

# 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 Jeffrey & Mary Boutwell				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7316 Talmadge Ave				Company NAIC Number:	
City Southport		State Florida		ZIP Code 32409	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL ID NUMBER 08384-000-000					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>					
A5. Latitude/Longitude: Lat. <u>30°16'58.0329</u> Long. <u>-085°38'39.5696</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 <u>5</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>					
c) Total net area of flood openings in A8.b <u>N/A</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>N/A</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>					
c) Total net area of flood openings in A9.b <u>N/A</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number Bay County Unincorporated Areas 12004			B2. County Name Bay County		B3. State Florida
B4. Map/Panel Number 12005C0220	B5. Suffix H	B6. FIRM Index Date 06-02-2009	B7. FIRM Panel Effective/ Revised Date	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 7.0
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Yes  No  
 Designation Date: \_\_\_\_\_  CBRS  OPA

B11. Indicate elevation datum used for BFE in Item B9:  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_

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: \_\_\_\_\_

B4. Map Panel Number 12005C0250	B5. Suffix H	B6. FIRM Index Date 08-02-2008	B7. FIRM Panel Effective/ Revised Date AE	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 7.0
B1. NFIP Community Name & Community Number Bay County Unincorporated Areas 12004			B2. County Name Bay County	B3. State Florida	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

(d) Engineered flood openings?  Yes  No  
 (c) Total net area of flood openings in A9.d. \_\_\_\_\_ sq ft

(b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade NA  
 (a) Square footage of attached garage \_\_\_\_\_ sq ft

A9. For a building with an attached garage:  
 (d) Engineered flood openings?  Yes  No  
 (c) Total net area of flood openings in A8.d. \_\_\_\_\_ sq ft

(b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade NA  
 (a) Square footage of crawlspace or enclosure(s) \_\_\_\_\_ sq ft

A8. For a building with a crawlspace or enclosure(s):  
 (d) Engineered flood openings?  Yes  No  
 (c) Total net area of flood openings in A8.d. \_\_\_\_\_ sq ft

(b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade NA  
 (a) Square footage of crawlspace or enclosure(s) \_\_\_\_\_ sq ft

A7. Building Disgram Number \_\_\_\_\_

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A5. Latitude/Longitude: Lat. 30°16'58.0329 Long. -085°38'39.5888  
 Horizontal Datum:  NAD 1927  NAD 1983

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
 TAX PARCEL ID NUMBER 08384-000-000

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owners Name Jeffrey & Mary Boutwell	A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg No.) or P. O. Route and Box No. 7318 Talmadge Ave	Policy Number
City Southport	State Florida	Company NAIC Number
ZIP Code 32409	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-8.

# ELEVATION CERTIFICATE

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7316 Talmadge Ave			Policy Number:
City Southport	State Florida	ZIP Code 32409	Company NAIC Number

## SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction  
\*A new Elevation Certificate will be required when construction of the building is complete.

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: NGS X290 Vertical Datum: 8.47

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.


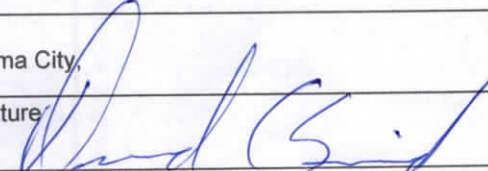
Check the measurement used.

- |   |             |  |                                 |
|---|-------------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor)   | <u>10.9</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor   | <u>N/A</u>  | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only)   | <u>N/A</u>  | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| d) Attached garage (top of slab)  | <u>N/A</u>  | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building<br>(Describe type of equipment and location in Comments) | <u>4.6</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | <u>7.4</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | <u>7.9</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support                                  | <u>7.3</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> 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?  Yes  No  Check here if attachments.

Certifier's Name Darryl C. Finch	License Number LS6087		
Title Surveyor			
Company Name CWR Contracting, Inc. LB8502			
Address 4116 N Hwy 231			
City Panama City,	State Florida		
Signature 	Date 11-30-2022	Telephone (850) 785-4675	Ext. 117

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)  
An existing well is present on property with an elevation of 4.60 feet on top of casing.  
A HVAC unit services the building and has an elev. of 10.9

A HVAC unit services the building and has an elev. of 10.9. An existing well is present on property with an elevation of 4.60 feet on top of casing. Comments (including type of equipment and location, per CS(e), if applicable)

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Signature: 11-30-2022 (850) 785-4678 Ext 117  
 Date: Telephone: Ext: 117

City	Panama City, Florida
Address	4116 N Hwy 231
Company Name	CWR Contracting, Inc LB8505
Title	Surveyor
Certifier's Name	Daryl C. Finch
License Number	L26087

Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  Check here if attachments.

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.

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION**

(f) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support  7.3 feet  meters

(g) Highest adjacent (finished) grade next to building (HAG)  7.9 feet  meters

(f) Lowest adjacent (finished) grade next to building (LAG)  7.4 feet  meters

(e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)  4.6 feet  meters

(d) Attached garage (top of slab)  N/A feet  meters

(c) Bottom of the lowest horizontal structural member (Zones only)  N/A feet  meters

(b) Top of the next higher floor  N/A feet  meters

(a) Top of bottom floor (including basement, crawlspace, or enclosure floor)  10.9 feet  meters

Check the measurement used.

Datum used for building elevations must be the same as that used for the BFE.  NGVD 1929  NAVD 1988  Other Source: \_\_\_\_\_

Indicate elevation datum used for the elevations in items a) through h) below. Vertical Datum: 8.47

Complete items CS-a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

CS Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, ARA, ARAE, ARA1-A30, ARA1H, ARA1O, ARA1V

A\* New Elevation Certificate will be required when construction of the building is complete.

C1 Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction

**SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)**

City	Southport
State	Florida
ZIP Code	32409
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	7316 Talmadge Ave
Company NAIC Number	
Policy Number	

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

FOR INSURANCE COMPANY USE

# ELEVATION CERTIFICATE

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7316 Talmadge Ave			Policy Number:
City Southport	State Florida	ZIP Code 32409	Company NAIC Number

## SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

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) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings 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 \_\_\_\_\_  feet  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 (OR OWNER'S REPRESENTATIVE) 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.

Property Owner or Owner's Authorized Representative's Name			
Address	City	State	ZIP Code
Signature	Date	Telephone	

Comments

Check here if attachments.

**ELEVATION CERTIFICATE**

OMB No. 1680-0008  
 Expiration Date: November 30, 2022

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7318 Talmadge Ave	Policy Number
City Southport	Company NAIC Number
State Florida	ZIP Code 32409

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED)  
 FOR ZONE AO AND ZONE A (WITHOUT BFE)**

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) is \_\_\_\_\_ feet  meters  above or  below the HAG.

b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ feet  meters  above or  below the LAG.

E2 For Building Diagrams 8-9 with permanent flood openings provided in Section A items 8 and/or 9 (see pages 1-2 of instructions), the next higher floor (elevation CS.d 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 \_\_\_\_\_ feet  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 (OR OWNER'S REPRESENTATIVE) 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.

Property Owner or Owner's Authorized Representative's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.

# ELEVATION CERTIFICATE

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7316 Talmadge Ave			Policy Number:
City Southport	State Florida	ZIP Code 32409	Company NAIC Number

## 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 FEMA-issued or community-issued BFE) or Zone AO.
- G3.  The following information (Items G4–G10) is provided for community floodplain management purposes.

G4. Permit Number <i>MA22-00233</i>	G5. Date Permit Issued <i>10.4.22</i>	G6. Date Certificate of Compliance/Occupancy Issued
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G7. This permit has been issued for:  New Construction  Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_  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 <i>Hope M STEWART</i>	Title <i>Planner</i>
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Community Name <i>Bay County</i>	Telephone <i>850-298-8250</i>
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Signature <i>Hope M Stewart</i>	Date <i>12-01-22</i>
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Comments (including type of equipment and location, per C2(e), if applicable)

*REC of final inspection and C.O. HMG*

Check here if attachments.

**ELEVATION CERTIFICATE**

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7318 Talmadge Ave	Policy Number:
City Southport	Company NAIC Number
State Florida	ZIP Code 32409

**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 FEMA-issued or community-issued BFE) or Zone AO.

G3 The following information (Items G4-G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Company Issued

G7. This permit has been issued for:  New Construction  Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ 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 location, per G2(e), if applicable)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Check here if attachments.



# BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

## ELEVATION CERTIFICATE

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7316 Talmadge Ave			Policy Number:
City Southport	State Florida	ZIP Code 32409	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 11-03-2022

Clear Photo One



Photo Two

Photo Two Caption rear 11-03-2022

Clear Photo Two

Replaces all previous editions.

Photo Two Caption rear 11-03-2022

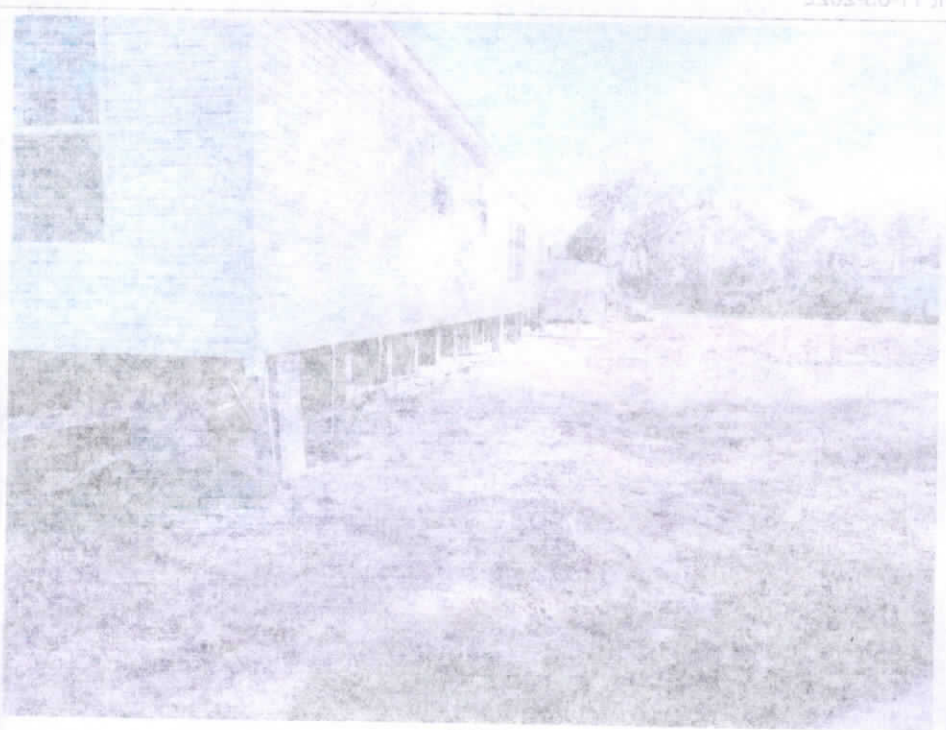


Photo Two

Clear Photo Two

Photo One Caption front 11-03-2022

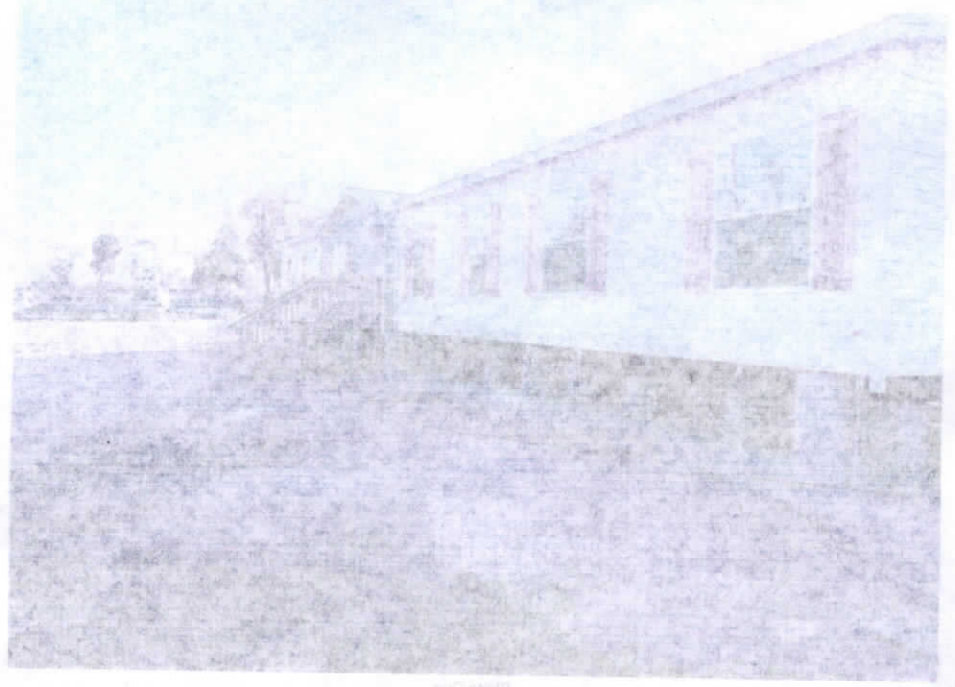


Photo One

Clear Photo One

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A8. 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.

City	State	ZIP Code	Company NAIC Number
Southport	Florida	32409	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			
Policy Number			
FOR INSURANCE COMPANY USE			

ELEVATION CERTIFICATE

See instructions for Item A8.

BUILDING PHOTOGRAPHS

OMB No. 1680-0008  
Expiration Date: November 30, 2022

# BUILDING PHOTOGRAPHS

## ELEVATION CERTIFICATE

Continuation Page

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7316 Talmadge Ave			Policy Number:
City Southport	State Florida	ZIP Code 32409	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 left side 11-03-2022

Clear Photo Three



Photo Four

Photo Four Caption right side 11-03-2022

Clear Photo Four

**ELEVATION CERTIFICATE**

**BUILDING PHOTOGRAPHS**

Continuation Page

OMB No 1860-0008  
Expiration Date: November 30, 2022

<p><b>IMPORTANT:</b> In these spaces, copy the corresponding information from Section A.</p>	
<p>FOR INSURANCE COMPANY USE</p>	<p>Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7318 Talmadge Ave</p>
<p>Policy Number:</p>	<p>City Southport</p>
<p>Company NAIC Number</p>	<p>State Florida</p>
<p>ZIP Code 32409</p>	<p>State Florida</p>

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 8A



Photo Three

Clear Photo Three

Photo Three Caption left side 11-03-2022

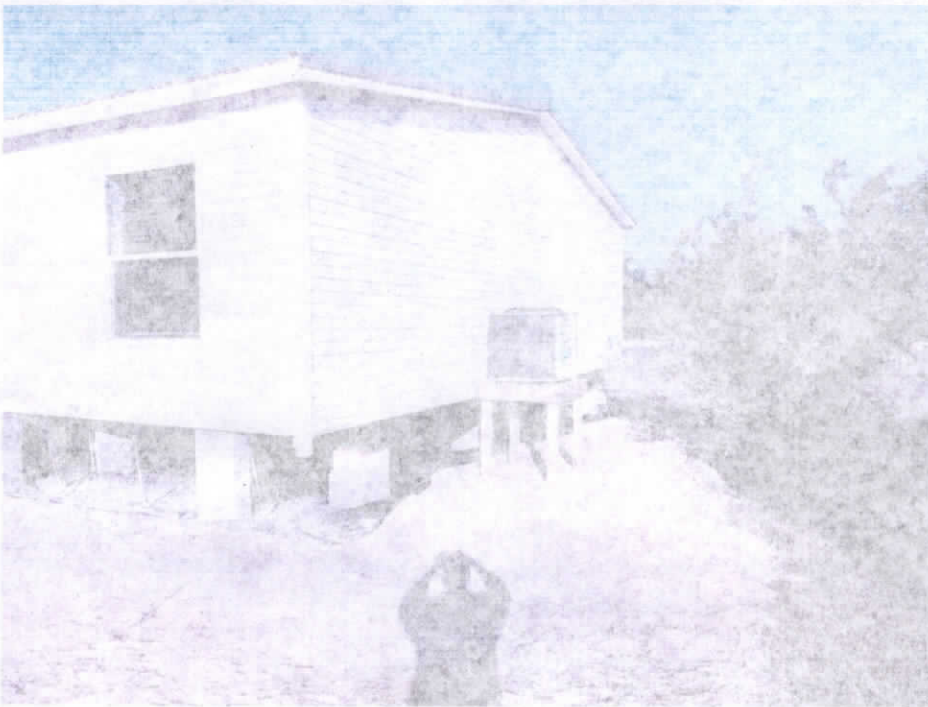


Photo Four

Clear Photo Four

Photo Four Caption right side 11-03-2022