panel Number BAY COUNTY UNICORPORATED AREAS 120004  B4. Map/Panel Number B5. Suffix B6. FIRM Index B7. FIRM Panel Number B6. Date Suffix B7. FIRM Panel Number B7. FIRM Panel Number B8. Flood Edevation datum used for BFE in Item B9: FIRM County Unicated In Item B9: FIRM County Index B11. Indicate elevation datum used for BFE in Item B9: B12. Is the building located in a Coastal Barrier Resources System (CRAS) area or Otherwise Protected Are	SECTION A - PROPERTY INFORMATION				FOR INSU	RANCE COMPANY USE	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No.  A3494 MCCALL LANE  City State Florida 3.2404  A3. Property Description (Lot and Block Numbers, Tax Percel Number, Legal Description, etc.) LOT 67 CHEROKEE HEIGHTS PH 3 PARCEL, NO. 05860-387-000  A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A5. Latitude/Longitude: Lat. 30.236358 Long. 85.562909 Horizontal Datum: NAD 1927 NAD 1983  A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.  A7. Building Diagram Number 1B  A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s): b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A  C) Total net area of flood openings in A8.b N/A sq in d) Engineered flood openings? Yes No  A9. For a building with an attached garage 387.00 sq ft b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A  c) Total net area of flood openings in A9.b N/A sq in d) Engineered flood openings? No  SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION  B1. NFIP Community Name & Community Number BAY COUNTY UNICORPORATED AREAS 120004  B4. Map/Panel Number B4. COUNTY UNICORPORATED AREAS 120004  B4. Map/Panel Number B5. Suffix B6. FIRM Index Date Refective/ Revised Date Zone(s) Cone(s) C	· ·				Policy Nur	nber:	
Box No.  4914 MCCALL LANE  City	<u></u>	AC District Object Address (including Ant. Heit Cuite, and/or Dide No.) or D.O. Doute and					NAIG Normalia and
PÁNAMA CITY	Box No.	, , ,				Company	NAIC Number:
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  LOT 67 CHEROKEE HEIGHTS PH 3 PARCEL NO. 05860-367-000  A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)  A5. Latitude/Longitude: Lat. 30.238358	_						
A4. Bullding Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)  A5. Latitude/Longitude: Lat. 30.236358							<u></u>
A5. Latitude/Longitude: Lat, 30.236358							
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.  A7. Building Diagram Number1B	A4. Building Use (e.g., Reside	ential, Non-Residential,	Addition	, Accessory,	etc.) RESIDE	ENTIAL	
A7. Building Diagram Number1B  A8. For a building with a craw/space or enclosure(s):  a) Square footage of craw/space or enclosure(s)	A5. Latitude/Longitude: Lat.	30.236358	Long. 8	5.562909	Horizor	ital Datum: 🔲 NAD	1927 🔀 NAD 1983
A8. For a building with a crawlspace or enclosure(s):  a) Square footage of crawlspace or enclosure(s):  b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A  c) Total net area of flood openings in A8.b  N/A sq in  d) Engineered flood openings?	A6. Attach at least 2 photogra	phs of the building if the	e Certific	ate is being u	sed to obtain flo	ood insurance.	
a) Square footage of crawispace or enclosure(s) N/A sq ft b) Number of permanent flood openings in the crawispace or enclosure(s) within 1.0 foot above adjacent grade N/A c) Total net area of flood openings in A8.b N/A sq in d) Engineered flood openings?	A7. Building Diagram Number	1B					
b) Number of permanent flood openings in the craw/space or enclosure(s) within 1.0 foot above adjacent grade	A8. For a building with a craw	Ispace or enclosure(s):					•
c) Total net area of flood openings in A8.b	a) Square footage of crav	vispace or enclosure(s)			N/A sq ft		
d) Engineered flood openings?	b) Number of permanent	Rood openings in the cr	awispac	e or enclosure	e(s) within 1.0 fo	oot above adjacent g	rade N/A
A9. For a building with an attached garage:  a) Square footage of attached garage	c) Total net area of flood	openings in A8.b		N/A sqir	1		
a) Square footage of attached garage	d) Engineered flood oper	ings? 🗌 Yes 🗵 1	No				
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A  c) Total net area of flood openings in A9.b  N/A sq in  SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION  B1. NFIP Community Name & Community Number BAY COUNTY UNICORPORATED AREAS 120004  B4. Map/Panel Number  B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date 06-02-2009  B7. FIRM Panel Date B8. Flood Elevation(s) (Zone AO, use Base Flood Depth)  B1. 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)? Yes No	A9. For a building with an atta	A9. For a building with an attached garage:					
c) Total net area of flood openings in A9.b							
B1. NFIP Community Name & Community Number BAY COUNTY UNICORPORATED AREAS 120004  B4. Map/Panel Number 12005C 0356	b) Number of permanent	flood openings in the at	tached g	arage within	1.0 foot above a	adjacent grade N/A	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION  B1. NFIP Community Name & Community Number BAY COUNTY UNICORPORATED AREAS 120004  B4. Map/Panel Number B5. Suffix Date B6. FIRM Index Date Date Date D6-02-2009  B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date D6-02-2009  B7. FIRM Panel Effective/ Revised Date D6-02-2009  B8. Flood Zone(s) B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)  B1. 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)? Yes No							
B1. NFIP Community Name & Community Number BAY COUNTY UNICORPORATED AREAS 120004  B4. Map/Panel Number B5. Suffix B6. FIRM Index Date Date Date Date D6-02-2009  B7. FIRM Panel Effective/Revised Date D6-02-2009  B8. Flood Zone(s) D7. FIRM Panel Effective/Revised Date D8. B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) D7. Date D7. FIRM Panel Effective/Revised Date D8. Flood Zone(s) D8. Flood Zone(s) D8. B9. Base Flood Elevation(s) D7. FIRM Panel Effective/Revised Date D8. Flood Zone(s) D8. Flood Zone(s) D8. B9. Base Flood Elevation(s) D8. Flood Zone(s) D8. Flood Zone(s) D8. Flood Zone(s) D8. Flood Elevation(s) D8. Flood Elev	d) Engineered flood open	The state of the s					*
B1. NFIP Community Name & Community Number BAY COUNTY UNICORPORATED AREAS 120004  B4. Map/Panel Number B5. Suffix B6. FIRM Index Date Date Date Date D6-02-2009  B7. FIRM Panel Effective/Revised Date D6-02-2009  B8. Flood Zone(s) D7. FIRM Panel Effective/Revised Date D8. B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) D7. Date D7. FIRM Panel Effective/Revised Date D8. Flood Zone(s) D8. Flood Zone(s) D8. B9. Base Flood Elevation(s) D7. FIRM Panel Effective/Revised Date D8. Flood Zone(s) D8. Flood Zone(s) D8. B9. Base Flood Elevation(s) D8. Flood Zone(s) D8. Flood Zone(s) D8. Flood Zone(s) D8. Flood Elevation(s) D8. Flood Elev	SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
BAY COUNTY UNICORPORATED AREAS 120004  B4. Map/Panel Number B5. Suffix B6. FIRM Index Date Date Number B7. FIRM Panel Effective/ Revised Date O6-02-2009  B8. Flood Zone(s) B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 51.0  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)?   Yes   No							
Number   Date   Effective/ Revised Date   Zone(s)   (Zone AO, use Base Flood Depth)							
12005C 0356 H 06-02-2009 06-02-2009 A & X 51.0  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)? ☐ Yes ☑ No			Eff	ective/			
☐ 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)? ☐ Yes ☑ No	12005C 0356 H	06-02-2009	I .		A&X	51.0	
☐ 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)? ☐ Yes ☑ No							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?   Yes   No							
	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							
<u> </u>							

### **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 4914 MCCALL LANE	Policy Number:				
City Sta		P Code	Company NAIC Number		
PANAMA CITY Flor	ida 32	404			
SECTION C – BUILDING EL	EVATION INFORMA	ATION (SURVEY RI	EQUIRED)		
C1. Building elevations are based on: Construction	· -	uilding Under Constru	ction*		
*A new Elevation Certificate will be required when c		- ·			
Complete Items C2.a-h below according to the built	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: BG3661	Vertical Datur		<del></del>		
Indicate elevation datum used for the elevations in it		low.			
☐ NGVD 1929 ☑ NAVD 1988 ☐ Other/s  Datum used for building elevations must be the sam		REE			
Datum used for building elevations must be the same	le as that used for the	DI L.	Check the measurement used.		
a) Top of bottom floor (including basement, crawlsp	pace, or enclosure flo	or)	53.4 🔀 feet 🗌 meters		
b) Top of the next higher floor			62.5  feet  meters		
c) Bottom of the lowest horizontal structural member	er (V Zones only)		N/A  feet  meters		
d) Attached garage (top of slab)			52.9 🔀 feet 🗌 meters		
e) Lowest elevation of machinery or equipment ser (Describe type of equipment and location in Con	vicing the building nments)		52.8 🔀 feet 🗌 meters		
f) Lowest adjacent (finished) grade next to building	(LAG)		52.2 🔀 feet 🔲 meters		
g) Highest adjacent (finished) grade next to building	(HAG)		52.8 X feet  meters		
h) Lowest adjacent grade at lowest elevation of dec structural support	ck or stairs, including		53.0 🔀 feet 🗌 meters		
SECTION D - SURVEYOR	ENGINEER, OR A	RCHITECT CERTIF	ICATION		
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 li	censed land surveyor	? ⊠Yes □No	☐ Check here if attachments.		
Certifier's Name	License Number		unimining,		
J.BRETT ORRELL	6913 ———		HINGRETTORPHIL		
Title VICE-PRESIDENT			Sense Numb		
Company Name			LS6913 LS6913		
POLYSURVEYING OF MOBILE					
Address			SIATE OF		
5588 JACKSON ROAD			TO TO THE REAL PROPERTY OF THE PARTY OF THE		
City MOBILE	State Alabama	ZIP Code 36619	LS6913  STATE OF FLORIDA  SURVEY ON AL LAND SURVEY ON ALL LAND SURVEY		
Signature J. Brett Orrell  Digitally signed by J. Brett Orrelt Date: 2022-11,16 16:46:19 -0000	Date 11-16-2022	Telephone (251) 666-2010	Ext. N/A		
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)					
BENCHMARK AT NAIL IN WASHER IN FRONT OF LOT AT ELEVATION 51.0'					

## **ELEVATION CERTIFICATE**

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

	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldq 4914 MCCALL LANE	No. Policy Number:			
City State	ZIP Code	Company NAIC Number		
PANAMA CITY Florida	32404	Company WAIC Wulliber		
SECTION E – BUILDING ELEVATION FOR ZONE AO A	ON INFORMATION (SURVI ND ZONE A (WITHOUT BE			
For Zones AO and A (without BFE), complete Items E1–E5. If complete Sections A, B,and C. For Items E1–E4, use natural genter meters.	the Certificate is intended to strade, if available. Check the	support a LOMA or LOMR-F request, measurement used. In Puerto Rico only,		
E1. Provide elevation information for the following and check the highest adjacent grade (HAG) and the lowest adjacent		whether the elevation is above or below		
a) Top of bottom floor (including basement, crawlspace, or enclosure) is		meters above or below the HAG.		
<ul> <li>b) Top of bottom floor (including basement, crawlspace, or enclosure) is</li> </ul>		meters above or below the LAG.		
E2. For Building Diagrams 6–9 with permanent flood openings	s provided in Section A Items	8 and/or 9 (see pages 1-2 of Instructions),		
the next higher floor (elevation C2.b in the diagrams) of the building is	feet	meters above or below the HAG.		
E3. Attached garage (top of slab) is	[ feet	meters above or below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is		meters 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 OWNER (O	R OWNER'S REPRESENTA	TIVE) CERTIFICATION		
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.				
	inenta in Occiona A, D, and i	- are correct to the best of my knowledge.		
Property Owner or Owner's Authorized Representative's Name		- are contest to the best of my knowledge.		
<u> </u>		State ZIP Code		
Property Owner or Owner's Authorized Representative's Name	)	State ZIP Code		
Property Owner or Owner's Authorized Representative's Name	City	State ZIP Code		
Property Owner or Owner's Authorized Representative's Name Address Signature	City	State ZIP Code		
Property Owner or Owner's Authorized Representative's Name Address Signature	City	State ZIP Code		
Property Owner or Owner's Authorized Representative's Name Address Signature	City	State ZIP Code		
Property Owner or Owner's Authorized Representative's Name Address Signature	City	State ZIP Code		
Property Owner or Owner's Authorized Representative's Name Address Signature	City	State ZIP Code Telephone		
Property Owner or Owner's Authorized Representative's Name Address Signature	City	State ZIP Code		
Property Owner or Owner's Authorized Representative's Name Address Signature	City	State ZIP Code Telephone		
Property Owner or Owner's Authorized Representative's Name Address Signature	City	State ZIP Code Telephone		
Property Owner or Owner's Authorized Representative's Name Address Signature	City	State ZIP Code Telephone		
Property Owner or Owner's Authorized Representative's Name Address Signature	City	State ZIP Code Telephone		

### **ELEVATION CERTIFICATE**

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

IMPORTANT: In these spaces, copy the corresponding information from	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P. 4914 MCCALL LANE	Policy Number:			
City State PANAMA CITY 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			
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 E for a building located or Zone AO.	in Zone A (without a FEM/	A-issued or community-issued BFE)		
G3. The following information (Items G4–G10) is provided for comm	unity floodplain managem	ent purposes.		
G4. Permit Number G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued		
RB21-0561 9-10-2	/	compliance/occupancy issued		
G7. This permit has been issued for:	bstantial Improvement			
G8. Elevation of as-built lowest floor (including basement)				
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  Planner  Community Name  Telephone				
Community Name To	Community Name Telephone  SS-248-8250			
Signature Date  11-17-22				
Comments (including type of equipment and location, per C2(e), if applicable)				
DEC of free inspection and C.O.				
	~	ns		
		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, co	FOR INSURANCE COMPANY USE		
Building Street Address (including A 4914 MCCALL LANE	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 Caption FRONT VIEW DATED 11/16/2022

Clear Photo One



Photo Two Caption LEFT SIDE VIEW DATED 11/16/2022

Clear Photo Two

### **BUILDING PHOTOGRAPHS**

### **ELEVATION CERTIFICATE**

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE		
Building Street Address (including A 4914 MCCALL LANE	Policy Number:		
City PANAMA CITY	State Florida	ZIP Code 32404	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 REAR VIEW DATED 11/16/2022

Clear Photo Three



Photo Four

Photo Four Caption RIGHT SIDE VIEW DATED 11/16/2022

Clear Photo Four