# 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 - TROPERTY IN COMMENTAL				ANCE COMPANY USE		
A1. Building Owner's Name				Policy Numb	er:	
DONALD PITTS						
A2. Building Street Address (inclu Box No. 5506 SHORES ROAD					IC Number:	
		State		ZIP Code		
City PANAMA CITY	Florida 32			32404		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) A 1 AC+/- PARCEL IN NW 1/4 OF SEC 8, T3S, R13W; AS RECORDED IN ORB 2164, PG 1711; PARCEL ID NO: 05857-008-006						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL						
A5. Latitude/Longitude: Lat. 30°	14'30.7354" Lon	ng. <u>-085°34'12.0492</u>	" Horizontal I	Datum: NAD 19	927 🗷 NAD 1983	
A6. Attach at least 2 photographs	s of the building if the Ce	ertificate is being us	ed to obtain flood	insurance.		
A7. Building Diagram Number	5					
A8. For a building with a crawlspa	ace or enclosure(s):					
<ul> <li>a) Square footage of crawlsp</li> </ul>			N/A sq ft			
b) Number of permanent floo	d openings in the crawls	space or enclosure(	s) within 1.0 foot a	above adjacent gra	de <u>0</u>	
<ul> <li>c) Total net area of flood ope</li> </ul>	enings in A8.b	sq in				
d) Engineered flood opening	s? Yes No					
A9. For a building with an attached	d garage:					
a) Square footage of attached	d garage	N/A sq ft				
b) Number of permanent floo	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade					
c) Total net area of flood ope	enings in A9.b	sq i	n			
d) Engineered flood openings?						
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number BAY COUNTY 120004		B2. County N	27		B3. State 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)	
12005C0352 H	06-02-2009 06	6-02-2009	Α	47.0		
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						

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MPORTANT: 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. 5506 SHORES ROAD			Policy Number:	
City State PANAMA CITY Florida	ZIP Co 32404		Company NAIC Number	
SECTION C – BUILDING ELEVA	ATION INFORMATION	ON (SURVEY RE	EQUIRED)	
C1. Building elevations are based on: Construction D  *A new Elevation Certificate will be required when const	J	ng Under Constru is complete.	ction*	
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, Complete Items C2.a–h below according to the building	V1–V30, V (with BFE diagram specified in	e), AR, AR/A, AR/ Item A7. In Puert	AE, AR/A1-A30, AR/AH, AR/AO. o Rico only, enter meters.	
Benchmark Utilized: F609	Vertical Datum: N			
Indicate elevation datum used for the elevations in items	s a) through h) below.	ic.		
☐ NGVD 1929 🕱 NAVD 1988 ☐ Other/Sour		E.		
a) Top of bottom floor (including basement, crawlspace)			Check the measurement used.  51.6   ★ feet  meters	
b) Top of the next higher floor	,, ,		N/A  feet  meters	
	/ Zanas anks)	"	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)			- NATA - LISSE - LINESEE	
<ul> <li>e) Lowest elevation of machinery or equipment servicing (Describe type of equipment and location in Comme</li> </ul>	ng the building nts)		51.2 X feet meters	
f) Lowest adjacent (finished) grade next to building (LA	AG)		47.8 X feet  meters	
g) Highest adjacent (finished) grade next to building (H	AG)		48.1 X feet meters	
h) Lowest adjacent grade at lowest elevation of deck o structural support			47.7 X feet meters	
SECTION D - SURVEYOR, EN	IGINEER, OR ARCI	HITECT CERTIF	ICATION	
This certification is to be signed and sealed by a land survey I certify that the information on this Certificate represents my statement may be punishable by fine or imprisonment under	/ best efforts to interp	ret the data avalla	y law to certify elevation information. able. I understand that any false	
Were latitude and longitude in Section A provided by a licen			Check here if attachments.	
Columbia of turns	icense Number		LS4772 3 4 5 Halle	
JEFFERY S. HARRIS	.S4772		- Control of the cont	
Title PROFESSIONAL SURVEYOR & MAPPER			Jeffing & Harry	
Company Name JEFF HARRIS PSM			CORIO LANGE	
Address 1815 MAINE AVENUE				
Oity	State Florida	ZIP Code 32444		
Diplany agried by wifery 5. Hours Die convolleny 6. Hours and Home SM. ou, email-yearingsmill corn. c-U.S Die 2022 20 54 16 2012 20 2012	Date 01-12-2023	Telephone (850) 819-9555	Ext.	
Copy all pages of this Elevation Certificate and all attachments	s for (1) community off	icial, (2) insurance	agent/company, and (3) building owner	
Comments (including type of equipment and location, per C LATITUDE AND LONGITUDE WERE DETERMINED USING IS AN AIR CONDITIONER ON WOOD PLATFORM. THE C BY THE BAY COUNTY PLANNING AND ZONING DEPART A8.a) WAS REVISED FROM 1281 SQUARE FEET TO N/A REMAINS 01/12/2023.	G LABINS.ORG. THI COMMUNITY DETERI TMENT. LOWEST AL	MINED BASE FLO DJACENT STUCT	OOD ELEVATION WAS PROVIDED TURE IS THE FRONT WOOD DECK.	

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ELEVATION CERTIFICATE			Expiration Date: N	loveriber 30, 2022
MPORTANT: In these spaces, copy the correspond	ding information from S	ection A.	FOR INSURANC	E COMPANY USE
Building Street Address (including Apt., Unit, Suite, ar 5506 SHORES ROAD	nd/or Bldg. No.) or P.O. R	oute and Box No.	Policy Number:	
City	State ZI	P Code	Company NAIC N	lumber
PANAMA CITY	Florida 32	2404		
SECTION E – BUILDING E FOR ZON	LEVATION INFORMAT NE AO AND ZONE A (W	ION (SURVEY NO (ITHOUT BFE)	T REQUIRED)	
For Zones AO and A (without BFE), complete Items E complete Sections A, B,and C. For Items E1–E4, use enter meters.	E1–E5. If the Certificate is natural grade, if available	intended to support c. Check the measur	a LOMA or LOMR-Frement used. In Pue	request, rto Rico only,
E1. Provide elevation information for the following an the highest adjacent grade (HAG) and the lowest	nd check the appropriate b t adjacent grade (LAG).	oxes to show wheth	er the elevation is a	bove or below
<ul> <li>Top of bottom floor (including basement, crawlspace, or enclosure) is</li> </ul>		_	ers 🔲 above or [	below the HAG.
<ul> <li>Top of bottom floor (including basement, crawlspace, or enclosure) is</li> </ul>		_ feet met	ers above or	below the LAG.
E2. For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in	openings provided in Sec			
the diagrams) of the building is  E3. Attached garage (top of slab) is		_		☐ below the HAG. ☐ below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is		_   feet   met	ters above or	below the HAG.
E5. Zone AO only: If no flood depth number is availa	ble, is the top of the botto	m floor elevated in a	accordance with the	community's tion in Section G.
SECTION F - PROPERTY OV	WNER (OR OWNER'S RE	PRESENTATIVE)	CERTIFICATION	
The property owner or owner's authorized representation community-issued BFE) or Zone AO must sign here.	The statements in Section	ons A, B, and E for and E are c	Zone A (without a FI correct to the best of	EMA-issued or my knowledge.
Property Owner or Owner's Authorized Representative	ve's Name			
Address	City		State	ZIP Code
Signature	Date		Telephone	
Comments				
			☐ Check h	nere if attachments.

### ELEVATION CERTIFICATE

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ELEVATION CERTIFICATE			Expiration Bate: November 66, 262
IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY US		
Building Street Address (including Apt., Unit, Su 5506 SHORES ROAD	ite, and/or Bldg. No.	) or P.O. Route and Box N	lo. Policy Number:
City PANAMA CITY	State Florida	ZIP Code 32404	Company NAIC Number
SECTIO	N G - COMMUNITY	INFORMATION (OPTION	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. Complet ter meters.	e the applicable item(s) an	d sign below. Check the measurement
engineer, or architect who is authorize data in the Comments area below.)	ed by law to certify e	levation information. (Indic	ned and sealed by a licensed surveyor, ate the source and date of the elevation
G2. A community official completed Section or Zone AO.	on E for a building lo	cated in Zone A (without a	rFEMA-issued or community-issued BFE)
G3. The following information (Items G4–	G10) is provided for	community floodplain man	agement purposes.
G4. Permit Number	G5. Date Permit Is		G6. Date Certificate of Compliance/Occupancy Issued
RB22-00588	5-27-	22	
· /		Substantial Improveme	ent
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 t	the building site:		feet meters Datum
G10. Community's design flood elevation:			feet meters Datum
Local Official's Name		Title Panne	
Community Name		Telephone	
Bay County		80-	248-820
Signature		Date	
Hope on stewart		1-25-	23 
Comments (including type of equipment and loc	cation, per C2(e), if a	applicable)	
Fec of	for find in	ispetin and	GO.
			,
			☐ Check here if attachment

#### **BUILDING PHOTOGRAPHS**

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#### **ELEVATION CERTIFICATE**

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.					
5506 SHORES ROAD					

Policy Number:

State

City Florida PANAMA CITY

ZIP Code 32404

Company NAIC Number

FOR INSURANCE COMPANY USE

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.



01/12/2023 FRONT LEFT VIEW Photo One Caption

Clear Photo One



Photo Two

01/12/2023 FRONT RIGHT VIEW Photo Two Caption

Clear Photo Two

#### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

**Continuation Page** 

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Building Street Address (including Apt. 5506 SHORES ROAD	Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	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

01/12/2023 Photo Three Caption REAR VIEW

Clear Photo Three



Photo Four Caption MACHINERY AND FOUNDATION DETAIL

01/12/2023

Clear Photo Four