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.

| | | | | | FOR INSUR | ANCE COMPANY USE |
|--|---|----------------|--------------------|----------------------|----------------------------------|------------------------------------|
| A1. Building Owner's Name | | | | Policy Numb | er: | |
| Samuel Taylor Homes, LLC | | | | | | |
| A2. Building Street Address (incl Box No. | 2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Compar | | | Company N | AIC Number: | |
| 620 Longpoint Way | | | | | | |
| City | | _ | State | | ZIP Code | |
| Panama City Beach | | | Florida | | 32407 | |
| A3. Property Description (Lot an | d Block Numbers, Tax | Parcel | Number, Leg | al Description, etc. |) | |
| Lot 26, Breakfast Point East, Pha | ase 1-A | | | | | |
| A4. Building Use (e.g., Resident | tial, Non-Residential, A | ddition, | Accessory, e | tc.) Residential | <u> </u> | |
| A5. Latitude/Longitude: Lat. 30 | ° 12' 11.3" L | ong. <u>85</u> | 5° 47' 52.0" | Horizontal | Datum: 🔲 NAD 1 | 927 🔀 NAD 1983 |
| A6. Attach at least 2 photograph | ns of the building if the | Certifica | ate is being u | sed to obtain flood | insurance. | |
| A7. Building Diagram Number | 1B | | | | | |
| A8. For a building with a crawlsp | cace 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 crav | - wlspace | or enclosure | (s) within 1.0 foot | above adjacent gra | de <u>0</u> |
| c) Total net area of flood op | enings 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 attacher | | | 399.72 sq ft | | | |
| b) Number of permanent flo | | | | | cent grade 0 | |
| c) Total net area of flood op | | | pa 00.0 | | | |
| 1 | | | | | | |
| d) Engineered flood openings? | | | | | | |
| SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION | | | | | | |
| B1. NFIP Community Name & C | Community Number | | B2. County | Name | | B3. State |
| Bay County Unincorporated Area | as 120004 | | Bay | | | Florida |
| B4. Map/Panel B5. Suffix Number | B6. FIRM Index Date | Effe | RM Panel | B8. Flood Zone(s) | B9. Base Flood E (Zone AO, us | levation(s) e Base Flood Depth) |
| 12005C0308 H | 06-02-2009 | 06-02-2 | vised Date 2009 | A | 8.7 | |
| | | | | | | |
| 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 | | | | | | |
| Designation Date: CBRS OPA | | | | | | |
| | | | | | | |
| | | | | | | |

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022 FOR INSURANCE COMPANY USE by the corresponding information from Section A.

| MPORTANT: In these spaces, copy the c | Policy Number: | | |
|--|--|--------------------------------|--|
| Building Street Address (including Apt., Unit 620 Longpoint Way | t, Suite, and/or Bidg. No.) of | | |
| City State ZIP Code Panama City Beach Florida 32407 | | Company NAIC Number | |
| SECTION C - E | BUILDING ELEVATION IN | IFORMATION (SURVEY | REQUIRED) |
| | Construction Drawings* | Building Under Const | truction* X Finished Construction |
| C2. Elevations – Zories A1–A30, AE, AH, Complete Items C2.a–h below accord Benchmark Utilized: NGS X 182 | ling to the building diagram | specified in Item A7. In Pue | erto Rico only, enter meters. |
| Indicate elevation datum used for the | | | |
| ☐ NGVD 1929 ☒ NAVD 19 | | 3 , | |
| Datum used for building elevations m | | ed for the BFE. | Charle the magazirement used |
| | | floor\ | Check the measurement used. 15.4 feet meters |
| a) Top of bottom floor (including bas | ement, crawispace, or encid | osure noor) | N/A feet meters |
| b) Top of the next higher floor | | - | |
| Bottom of the lowest horizontal str | ructural member (V Zones o | only) | |
| d) Attached garage (top of slab) | | - | 14.8 X feet meters |
| e) Lowest elevation of machinery or (Describe type of equipment and | equipment servicing the bui ocation in Comments) | ilding | 14.9 🗵 feet 🗌 meters |
| f) Lowest adjacent (finished) grade | next to building (LAG) | | 14.6 🗵 feet 🗌 meters |
| g) Highest adjacent (finished) grade | next to building (HAG) | 1 | 14.8 X feet meters |
| h) Lowest adjacent grade at lowest of structural support | elevation of deck or stairs, in | ncluding | N/A feet meters |
| | | R, OR ARCHITECT CERT | |
| This certification is to be signed and seale I certify that the information on this Certific statement may be punishable by fine or in | cate represents my best eff nprisonment under 18 U.S. | Code, Section 1001. | Charles and that any raise |
| Were latitude and longitude in Section A | | | Check here if attachments. |
| Certifier's Name | License N 4958 | umber | ODD TWO |
| W. Todd Tindell | | | - STIFIC SEALING |
| Title Professional Land Surveyor | | | * \Ct |
| Company Name | | | No. 4958 |
| Buchanan & Harper, Inc. | | | * * ** |
| Address 735 W. 11th Street | | | No. 4958 * No. 4958 * No. 4958 |
| City Panama City | State Florida | ZIP Code 32401 | Check here if attachments. The check here if attachments. The check here if attachments. No. 4958 * No. 4958 * No. 4958 * No. 4958 * LORID OF THE CHECK HERE IN THE CHE |
| Signature Signature Digitally signed by William Date: 2022 12 19 10 480 | Date 12-13-202 | Telephone 22 (850) 763-742 | Ext. |
| | | ommunity official, (2) insuran | ce agent/company, and (3) building owner. |
| Comments (including type of equipment at C2e IS TOP ELEVATION OF AN HVAC I ***THE SEAL APPEARING ON THIS DO DATE OF DIGITAL SIGNATURE*** | and location, per C2(e), if ap | oplicable) | |
| B&H Job No. 13022; FB 1198, Page 25 | | | Form Page 2 of 6 |

ELEVATION CERTIFICATE

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

| IMPORTANT: Ir | In these spaces, copy the corresponding information from Section A. | | | FOR INSURANCE COMPANY | USE |
|---|---|----------------------------|---------------------------------------|-----------------------------------|-------|
| Building Street | Address (including Apt., Unit, Suite, and/o | r Bldg. No.) or P.O. Rou | ite and Box No. | Policy Number: | |
| 620 Longpoint \ | - T | | | | |
| City | St | ate ZIP | Code | Company NAIC Number | |
| Panama City Be | each Flo | orida 324 | 07 | | |
| | SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) | | | | |
| complete Section | nes AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, ete 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 ele the highesi | | | | | |
| a) Top of I crawlsr | ottom floor (including basement, bace, or enclosure) is | | ☐ feet ☐ mete | rs above or below the I | HAG. |
| b) Top of I | pottom floor (including basement, bace, or enclosure) is | | feet ☐ mete | rs 🔲 above or 🔲 below the l | LAG. |
| | g Diagrams 6–9 with permanent flood op | enings provided in Section | — — | _ | |
| the next hi | gher floor (elevation C2.b in | enniga provided in Section | | | |
| the diagrar | ns) of the building is | | ☐ feet ☐ mete | rs above or below the H | HAG. |
| | arage (top of slab) is | | ☐ feet ☐ mete | rs above or below the H | HAG. |
| E4. Top of plat servicing t | form of machinery and/or equipment he building is | | ☐ feet ☐ mete | rs above or below the l | HAG. |
| E5. Zone AO o floodplain | 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 REP | RESENTATIVE) C | ERTIFICATION | |
| The property of | mer or owner's authorized representative | who completes Section | s A. B. and E for Z | one A (without a FEMA-issued or | г |
| community-isst | ted BFE) or Zone AO must sign here. The | statements in Sections | A, B, and E are co | rrect to the best of my knowledge | e. |
| ļ | r or Owner's Authorized Representative's | | · · · · · · · · · · · · · · · · · · · | | |
| 1 Toperty Owne | G. Official Identification | | | | |
| Address | | City | S | tate ZIP Code | |
| Signature | | Date | т | elephone | |
| Signature | | | | | |
| Comments | | | | | |
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| | | | | Check here if attachm | ents. |

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. | Policy Number: | | | |
| 620 Longpoint Way | | | | |
| City State ZIP Code | Company NAIC Number | | | |
| Panama City Beach Florida 32407 | | | | |
| 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 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 in Zone A (without a FE or Zone AO. | EMA-issued or community-issued BFE) | | | |
| G3. The following information (Items G4–G10) is provided for community floodplain manage | ement purposes. | | | |
| G4. Permit Number G5. Date Permit Issued G6 | i. Date Certificate of Compliance/Occupancy Issued | | | |
| PPRB22-00317 6-22-22 | 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: | eet meters Datum | | | |
| G9. BFE or (in Zone AO) depth of flooding at the building site: | eet meters Datum | | | |
| G10. Community's design flood elevation: | eet meters Datum | | | |
| Local Official's Name Title Planner | | | | |
| Community Name Bac Sunt Telephone | 48-8250 | | | |
| Signature Date 12-25-22 | | | | |
| Comments (including type of equipment and location, per C2(e), if applicable) | | | | |
| | | | | |
| 72C Ok of spind mapentin and C.O. | | | | |
| l l | rns | | | |
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| | 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 the corresponding information from Section A. | | | FOR INSURANCE COMPANY USE |
|--|----------------------------------|---------------------------|---------------------------|
| Building Street Address (including Apt 620 Longpoint Way | , Unit, Suite, and/or Bldg. No.) | or P.O. Route and Box No. | Policy Number: |
| City Panama City Beach | State Florida | ZIP Code 32407 | 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 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. 620 Longpoint Way | | | Policy Number: |
| City | State | ZIP Code | Company NAIC Number |
| Panama City Beach | Florida | 32407 | |

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 Side View

Clear Photo Three



Photo Four

Photo Four Caption Right Side View

Clear Photo Four