### U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB Control No. 1660-0008 Expiration Date: 06/30/2026

# 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: TWO JUNES LLC	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 4819 SPYGLASS DRIVE B (WEST RESIDENCE)	Company NAIC Number:
City: PANAMA CITY BEACH State: FL	ZIP Code: <u>32408</u>
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel NunPARCEL ID: #31700-020-000, (PORTION OF LOT 1, BLOCK 27 OF TREASURE ISLAND	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): NON-RESIDEN	NTIAL
A5. Latitude/Longitude: Lat. 30-08-18.1 N Long. 85-45-05.4 W Horizontal Datum: N	AD 1927 NAD 1983 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:5	
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s): 0.00 sq. ft.	
b) Is there at least one permanent flood opening on two different sides of each enclosed area?	☐ Yes 🗷 No 🗌 N/A
c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot Non-engineered flood openings: 0 Engineered flood openings: 0	above adjacent grade:
d) Total net open area of non-engineered flood openings in A8.c: 0.00 sq. in.	
e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instruction	ons): 0.00 sq. ft.
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): 0.00 sq. ft.	
A9. For a building with an attached garage:	
a) Square footage of attached garage: 0.00 sq. ft.	
b) Is there at least one permanent flood opening on two different sides of the attached garage?	☐ Yes 🗷 No 🗌 N/A
c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjated Non-engineered flood openings: 0 Engineered flood openings: 0	acent grade:
d) Total net open area of non-engineered flood openings in A9.c: 0.00 sq. in.	
e) Total rated area of engineered flood openings in A9.c (attach documentation - see Instruction	ons); one sq. ft.
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): sq. ft.	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFOR	RMATION
B1.a. NFIP Community Name: PANAMA CITY BEACH B1.b. NFIP Community Idea	ntification Number: 120013
B2. County Name: BAY COUNTY B3. State: FL B4. Map/Panel No.: 1	2005C 0282 B5. Suffix: H
B6. FIRM Index Date: 06/02/2009 B7. FIRM Panel Effective/Revised Date: 06/02/2009	09
B8. Flood Zone(s): "VE" B9. Base Flood Elevation(s) (BFE) (Zone AO, use E	Base Flood Depth): 13.0
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9:  Temperature FIS FIRM Community Determined Other:	
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 Prote Designation Date: CBRS OPA	ected Area (OPA)? ☐ Yes 🗷 No
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? Yes	No

Bullding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:	FOR INSURANCE COMPANY USE			
4819 SPYGLASS DRIVE B (WEST RESIDENCE)	Policy Number:			
City: PANAMA CITY BEACH State: FL ZIP Code: 32408	Company NAIC Number:			
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY F	REQUIRED)			
C1. Building elevations are based on: Construction Drawings* Building Under Construction*A new Elevation Certificate will be required when construction of the building is complete.	on* Finished Construction			
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 X NAVD 1988 C Other:				
Datum used for building elevations must be the same as that used for the BFE. Conversion factor use If Yes, describe the source of the conversion factor in the Section D Comments area.	ed? Yes No Check the measurement used:			
a) Top of bottom floor (including basement, crawlspace, or enclosure floor): 1	8.90  feet  meters			
b) Top of the next higher floor (see Instructions):	0.86  feet  meters			
c) Bottom of the lowest horizontal structural member (see Instructions):	7.60  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):	5.96 ∡ feet ☐ meters			
f) Lowest Adjacent Grade (LAG) next to building: Natural 🗷 Finished 1	0.36 🗷 feet 🗌 meters			
g) Highest Adjacent Grade (HAG) next to building: Natural 🗷 Finished 1	6.64 🗷 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 CERTI	FICATION			
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	STREET ON R. ON ANCE STREET			
Company Name: POOLE ENGINEERING AND SURVEYING, Inc.	_ S 7055			
Address: 17320 PANAMA CITY BEACH PARKWAY	_ mm lea			
City: PANAMA CITY BEACH State: FL ZIP Code: 32413	STATE OF FLORIDA			
Signature: Jon R. Chancey Digitally signed by Jon R. Chancey Date: 02/13/2024	STATE OF FLORIDA  Place Seel Here			
Telephone: (850) 386-5117 Ext.: Email: jon@poole-eng.com	Place Seal Here			
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance ag	gent/company, and (3) building owner.			
Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and ELEVATION SHOWN FOR C2.e WAS OBTAINED AT THE TOP OF WOOD AC PAD AT TELEVATION SHOWN FOR C2.h WAS OBTAINED AT END OF BOARDWALK TO TO BEAT OF OR 0.00 = NOT AVAILABLE	THE LEFT SIDE OF BUILDING			

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:			FOR INSURANCE COMPANY USE		
4819 SPYGLASS DRIVE B (WEST RESIDENCE)				Policy Number:	
City: PANAMA CITY BEACH Sta	ty: PANAMA CITY BEACH State: FL ZIP Code: 32408		80	Company NAIC Number:	
SECTION E - BUILDING MEA FOR ZONE AO, Z					
For Zones AO, AR/AO, and A (without BFE), complete intended to support a Letter of Map Change request, center meters.					
· -	Building measurements are based on: Construction Drawings* Building Under Construction* x Finished Construction *A new Elevation Certificate will be required when construction of the building is complete.				
E1. Provide measurements (C.2.a in applicable Buildi measurement is above or below the natural HAG			nd check the a	ppropriate boxes to show whether the	
a) Top of bottom floor (including basement, crawlspace, or enclosure) is:		0.00 x feet	meters	■ above or	
b) Top of bottom floor (including basement, crawlspace, or enclosure) is:		0.00 × feet	meters	■ above or	
E2. For Building Diagrams 6–9 with permanent flood onext higher floor (C2.b in applicable	openings prov	vided in Section A	ltems 8 and/o	r 9 (see pages 1-2 of Instructions), the	
Building Diagram) of the building is:		0.00 🗷 feet	meters	above or below the HAG.	
E3. Attached garage (top of slab) is:		0.00 x 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	
E5. Zone AO only: If no flood depth number is availab floodplain management ordinance? Yes				ccordance with the community's st certify this information in Section G.	
SECTION F = PROPERTY OWNER (OF	R OWNER'S	AUTHORIZED	REPRESEN	TATIVE) CERTIFICATION	
The property owner or owner's authorized representations sign here. The statements in Sections A, B, and E are				one A (without BFE) or Zone AO must	
Check here if attachments and describe in the Cor			Ū		
Property Owner or Owner's Authorized Representative	Name:		·-		
Address:					
City:			_ State:	ZIP Code:	
Signature:		Date:			
Telephone: Ext.: E	 imail:			_	
Comments:		·			

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:		FOR INS	FOR INSURANCE COMPANY USE			
4819 SPYGLASS DRIVE B (WEST RESIDENCE)		Policy Nu	Policy Number:			
City: PANAMA CITY BEACH S	tate: FL	ZIP Code:	32408	Company NAIC Number:		
SECTION G - COMMUNITY INFORMAT	ION (RECC	MMENDED	FOR COMMUI	NITY OFFICIA	AL COMPLETION)	
The local official who is authorized by law or ordinand Section A, B, C, E, G, or H of this Elevation Certificat					ordinance can complete	
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 ins	surance purp	oses.				
G3.	ocal official d	escribes spec	ific corrections to	the informatio	n in Sections A, B, E and H.	
G4.	) is provided	for community	floodplain mana	gement purpos	ses.	
G5. Permit Number: (32) 0001	_ G6. Date	Permit Issued:	5-8-2	3		
G7. Date Certificate of Compliance/Occupancy Iss	sued:					
G8. This permit has been issued for:  New Co	nstruction	Substantial	Improvement			
G9.a. Elevation of as-built lowest floor (including babuilding:	sement) of th	ie 		meters	Datum:	
G9.b. Elevation of bottom of as-built lowest horizont member:	al structural		feet	meters	Datum:	
G10.a. BFE (or depth in Zone AO) of flooding at the b	ouilding site:		feet	meters	Datum:	
G10.b. Community's minimum elevation (or depth in requirement for the lowest floor or lowest horizonember:		ıral	☐ feet	☐ meters	Datum:	
G11. Variance issued? Yes No If yes,	attach docur	mentation 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: + M Syl	xx L	T	itle: Pla	nne		
NFIP Community Name: Ba Gust						
Telephone: ESS 248. 8750 Ext.:	Email:					
Address:						
City:			State:	ZIP C	Code:	
Signature: An Alexand		Da	ite: <u> </u>	24		
Comments (including type of equipment and location, Sections A, B, D, E, or H):	per C2.e; de	escription of ar	ny attachments;	and corrections	to specific information in	

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 4819 SPYGLASS DRIVE B (WEST RESIDENCE)			FOR INSURANCE COMPANY USE		
<del></del>	y: PANAMA CITY BEACH State: FL ZIP Code: 32408		08	Policy Number:	
		<del></del>		-	Company NAIC Number:
			R HEIGHT INFO R INSURANCE		OR ALL ZONES 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	f the floor (as ind	licated in Found	ation Type Diagra	ms) above the	Lowest Adjacent Grade (LAG):
a) For Building Diagrams 1A floor (include above-grade floosubgrade crawlspaces or enclosubgrade)	rs only for buildir			_ [ feet [	meters above the LAG
b) For Building Diagrams 24 higher floor (i.e., the floor above enclosure floor) is:				_	] meters
H2. Is all Machinery and Equipme H2 arrow (shown in the Found ☐ Yes ☐ No					ed to or above the floor indicated by the propriate Building Diagram?
SECTION I – PROPER	TY OWNER (	OR OWNER'S	AUTHORIZED	REPRESEN	TATIVE) CERTIFICATION -
The property owner or owner's authorized representative who completes Sections A, B, and H must sign here. <i>The statements in Sections A, B, and H are correct to the best of my knowledge</i> . <b>Note:</b> 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 p	·		os) and describe (	each allachme	nt in the Comments area.
Property Owner or Owner's Author	zed Representat	ive Name:			
<del>.</del>				State:	ZIP Code:
City:	<u> </u>	<del></del>		_ State	ZIF Code.
Signature:			Date:		
Telephone:	Ext.:	Email:			
Comments:				<u>-</u>	

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

See Instructions for Item A6.		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 4819 SPYGLASS DRIVE B (WEST RESIDENCE)	FOR INSURANCE COMPANY USE	
City: PANAMA CITY BEACH State: FL ZIP Code: 32408	Policy Number:  Company NAIC Number:	
Instructions: Insert below at least two and when possible four photographs showing each side of the able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the displayer and View," or "Left Side View." Photographs must show the foundation. When flood opening close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A8	late taken and "Front View," "Rear View," ngs are present, include at least one	
Photo One		
Photo One Caption: FRONT OF BUILDING	Clear Photo One	

Photo Two

Photo Two Caption: REAR OF BUILDING

Clear Photo Two

# IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19 BUILDING PHOTOGRAPHS

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:			FOR INSURANCE COMPANY USE	
4819 SPYGLASS DRIVE B (WEST R	(ESIDENCE)			Policy Number:
City: PANAMA CITY BEACH	State:	FL	ZIP Code: 32408	
				Company NAIC Number:

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

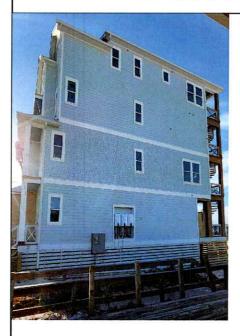


Photo Four

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					
Nar	ne Two Jones , LLC Policy Number (Insurance Co. Use)					
Bui	Iding Address of Other Description 4819 Sayglass Drive B (West residence)					
	mit No. CB22-00401 city Panaua City Beach State FL zip Code 32408					
	SECTION I: Flood Insurance Rate Map (FIRM) Information					
Cor	nmunity No. 120013 Panel No. 0282 Suffix FIRM Date 6.2.09 FIRM Zone(s) VE - 13					
	SECTION II: Elevation Information Used for Design					
[NC	TE: This section documents the elevations/depths used or specified in the design – it does not document surveyed elevations is not equivalent to the as-built elevations required to be submitted during or after construction.]					
1.	FIRM Base Flood Elevation (BFE)					
2.	Community's Design Flood Elevation (DFE)feet*					
3.	Elevation of the Bottom of Lowest Horizontal Structure Member					
4.	Elevation of Lowest Adjacent Grade					
5.	Depth of Anticipated Scour/Erosion used for Foundation Design					
6.	Embedment Depth of Pilings of Foundation Below Lowest Adjacent Grade					
	* Indicate elevation datum used in 1-4:   NGVD29  NAVD88  Other					
	SECTION III: V Zone Design Certification Statement					
refe	ertify that: (1) I have developed or reviewed the structural design, plans, and specifications for construction of the above- erenced building and (2) that the design and methods of construction specified to be used are in accordance with accepted and ards of practice** for meeting the following provisions:					
tt	The bottom of the lowest horizontal structural member of the lowest floor (excluding piles and columns) is elevated to or above ne BFE.					
to a p	• 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/m2) 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 tructural damage due to the effects of wind and water loads acting simultaneously on all building components (see Section III).					
	SECTION V: Certification and Seal					
stru	s certification is to be signed and sealed by a registered professional engineer or architect authorized by law to certify ctural designs. I certify the V Zone Design Certification Statement (Section III) and the Breakaway Wall Design tification Statement (Section IV, check if applicable).					
_	Certifier's Name Derek Gardner License Number 78430  Place School Code Code Code Code Code Code Code Code					
C	eruner's Name Per Co GARDy Considered signed and Considered signed signe					
	NO. TO A Mark the vertical control of the control o					
	C. JOHN WINDS AND					
	OFA 127 - 6817 2014.02.17 0829:09 -06'00'					
S	ignatureDateTelephone_970 200 5012					