

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 Gueringer, Juan				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7715 MAGNOLIA POND TRL				Company NAIC Number:	
City PANAMA CITY BEACH		State Florida		ZIP Code 32413	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Parcel ID 32611-842-000					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>N30d17'38.5"</u> Long. <u>W85d49'21.6"</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>6</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>1329.00</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>6</u>					
c) Total net area of flood openings in A8.b <u>768.00</u> sq in					
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>0.00</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>					
c) Total net area of flood openings in A9.b <u>0.00</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B -- FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number UNINCORPORATED BAY COUNTY 120004			B2. County Name BAY		B3. State Florida
B4. Map/Panel Number 12005C0190	B5. Suffix H	B6. FIRM Index Date 06-02-2009	B7. FIRM Panel Effective/ Revised Date 06-02-2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 9.0
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 checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

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. 7715 MAGNOLIA POND TRL			Policy Number:
City PANAMA CITY BEACH	State Florida	ZIP Code 32413	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: L-176 Vertical Datum: NAVD88

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.

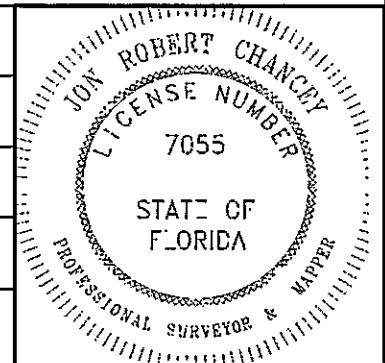
- | | | | |
|---|------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) | 8.7 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor | 20.4 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab) | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building
(Describe type of equipment and location in Comments) | 11.6 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | 5.9 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | 6.8 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support | N/A | <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 JON ROBERT CHANCEY		License Number LS#7055	
Title PROFESSIONAL SURVEYOR AND MAPPER			
Company Name MTS SURVEYING & MAPPING			
Address 4619 ASHLAND WAY			
City PANAMA CITY	State Florida	ZIP Code 32404	
Signature JON R. CHANCY	Date 01-11-2023	Telephone (850) 704-5775	Ext.



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)
THE AIR CONDITIONING UNIT IS ON A PAD OUTSIDE
THE VENTS ARE CRAWL SPACE DOOR SYSTEM MODEL #CSBA816

ELEVATION CERTIFICATE

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7715 MAGNOLIA POND TRL			Policy Number:
City PANAMA CITY BEACH	State Florida	ZIP Code 32413	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. 1660-0008
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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7715 MAGNOLIA POND TRL			Policy Number:
City PANAMA CITY BEACH	State Florida	ZIP Code 32413	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	G5. Date Permit Issued	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>
Community Name <i>Bay County</i>	Telephone <i>850-248-8200</i>
Signature <i>Hope M Stewart</i>	Date <i>4-21-23</i>

Comments (including type of equipment and location, per C2(e), if applicable)

*ok for C.O.
dms*

Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

ELEVATION CERTIFICATE

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.
7715 MAGNOLIA POND TRL

Policy Number:

City
PANAMA CITY BEACH

State
Florida

ZIP Code
32413

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 VIEW

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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City PANAMA CITY BEACH	State Florida	ZIP Code 32413	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 SIDE VIEW

Clear Photo Three

Photo Four

Photo Four

Photo Four Caption

Clear Photo Four



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ICC-ES Evaluation Report

ESR-3851

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Issued 09/2018

This report is subject to renewal 09/2019.

DIVISION: 08 00 00—OPENINGS

SECTION: 08 95 43—VENTS/FOUNDATION FLOOD VENTS

REPORT HOLDER:

CRAWL SPACE DOOR SYSTEMS, INC.

EVALUATION SUBJECT:

CRAWL SPACE DOOR SYSTEMS FLOOD VENT



"2014 Recipient of Prestigious Western States Seismic Policy Council (WSSPC) Award in Excellence"



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ICC-ES Evaluation Report

ESR-3851

Issued September 2018

This report is subject to renewal September 2019.

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A Subsidiary of the International Code Council®

DIVISION: 08 00 00—OPENINGS

Section: 08 95 43—Vents/Foundation Flood Vents

REPORT HOLDER:

CRAWL SPACE DOOR SYSTEMS, INC.

EVALUATION SUBJECT:

CRAWL SPACE DOOR SYSTEMS FLOOD VENT

1.0 EVALUATION SCOPE

Compliance with the following codes:

- 2018 and 2015 *International Building Code*®
- 2018 and 2015 *International Residential Code*®

Properties evaluated:

- Physical operation
- Water flow
- Weathering

2.0 USES

Crawl Space Door Systems flood vent is used to provide for the equalization of hydrostatic flood forces on exterior walls.

3.0 DESCRIPTION

3.1 General:

Crawl Space Door Systems flood vent is an engineered mechanically operated flood vent. Upon contact with flood water, the flood vent automatically opens and allows flood water to enter and exit enclosed areas. The vents are constructed of general purpose ABS SP-9010 plastic. The vent has a faux louver with either a solid plastic plate or wire mesh attached to the back of the louver. The louver is dislodged from the vent upon contact with flood waters. See Figure 1 for illustrations of the flood vent.

3.2 Engineered Opening:

The Crawl Space Door Systems static flood vent complies with the design principle noted in Section 2.7.2.2 of ASCE/SEI 24 for a rate of rise and fall of 5 feet per hour (0.423 mm/s). In order to comply with the engineered opening requirement of ASCE/SEI 24-14, the flood vent must be installed in accordance with Section 4.0 of this report.

4.0 DESIGN AND INSTALLATION

The Crawl Space Door Systems flood vent is designed to be installed into walls or doors of existing or new

construction from the exterior side. Installation of the vent must be in accordance with the manufacturer's instructions, the applicable code and this report. In order to comply with the engineered opening design principle noted in Sections 2.7.2.2 and 2.7.3 of ASCE/SEI 24-14, the vent must be installed as follows:

- With a minimum of two openings; one on different sides of each enclosed area.
- With a minimum of one vent for the square footage of enclosed area noted in Table 1.
- Below the base flood elevation.
- With the bottom of the vent located a maximum of 12 inches (305 mm) above grade.

5.0 CONDITIONS OF USE

The Crawl Space Door Systems flood vent described in this report complies with, or is a suitable alternative to what is specified in, those codes listed in Section 1.0 of this report, subject to the following conditions:

- 5.1 The Crawl Space Door Systems flood vent must be installed in accordance with this report, the applicable code and the manufacturer's published installation instructions. In the event of a conflict, the instructions in this report govern.
- 5.2 Use of Crawl Space Door Systems flood vent as under-floor space ventilation is outside the scope of this report.

6.0 EVIDENCE SUBMITTED

Data in accordance with the ICC-ES Acceptance Criteria for Mechanically Operated Flood Vents (AC364), dated August 2015 (Editorially revised October 2017).

7.0 IDENTIFICATION

7.1 The Crawl Space Door Systems flood vent recognized in this report must be identified by a label bearing the manufacturer's name (Crawl Space Door Systems), the model number, and the evaluation report number (ESR-3851).

7.2 The report holder's contact information is the following:

CRAWL SPACE DOOR SYSTEMS, INC.
3669 SEA GULL BLUFF DRIVE
VIRGINIA BEACH, VIRGINIA 23455
(757) 363-0005
www.crawlspacedoors.com

TABLE 1—CRAWL SPACE DOOR SYSTEMS FLOOD VENT

MODEL	OVERALL VENT SIZE (Width x Height x Depth) (in)	ROUGH OPENING SIZE (Width x Height) (In)	ENCLOSED AREA COVERAGE (ft ²)
CSBA816	18 ¹ / ₄ x 10 ¹ / ₂ x 1 ³ / ₄	16 x 8 ¹ / ₄	305

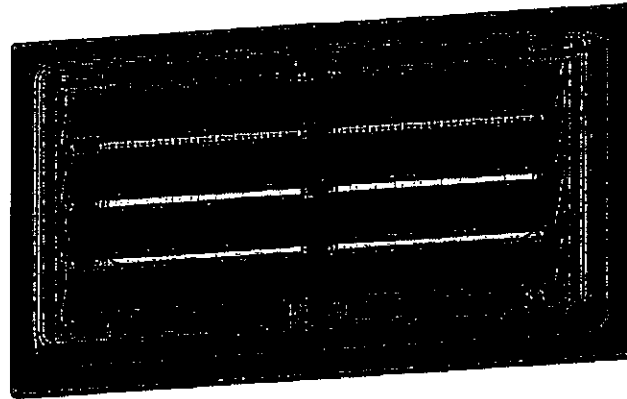


FIGURE 1—CRAWL SPACE DOOR SYSTEMS FLOOD VENT

ICC-ES Evaluation Report

ESR-3851 FBC Supplement

Issued September 2018

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DIVISION: 08 00 00—OPENINGS

Section: 08 95 43—Vents/Foundation Flood Vents

REPORT HOLDER:

CRAWL SPACE DOOR SYSTEMS, INC.

EVALUATION SUBJECT:

CRAWL SPACE DOOR SYSTEMS FLOOD VENT

1.0 REPORT PURPOSE AND SCOPE

Purpose:

The purpose of this evaluation report supplement is to indicate that Crawl Space Door Systems flood vent, recognized in ICC-ES master evaluation report ESR-3851, has also been evaluated for compliance with the codes noted below.

Applicable code editions:

- 2017 *Florida Building Code—Building*
- 2017 *Florida Building Code—Residential*

2.0 CONCLUSIONS

The Crawl Space Door Systems flood vent, described in Sections 2.0 through 7.0 of the master evaluation report ESR-3851, complies with the *Florida Building Code—Building* and *Florida Building Code—Residential*, provided the design and installation are in accordance with the 2015 *International Building Code*® provisions noted in the master report.

Use of the Crawl Space Door Systems flood vent has also been found to be in compliance with the High-Velocity Hurricane Zone provisions of the 2017 *Florida Building Code—Building* and *Florida Building Code—Residential*.

For products falling under Florida Rule 9N-3, verification that the report holder's quality assurance program is audited by a quality assurance entity approved by the Florida Building Commission for the type of inspections being conducted is the responsibility of an approved validation entity (or the code official when the report holder does not possess an approval by the Commission).

This supplement expires concurrently with the master report, issued September 2018.