### 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: Usa Property Pros LLC	Policy Number:						
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 6616 HARBOUR BLVD	Company NAIC Number:						
City: PANAMA CITY BEACH State: FL	ZIP Code: 32408						
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Nur Parcel ID 27338-009-320	nber:						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): RESIDENTIAL							
A5. Latitude/Longitude: Lat. N30d12'01.1" Long. W85d45'22.6" Horizontal Datum:	IAD 1927 ▼NAD 1983 □ WGS 84						
A6. Attach at least two and when possible four clear photographs (one for each side) of the building	g (see Form pages 7 and 8).						
A7. Building Diagram Number:6_							
A8. For a building with a crawlspace or enclosure(s):							
a) Square footage of crawlspace or enclosure(s): 1,493.57 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:	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): 768.00 sq. ft.						
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions):1,500.00 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 adjacent grade:  Non-engineered flood openings:  0 Engineered flood openings:  0							
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): 0.00 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: BAY COUNTY  B1.b. NFIP Community Idea	ntification Number: 120004						
B2. County Name: BAY  B3. State: FL  B4. Map/Panel No.: 1	12005C309 B5. Suffix: H						
B6. FIRM Index Date: 06/02/2009 B7. FIRM Panel Effective/Revised Date: 06/02/20	09						
B8. Flood Zone(s): AE B9. Base Flood Elevation(s) (BFE) (Zone AO, use B	Base Flood Depth): 7.0						
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9:  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:	ected Area (OPA)? Yes 🗷 No						
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)?	No						

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6616 HARBOUR BLVD	Policy Number:						
City: PANAMA CITY BEACH State: FL ZIP Code: 32408	Company NAIC Number:						
SECTION C - BUILDING ELEVATION INFORMATION (SI	JRVEY REQUIRED)						
C1. Building elevations are based on: Construction Drawings* Building Under C *A new Elevation Certificate will be required when construction of the building is compl							
C2. Elevations – Zones A1–A30, AE, AH, AO, A (with BFE), VE, V1V30, 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: NETWORK  Vertical Datum: NAVD88							
Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929 _x NAVD 1988 Other:							
Datum used for building elevations must be the same as that used for the BFE. Conversion If Yes, describe the source of the conversion factor in the Section D Comments area.	factor used? Yes X No  Check the measurement used:						
a) Top of bottom floor (including basement, crawlspace, or enclosure floor):	6.40 x feet meters						
b) Top of the next higher floor (see Instructions):	16.80 x feet meters						
c) Bottom of the lowest horizontal structural member (see Instructions):	0.00 x feet meters						
d) Attached garage (top of slab):	0.00 x 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):	10.40 🗷 feet 🗌 meters						
f) Lowest Adjacent Grade (LAG) next to building: Natural 🗷 Finished	4.80 x feet meters						
g) Highest Adjacent Grade (HAG) next to building: 🔲 Natural 🗷 Finished	5.80 x feet meters						
<ul> <li>Finished LAG at lowest elevation of attached deck or stairs, including structural support:</li> </ul>	0.00 x feet meters						
SECTION D – SURVEYOR, ENGINEER, OR ARCHITEC	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							
x Check here if attachments and describe in the Comments area.							
Certifier's Name: JON ROBERT CHANCEY  License Number: 7055							
Title: PROFESSIONAL SURVEYOR AND MAPPER							
Company Name: MTS SURVEYING AND MAPPING							
Address: 4619 ASHLAND WAY							
City: PANAMA CITY State: FL ZIP Code: 32404 FLORIDA							
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 ROBERT CHANCEY   License Number: 7055     Title: PROFESSIONAL SURVEYOR AND MAPPER     Company Name: MTS SURVEYING AND MAPPING     Address: 4619 ASHLAND WAY     City: PANAMA CITY   State: FL ZIP Code: 32404     Signature: JON R. CHANCY   Digitally signed by JON R. CHANCY     Date: 2023.12.21 10:31:25-06'00'   Date: 12/19/2023     Telephone: (850) 704-5775   Ext.:   Email: mtssurveyingmapping@gmail.com     Place Seal Here							
Telephone: (850) 704-5775 Ext.: Email: mtssurveyingmapping@gmail.com Place Seal Here							
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): 0.00 IN C2 A-H MEANS N/A THE VENTS ARE FREEDOM FLOOD VENT MODEL# FFV-1608 THE ELCTRIC PANEL IS OUTSIDE ON THE HOUSE							

Building Street Address (including Apt., Unit, St	uite, and/or Bld	lg. No.) c	or P.O. Route and Box No.:	FOR INSURANCE COMPANY USE			
6616 HARBOUR BLVD				Policy Number:			
City: PANAMA CITY BEACH	State:_	FL	ZIP Code: 32408	Company NAIC Number:			
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 applical measurement is above or below the natu				appropriate boxes to show whether the			
a) Top of bottom floor (including baseme crawlspace, or enclosure) is:	ent,		feet meters	above or below the HAG.			
b) Top of bottom floor (including baseme crawlspace, or enclosure) is:	ent, -		feet	above or below the LAG.			
E2. For Building Diagrams 6–9 with permane	nt flood openi	ngs prov	vided 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:			feet meters	above or Delow the HAG.			
E3. Attached garage (top of slab) is:	- -		feet	above or Delow the HAG.			
E4. Top of platform of machinery and/or equi servicing the building is:	pment		☐ 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 OWN	IER (OR OV	VNER'S	AUTHORIZED REPRESE	TATIVE) 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 Commer	nts area.					
Property Owner or Owner's Authorized Repre	sentative Nan	ne:					
Address:							
City:			State:	ZIP Code:			
Signature:			Date:				
Telephone: Ext.:	Email:						
Comments:							

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:	FOR INSURANCE COMPANY USE						
6616 HARBOUR BLVD	Policy Number:						
City: PANAMA CITY BEACH State: FL ZIP Code: 32408	Company NAIC Number:						
SECTION G – COMMUNITY INFORMATION (RECOMMENDED FOR COMMUN	ITY OFFICIAL COMPLETION)						
The local official who is authorized by law or ordinance to administer the community's floodplain mesocition A, B, C, E, G, or H of this Elevation Certificate. Complete the applicable item(s) and sign because the community of t							
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 E5 is completed for a building located in Zone AO.	one AO, or Zone AR/AO, or when item						
G2.b. A local official completed Section H for insurance purposes.							
G3.	he information in Sections A, B, E and H.						
G4.	ement purposes.						
G5. Permit Number: 4 22 - 02330 G6. Date Permit Issued: 1/15/202							
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:	meters Datum:						
G9.b. Elevation of bottom of as-built lowest horizontal structural member:	meters Datum:						
G10.a. BFE (or depth in Zone AO) of flooding at the building site:	meters Datum:						
G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member:	meters Datum:						
G11. Variance issued?  Yes  If yes, attach documentation and describe in the Co							
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.							
NFIP Community Name:							
Telephone: Ext.: Email:							
Address:							
City: State:	ZIP Code:						
Signature: Date:							
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):							
Of for fingl & Co.							

Building Street Address (including Apt 6616 HARBOUR BLVD	, Unit, Suite, a	nd/or Bld	g. No.) c	r P.O. Route and Box I	No.:		SURANCE COMPANY USE
City: PANAMA CITY BEACH		State:	FL	ZIP Code: 32408		Policy No	umber: y NAIC Number:
SECTION U	DIM DINGS	riper		R HEIGHT INFORM	TON E		
SECTION A -	VEY NOT R	EQUIRE	ELUU ED) (FO	R HEIGHT INFORM R INSURANCE PU	IRPOSES	ONLY)	20NE3
The property owner, owner's authorize to determine the building's first floor nearest tenth of a foot (nearest tenth <i>Instructions</i> ) and the appropriate in	height for insul of a meter in l	rance pu Puerto R	rposes. lico). <i>Re</i>	Sections A, B, and I m	nust also b <i>ion Type L</i>	e complete Diagrams	ed. Enter heights to the (at the end of Section H
H1. Provide the height of the top of	the floor (as in	dicated in	n Found	ation Type Diagrams)	above the	Lowest A	djacent Grade (LAG):
<ul> <li>a) For Building Diagrams 1A, floor (include above-grade floors subgrade crawlspaces or enclos</li> </ul>	s only for buildi				] feet [	] meters	above the LAG
<ul> <li>b) For Building Diagrams 2A, higher floor (i.e., the floor above enclosure floor) is:</li> </ul>					feet [	] meters	above the LAG
H2. Is all Machinery and Equipment H2 arrow (shown in the Foundat  Yes No							
SECTION I - PROPERT	ry owner (	OR OW	NER'S	AUTHORIZED REI	PRESEN	TATIVE)	CERTIFICATION
The property owner or owner's author A, B, and H are correct to the best of indicate in Item G2.b and sign Section	f my knowledge						
☐ Check here if attachments are pro	ovided (includi	ng requir	ed phot	os) and describe each	attachme	nt in the C	omments area.
Property Owner or Owner's Authorize	ed Representa	ative Nan	ne:				
Address:							
City:				SI	tate:	ZIP	Code:
Signature:				Date:			
Telephone:	Ext.:	_ Email:					
Comments:							
•							

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

See Instructions for Item A6.

Building Street Address (including Apt., Uni	FOR INSURANCE COMPANY USE			
6616 HARBOUR BLVD	Policy Number:			
City: PANAMA CITY BEACH	State: _	FL	ZIP Code: <u>32408</u>	Company NAIC Number:

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 VIEW



Photo Two

Photo Two Caption: SIDE VIEW

Clear Photo Two

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

Continuation Page

Building Street Address (including Apt., Unit	FOR INSURANCE COMPANY USE			
6616 HARBOUR BLVD City: PANAMA CITY BEACH	Policy Number:			
City. PANAMA CITT BEACT	State: _	FL	ZIP Code: <u>32408</u>	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: ELECTRIC PANEL

Clear Photo Three



Photo Four

Photo Four Caption: REAR VIEW

Clear Photo Four