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 – PROPERTY INFORMATION					FOR INSUR	ANCE COMPANY USE	
A1. Building Owner's Name TRULAND HOMES -GCE 2304-1847						Policy Numi	oer:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 869 BREAKFAST POINT BOULEVARD					Company N	AIC Number:	
			State Florida			ZIP Code 32407	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 112 BREAKFAST POINT EAST PHASE 1-B							
A4. Building Use (e.g., Residential	l, Non-Residential, A	ddition,	Accessory,	etc.) F	RESIDEN	ΓIAL	
A5. Latitude/Longitude: Lat. 30.20	04702 <u></u> ι	ong. 85	5.796288	F	lorizontal	Datum: 🔲 NAD 1	927 🗷 NAD 1983
A6. Attach at least 2 photographs	of the building if the	Certific	ate is being u	sed to ob	otain flood	l insurance.	
A7. Building Diagram Number	1B						
A8. For a building with a crawlspace	ce or enclosure(s):						
 a) Square footage of crawlspa 	ace or enclosure(s)			N/A	sq ft		
b) Number of permanent flood	openings in the cra	wlspace	or enclosure	e(s) within	n 1.0 foot	above adjacent gra	de N/A
c) Total net area of flood open	nings in A8.b		N/A sqin	,			
d) Engineered flood openings	? ∐Yes ≭ No)					
A9. For a building with an attached garage:							
 a) Square footage of attached 	a) Square footage of attached garage500.00 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?							
	TION B – FLOOD IN	ISURA			RM) INF	ORMATION	
B1. NFIP Community Name & Community Number B2. County Name B3. State BAY COUNTY 120004 BAY Florida							
B4. Map/Panel B5. Suffix B	6. FIRM Index Date	Effe	M Panel	B8. Floo Zone(s)		B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
12005C0308 H 04	6-02-2009	06-02-2	vised Date 2009	Α		9.0	
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							
Designation Date:	Designation Date: CBRS OPA						

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IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or 869 BREAKFAST POINT BOULEVARD	Policy Number:					
City Stat PANAMA CITY BEACH Flor		Code 07	Company NAIC Number			
SECTION C – BUILDING ELE	EVATION INFORMAT	TION (SURVEY RE	EQUIRED)			
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 build Benchmark Utilized: BG3661	ling diagram specified Vertical Datum:		to Rico only, enter meters.			
Indicate elevation datum used for the elevations in ite ☐ NGVD 1929 ☑ NAVD 1988 ☐ Other/S		w.				
Datum used for building elevations must be the same	e as that used for the E	BFE.	Check the measurement used.			
a) Top of bottom floor (including basement, crawlsp.	ace, or enclosure floor	١	12.4 x feet meters			
b) Top of the next higher floor		-	N/A ☐ feet ☐ meters			
c) Bottom of the lowest horizontal structural membe	r (V Zones only)		N/A ☐ feet ☐ meters			
d) Attached garage (top of slab)	i (v Zones omy)		12.0 🗷 feet 🔲 meters			
e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Com	ricing the building ments)		12.0 🗷 feet 🔲 meters			
f) Lowest adjacent (finished) grade next to building	•		10.6 🗷 feet 🔲 meters			
g) Highest adjacent (finished) grade next to building	• •		10.6 x feet meters			
h) Lowest adjacent grade at lowest elevation of dec structural support	•					
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?						
Certifier's Name J.BRETT ORRELL	License Number 6913		WHITE TTO STATE			
Title			- Juli BRE COM PACIFIC			
VICE-PRESIDENT			Couse Mombe			
Company Name POLYSURVEYING OF MOBILE			LS6913			
Address 5588 JACKSON ROAD			FLORIDA FLORIDA			
City MOBILE	State Alabama	ZIP Code 36619	LS6913 STATE OF FLORIDA STATE OF FLORIDA STATE OF FLORIDA			
Signature J. Brett Orrell J. Brett Orrell J. Brett Orrell	Date 05-03-2023	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) c2e is top of a/c support						

ELEVATION CERTIFICATE

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MP	ORTANT: In these spaces, copy the correspondi	FOR INSURANCE COMPANY USE					
86	lding Street Address (including Apt., Unit, Suite, and 9 BREAKFAST POINT BOULEVARD	Policy Number:					
City PAN			Code 407	Company NAIC Number			
	SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)						
con	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.	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).						
	Top of bottom floor (including basement, crawlspace, or enclosure) is	1.8	x feet meter	s 🗷 above or 🗌 below the HAG.			
	 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 	1.8	x feet ☐ meter	s 🗷 above or 🗌 below the LAG.			
E2.	For Building Diagrams 6–9 with permanent flood of the next higher floor (elevation C2.b in						
= 2	the diagrams) of the building is	N/A					
	Attached garage (top of slab) is Top of platform of machinery and/or equipment		- Histor Himster				
	servicing the building is	1.4	. ⊟.оог ⊟ шогог				
⊏0.	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	IER (OR OWNER'S RE	PRESENTATIVE) CE	ERTIFICATION			
The com	property owner or owner's authorized representativn munity-issued BFE) or Zone AO must sign here. The	re who completes Section te statements in Section	ns A, B, and E for Zo s A, B, and E are cor	ne A (without a FEMA-issued or rect to the best of my knowledge.			
Prop	perty Owner or Owner's Authorized Representative's	s Name					
Add	iress	City	St	ate ZIP Code			
Sig	nature	Date	Те	lephone			
Comments							
				Check here if attachments.			

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IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Su 869 BREAKFAST POINT BOULEVARD	Policy Number:				
City PANAMA CITY BEACH		ZIP Code 32407	Company NAIC Number		
SECTIO	N G - COMMUNITY INFORM	MATION (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 or Zone AO.	on E for a building located in 2	Zone A (without a FEM/	A-issued or community-issued BFE)		
G3. The following information (Items G4–C	G10) is provided for communi	ty floodplain managem	ent purposes.		
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued		
KB22 - 02143	10-4-22				
G7. This permit has been issued for:	New Construction Subst	antial Improvement			
G8. Elevation of as-built lowest floor (including of the building:	basement)	feet	meters Datum		
G9. BFE or (in Zone AO) depth of flooding at the building site: feet meters					
G10. Community's design flood elevation:		feet	meters Datum		
Local Official's Name Hope m Stewart Planner					
Community Name	Telep	phone			
Beg Count		853-248-	8230		
Signature) Date 6/9/23					
Comments (including type of equipment and local	ation, per C2(e), if applicable)			
the A	Es.				
			☐ Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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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 DATED 5-01-2023

Clear Photo One



Photo Two

Photo Two Caption LEFT SIDE VIEW DATED 5-01-2023

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, copy t	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., 869 BREAKFAST POINT BOULEVAR	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 RIGHT SIDE VIEW DATED 05/01/2023

Clear Photo Three



Photo Four

Photo Four Caption REAR VIEW DATED 5-01-2023

Clear Photo Four