

**ELEVATION CERTIFICATE**

**IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19**

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: <u>TWO JUNES LLC</u>	Policy Number: _____
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>4819 SPYGLASS DRIVE A (EAST RESIDENCE)</u>	Company NAIC Number: _____
City: <u>PANAMA CITY BEACH</u> State: <u>FL</u> ZIP Code: <u>32408</u>	
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: <u>PARCEL ID: #31700-010-000, (PORTION OF LOT 1, BLOCK 27 OF TREASURE ISLAND SECTION 1, Pb 8, Pg 63)</u>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): <u>NON-RESIDENTIAL</u>	
A5. Latitude/Longitude: Lat. <u>30-08-18.1 N</u> Long. <u>85-45-05.4 W</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 <input checked="" type="checkbox"/> WGS 84	
A6. Attach at least two and when possible four clear photographs (one for each side) of the building (see Form pages 7 and 8).	
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>0.00</u> sq. ft.	
b) Is there at least one permanent flood opening on two different sides of each enclosed area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>0</u> Engineered flood openings: <u>0</u>	
d) Total net open area of non-engineered flood openings in A8.c: <u>0.00</u> sq. in.	
e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructions): <u>0.00</u> sq. ft.	
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): <u>0.00</u> sq. ft.	
A9. For a building with an attached garage:	
a) Square footage of attached garage: <u>0.00</u> sq. ft.	
b) Is there at least one permanent flood opening on two different sides of the attached garage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>0</u> Engineered flood openings: <u>0</u>	
d) Total net open area of non-engineered flood openings in A9.c: <u>0.00</u> sq. in.	
e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructions): <u>0.00</u> sq. ft.	
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): <u>0.00</u> sq. ft.	
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	
B1.a. NFIP Community Name: <u>PANAMA CITY BEACH</u> B1.b. NFIP Community Identification Number: <u>120013</u>	
B2. County Name: <u>BAY COUNTY</u> B3. State: <u>FL</u> B4. Map/Panel No.: <u>12005C 0282</u> B5. Suffix: <u>H</u>	
B6. FIRM Index Date: <u>06/02/2009</u> B7. FIRM Panel Effective/Revised Date: <u>06/02/2009</u>	
B8. Flood Zone(s): <u>"VE"</u> B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): <u>13.0</u>	
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: <input type="checkbox"/> FIS <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other: _____	
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	
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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FOR INSURANCE COMPANY USE

Policy Number: \_\_\_\_\_

City: PANAMA CITY BEACH State: FL ZIP Code: 32408

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, AO, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO, A99. Complete Items C2.a–h below according to the Building Diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: MONUMENT "PARK" Vertical Datum: NAVD 1988

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929  NAVD 1988  Other: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE. Conversion factor used?  Yes  No

If Yes, describe the source of the conversion factor in the Section D Comments area.

Check the measurement used:

a) Top of bottom floor (including basement, crawspace, or enclosure floor): 18.90  feet  meters

b) Top of the next higher floor (see Instructions): 30.85  feet  meters

c) Bottom of the lowest horizontal structural member (see Instructions): 17.60  feet  meters

d) Attached garage (top of slab): 0.00  feet  meters

e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area): 15.95  feet  meters

f) Lowest Adjacent Grade (LAG) next to building:  Natural  Finished 8.93  feet  meters

g) Highest Adjacent Grade (HAG) next to building:  Natural  Finished 16.64  feet  meters

h) Finished LAG at lowest elevation of attached deck or stairs, including structural support: 6.88  feet  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 state 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 and describe in the Comments area.

Certifier's Name: JON R. CHANCEY License Number: 7055

Title: PROFESSIONAL SURVEYOR AND MAPPER

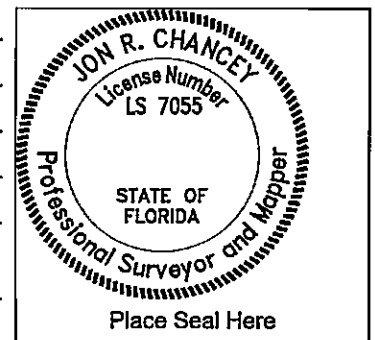
Company Name: POOLE ENGINEERING AND SURVEYING, Inc.

Address: 17320 PANAMA CITY BEACH PARKWAY

City: PANAMA CITY BEACH State: FL ZIP Code: 32413

Signature: Jon R. Chancey Digitally signed by Jon R. Chancey Date: 2024.02.13 15:10:40 -06'00' Date: 02/13/2024

Telephone: (850) 386-5117 Ext.: \_\_\_\_\_ Email: jon@poole-eng.com



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

Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and description of any attachments):  
ELEVATION SHOWN FOR C2.e WAS OBTAINED AT THE TOP OF WOOD AC PAD AT THE RIGHT SIDE OF BUILDING  
ELEVATION SHOWN FOR C2.h WAS OBTAINED AT END OF BOARDWALK TO TO BEACH

0 OR 0.00 = NOT AVAILABLE

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## SECTION E – BUILDING MEASUREMENT INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO, ZONE AR/AO, AND ZONE A (WITHOUT BFE)

For Zones AO, AR/AO, and A (without BFE), complete Items E1–E5. For Items E1–E4, use natural grade, if available. If the Certificate is intended to support a Letter of Map Change request, complete Sections A, B, and C. Check the measurement used. In Puerto Rico only, enter meters.

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

E1. Provide measurements (C.2.a in applicable Building Diagram) for the following and check the appropriate boxes to show whether the measurement is above or below the natural HAG and the LAG.

a) Top of bottom floor (including basement, crawlspace, or enclosure) is: \_\_\_\_\_ 0.00  feet  meters  above or  below the HAG.

b) Top of bottom floor (including basement, crawlspace, or enclosure) is: \_\_\_\_\_ 0.00  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 (C2.b in applicable Building Diagram) of the building is: \_\_\_\_\_ 0.00  feet  meters  above or  below the HAG.

E3. Attached garage (top of slab) is: \_\_\_\_\_ 0.00  feet  meters  above or  below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is: \_\_\_\_\_ 0.00  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 AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without BFE) or Zone AO must sign here. *The statements in Sections A, B, and E are correct to the best of my knowledge*

Check here if attachments and describe in the Comments area.

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone: \_\_\_\_\_ Ext.: \_\_\_\_\_ Email: \_\_\_\_\_

Comments: \_\_\_\_\_

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City: PANAMA CITY BEACH State: FL ZIP Code: 32408	Policy Number: _____
	Company NAIC Number: _____

## SECTION G – COMMUNITY INFORMATION (RECOMMENDED FOR COMMUNITY OFFICIAL COMPLETION)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Section A, B, C, E, G, or H of this Elevation Certificate. Complete the applicable item(s) and sign below when:

- 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 state law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.a.  A local official completed Section E for a building located in Zone A (without a BFE), Zone AO, or Zone AR/AO, or when item E5 is completed for a building located in Zone AO.
- G2.b.  A local official completed Section H for insurance purposes.
- G3.  In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E and H.
- G4.  The following information (Items G5–G11) is provided for community floodplain management purposes.
- G5. Permit Number: CB22-05400 G6. Date Permit Issued: 5-8-23
- G7. Date Certificate of Compliance/Occupancy Issued: \_\_\_\_\_
- G8. This permit has been issued for:  New Construction  Substantial Improvement
- G9.a. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_  feet  meters Datum: \_\_\_\_\_
- G9.b. Elevation of bottom of as-built lowest horizontal structural member: \_\_\_\_\_  feet  meters Datum: \_\_\_\_\_
- G10.a. BFE (or depth in Zone AO) of flooding at the building site: \_\_\_\_\_  feet  meters Datum: \_\_\_\_\_
- G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member: \_\_\_\_\_  feet  meters Datum: \_\_\_\_\_
- G11. Variance issued?  Yes  No If yes, attach documentation and describe in the Comments area.

The local official who provides information in Section G must sign here. I have completed the information in Section G and certify that it is correct to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.

Local Official's Name: Tha M Stewart Title: Planner

NFIP Community Name: Bay County

Telephone: 850.248.8200 Ext.: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Signature: Tha M Stewart Date: 2-2024

Comments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information in Sections A, B, D, E, or H):

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## SECTION H – BUILDING'S FIRST FLOOR HEIGHT INFORMATION FOR ALL ZONES (SURVEY NOT REQUIRED) (FOR INSURANCE PURPOSES ONLY)

The property owner, owner's authorized representative, or local floodplain management official may complete Section H for all flood zones to determine the building's first floor height for insurance purposes. Sections A, B, and I must also be completed. Enter heights to the nearest tenth of a foot (nearest tenth of a meter in Puerto Rico). *Reference the Foundation Type Diagrams (at the end of Section H Instructions) and the appropriate Building Diagrams (at the end of Section I Instructions) to complete this section.*

H1. Provide the height of the top of the floor (as indicated in Foundation Type Diagrams) above the Lowest Adjacent Grade (LAG):

a) For Building Diagrams 1A, 1B, 3, and 5–9. Top of bottom \_\_\_\_\_  feet  meters  above the LAG floor (include above-grade floors only for buildings with subgrade crawlspaces or enclosure floors) is:

b) For Building Diagrams 2A, 2B, 4, and 6–9. Top of next \_\_\_\_\_  feet  meters  above the LAG higher floor (i.e., the floor above basement, crawlspace, or enclosure floor) is:

H2. Is all Machinery and Equipment servicing the building (as listed in Item H2 instructions) elevated to or above the floor indicated by the H2 arrow (shown in the Foundation Type Diagrams at end of Section H instructions) for the appropriate Building Diagram?

Yes  No

## SECTION I – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and H must sign here. *The statements in Sections A, B, and H are correct to the best of my knowledge. Note: If the local floodplain management official completed Section H, they should indicate in Item G2.b and sign Section G.*

Check here if attachments are provided (including required photos) and describe each attachment in the Comments area.

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone: \_\_\_\_\_ Ext.: \_\_\_\_\_ Email: \_\_\_\_\_

Comments: \_\_\_\_\_



**ELEVATION CERTIFICATE**  
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**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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City: PANAMA CITY BEACH State: FL ZIP Code: 32408

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Photo One

Photo One Caption: FRONT OF BUILDING

Clear Photo One



Photo Two

Photo Two Caption: REAR OF BUILDING

Clear Photo Two

**ELEVATION CERTIFICATE**  
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**BUILDING PHOTOGRAPHS**

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:  
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Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Photo Three

Photo Three Caption: LEFT SIDE OF BUILDING

Clear Photo Three



Photo Four

Photo Four Caption: RIGHT SIDE OF BUILDING

Clear Photo Four



Note: The V Zone design certificate is not a substitute for the NFIP Elevation Certificate (see Fact Sheet No. 1.4, *Lowest Floor Elevation*), which is required to certify as-built elevations needed for flood insurance rating.

### V ZONE DESIGN CERTIFICATE

Name Two Jones, LLC Policy Number (Insurance Co. Use) \_\_\_\_\_  
 Building Address of Other Description 4819 Spynglass Drive A (East residence)  
 Permit No. CB22-00400 City Panama City Beach State FL Zip Code 32408

#### SECTION I: Flood Insurance Rate Map (FIRM) Information

Community No. 120013 Panel No. 12005C Suffix H FIRM Date 6-2-09 FIRM Zone(s) VE-13

#### SECTION II: Elevation Information Used for Design

[NOTE: This section documents the elevations/depths used or specified in the design – it does not document surveyed elevations and is not equivalent to the as-built elevations required to be submitted during or after construction.]

- |  |                    |
|--|--------------------|
| 1. FIRM Base Flood Elevation (BFE) .....                                     | <u>13</u> feet*    |
| 2. Community's Design Flood Elevation (DFE) .....                            | <u>14</u> feet*    |
| 3. Elevation of the Bottom of Lowest Horizontal Structure Member .....       | <u>7.6</u> feet*   |
| 4. Elevation of Lowest Adjacent Grade .....                                  | <u>10.36</u> feet* |
| 5. Depth of Anticipated Scour/Erosion used for Foundation Design .....       | <u>4</u> feet      |
| 6. Embedment Depth of Piling of Foundation Below Lowest Adjacent Grade ..... | <u>30</u> feet     |

\* Indicate elevation datum used in 1-4:  NGVD29  NAVD88  Other \_\_\_\_\_

#### SECTION III: V Zone Design Certification Statement

I certify that: (1) I have developed or reviewed the structural design, plans, and specifications for construction of the above-referenced building and (2) that the design and methods of construction specified to be used are in accordance with accepted standards of practice\*\* for meeting the following provisions:

- The bottom of the lowest horizontal structural member of the lowest floor (excluding piles and columns) is elevated to or above the BFE.
- The pile and column foundation and structure attached thereto is anchored to resist flotation, collapse, and lateral movement due to the effects of the wind and water loads acting simultaneously on all building components. Water loading values used are those associated with the base flood\*\*\*. Wind loading values used are those required by the applicable State or local building code. The potential for scour and erosion at the foundation has been anticipated for conditions associated with the base flood, including wave action.

#### SECTION IV: Breakaway Wall Design Certification Statement

[NOTE: This section must be certified by a registered engineer or architect when breakaway walls are designed to have a resistance of more than 20 psf (0.96 kN/m<sup>2</sup>) determined using allowable stress design]

I certify that: (1) I have developed or reviewed the structural design, plans, and specifications for construction of breakaway walls to be constructed under the above-referenced building and (2) that the design and methods of construction specified to be used are in accordance with accepted standards of practice\*\* for meeting the following provisions:

- Breakaway wall collapse shall result from a water load less than that which would occur during the base flood\*\*\*.
- The elevated portion of the building and supporting foundation system shall not be subject to collapse, displacement, or other structural damage due to the effects of wind and water loads acting simultaneously on all building components (see Section III).

#### SECTION V: Certification and Seal

This certification is to be signed and sealed by a registered professional engineer or architect authorized by law to certify structural designs. I certify the V Zone Design Certification Statement (Section III) and  the Breakaway Wall Design Certification Statement (Section IV, check if applicable).

Certifier's Name Derek Gardner License Number 78430  
 Title Engineer Company Name Coastline Engineering  
 Address 1905 Cayley Ave.  
 City PCB State FL Zip Code 32407  
 Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone 850-230-8812

