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 INS	FOR INSURANCE COMPANY USE	
						Policy N	umber:	
D.R. Horton, Inc								
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Compan Box No.						y NAIC Number:		
1208 Jack Jack Dr	ive							
City				State		ZIP Cod	e	
Lynn Haven				Florida		32444		
Lot 51, Andrews P		and Block Numbers, Ta ase 2 Parcel Id			gal Description,	etc.)		
A4. Building Use	(e.g., Resider	ntial, Non-Residential,	Addition	, Accessory,	etc.) Resider	ntial		
A5. Latitude/Long	itude: Lat. 3	0°13'27.02" N	Long. 8	5°37'55.50 " W	Horizon	ital Datum: NA	D 1927 X NAD 1983	
A6. Attach at leas	t 2 photograp	hs of the building if the	e Certific	ate is being ι	used to obtain flo	ood insurance.	The second secon	
A7. Building Diagr								
		space or enclosure(s):						
25 250 200		space or enclosure(s)			sq ft			
1000							and the	
200 100000 20 20		ood openings in the cr				ot above adjacent	grade	
		penings in A8.b		sq ir	1			
d) Engineered	d flood openir	ngs? 🗌 Yes 🔲 N	No					
A9. For a building	with an attach	ned garage:						
a) Square foo	tage of attach	ned garage		416.00 sq f	t			
b) Number of	permanent flo	ood openings in the at	tached g	arage within	1.0 foot above a	djacent grade N/A	4	
c) Total net ar	ea of flood or	penings in A9.b		N/A so	in	(. 1)		
d) Engineered			le.					
d) Engineered	nood openii	ıgs? ∐Yes ⊠ N	NO					
	SE	CTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM) IN	FORMATION		
B1. NFIP Commur	nity Name & 0	Community Number		B2. County	Name		B3. State	
City of Lynn Haver	n - 120009			Bay			Florida	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/	B8. Flood Zone(s)	B9. Base Floo (Zone AO,	d Elevation(s) use Base Flood Depth)	
12005C0332	н	06-02-2009	06-02-2	vised Date 2009	AE	24.2'		
B10. Indicate the	source of the	Base Flood Elevation	(BFE) da	ata or base fl	ood depth enter	ed in Item B9:		
☐ FIS Profil	e 🕱 FIRM	Community Deter	mined [Other/Sou	rce:			
	100 01 101							
B11. Indicate elev	ation datum (used for BFE in Item B	19: ∐ N	GVD 1929	NAVD 1988	Other/Source	ce:	
B12. Is the buildin	g located in a	Coastal Barrier Reso	urces Sy	stem (CBRS) area or Otherv	vise Protected Are	a (OPA)? Yes X No	
Designation	Date:		CBRS	I OPA	Scot C. Ruthe	D. d	gitally signed by Scot C. therford, P.E., State of Florida,	
	3()	_			State of Floric	ia, License Lice	ense No. 70041	
I					No. 70041	Dat	te: 2023.03.09 08:44:47 -06'00'	

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. 1208 Jack Drive					Policy Number:				
City State	e ZIP (Code	Compa	inv	NAIC N	Number			
Lynn Haven Flori		E.U.E.U.E.U.E.U.E.U	Compe	an iy	14/10 1	turnoci			
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)									
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when co		ling Under Construng is complete.	ction*	×] Finish	ned Construction			
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), \ Complete Items C2.a–h below according to the build	ng diagram specified in	Item A7. In Puert							
Benchmark Utilized: BGS BM W290 ELEV.= 32.43'	Vertical Datum:								
Indicate elevation datum used for the elevations in ite		v.							
☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/S Datum used for building elevations must be the same		FF		_					
			Che	eck	the me	asurement used.			
 a) Top of bottom floor (including basement, crawlspa 	ace, or enclosure floor)		28.7	×	feet	meters meters			
b) Top of the next higher floor			N/A		feet	☐ meters			
c) Bottom of the lowest horizontal structural member	(V Zones only)		N/A		feet	meters			
d) Attached garage (top of slab)				X	feet	meters			
 e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Com 	icing the building ments)		28.4	×	feet	meters			
f) Lowest adjacent (finished) grade next to building	f) Lowest adjacent (finished) grade next to building (LAG)			X	feet	meters			
g) Highest adjacent (finished) grade next to building	(HAG)	-	28.0	X	feet	meters			
 h) Lowest adjacent grade at lowest elevation of decl structural support 	or stairs, including		N/A		feet	meters			
SECTION D - SURVEYOR,	ENGINEER, OR ARC	HITECT CERTIF	CATIO	N					
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 lice		⊠Yes □ No		Che	ck here	e if attachments.			
Certifier's Name Scot C. Rutherford	License Number				1				
Title	PE 70041					Digitally signed by Scot C. Rutherford, P.E., State of Florida, License No. 70041			
Civil Engineer/Vice President			, min	G. RL	THERE	DN: cn=Scot C. Rutherford, P.E., State of Florida, License No. 70041, o=This item has been			
Company Name			- Luco	No 7	A. S	electronically signed and sealed by Scot C. Rutherford, PE, on the			
SCR & Associates NWFL, Inc.			*	*);	date adjacent to the seal a using a SHA authentication code. C = ou=Printed copies of this			
Address P O Box 958			- ARRIVATION OF THE PARTY OF TH	OF ON	AL ENGIN	document are not considered signed and sealed and the SHA authentication code must be verified on any electronic copies.			
City	State	ZIP Code				email=scot@scr.us.com, c=US Date: 2023.03.09 08:44:11 -06'00' Adobe Acrobat version:			
Lynn Haven	Florida	32444				2022.003.20322			
Signature Scot C. Rutherford, P.E., State of Florida, License No. 70041 Of Florida, License No. 70041 Date: 2023.03.09 08:44:28 -06'00'	Date	Telephone (850) 265-6979	Ext.						
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.									
Copy all pages of this Elevation Certificate and all attachmen	03-02-2023 hts for (1) community off	T NE	agent/co	mpa	ny, and	d (3) building owner.			
Comments (including type of equipment and location, per	nts for (1) community off C2(e), if applicable)	icial, (2) insurance a							
Control 10 the Contro	nts for (1) community off C2(e), if applicable) evation data that has be	icial, (2) insurance a							
Comments (including type of equipment and location, per *** Engineer or Surveyor will not be responsible for any el- valid unless dated and seal on bottom right of page 2.	nts for (1) community off C2(e), if applicable) evation data that has be	icial, (2) insurance a							

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces,	copy the corresp	onding information	from Section A.	FOR IN	ISURANCE COMPANY USE
Building Street Address (includin 1208 Jack Jack Drive	ng Apt., Unit, Suite	, and/or Bldg. No.) o	r P.O. Route and Box N		Number:
City		State	ZIP Code	Compa	ny NAIC Number
Lynn Haven	we the second	Florida	32444	Обпра	ny wato number
SECTIO)N E – BUILDING FOR 2	S ELEVATION INFO ONE AO AND ZOI	DRMATION (SURVEY NE A (WITHOUT BFE)	NOT REQUI	RED)
For Zones AO and A (without BF complete Sections A, B, and C. F enter meters. E1. Provide elevation information the highest adjacent grade	For Items E1–E4, on on for the following (HAG) and the low	use natural grade, if a	available. Check the me	asurément use	ed. In Puerto Rico only,
 a) Top of bottom floor (inclu crawlspace, or enclosure 			feet	mèters 🗌 a	bove or Delow the HAG
b) Top of bottom floor (inclu crawlspace, or enclosure	uding basement, e) is			• • -	bove or Delow the LAG.
E2. For Building Diagrams 6–9		nod openings provide	·	—	** * 194 * 4 * 1
the next higher floor (elevat the diagrams) of the building	ion C2.b in		feet		bove or below the HAG.
E3. Attached garage (top of slat	b) is	·	[feet]	meters 🔲 a	bove or Delow the HAG.
E4. Top of platform of machiner servicing the building is	y and/or equipme	nt	[] feet []	meters 🗔 a	bove or Delow the HAG.
E5. Zone AO only: If no flood de floodplain management ord	epth number is avainance?	ailable, is the top of t	ne bottom floor elevated	in accordance	with the community's sinformation in Section G.
SECTION	I F – PROPERTY	OWNER (OR OWN	R'S REPRESENTATIV	E) CERTIFIC	ATION
Contract to the contract to			* * *		
The property owner or owner's a	uthorized represe	ntative who complete	es Sections A, B, and E a	or Zone A (wi	thout a FEMA-issued or
community-issued BFE) or Zone	AO must sign hê	re. The statements in	es Sections A, B, and E Sections A, B, and E a	or Zone A (wi e correct to th	thout a FEMA-issued or e best of my knowledge.
community-issued BFE) or Zone Property Owner or Owner's Auth	AO must sign hê	re. The statements in	es Sections A, B, and E Sections A, B, and E a	or Zone A (wi e correct to th	thout a FEMA-issued or e best of my knowledge.
community-issued BFE) or Zone	AO must sign hê	re. The statements in	es Sections A, B, and E as Sections A, B, and E as City	or Zone A (wi e correct to the State	thout a FEMA-issued or e best of my knowledge. ZIP Code
community-issued BFE) or Zone Property Owner or Owner's Auth	AO must sign hê	re. The statements in	Sections A, B, and E a	е correct to th	e best of my knowledge.
community-issued BFE) or Zone Property Owner or Owner's Auth Address Signature	AO must sign hê	re. The statements in	Sections A, B, and E a	e correct to the	e best of my knowledge.
Property Owner or Owner's Auth	AO must sign hê	re. The statements in	Sections A, B, and E a	e correct to the	e best of my knowledge.
community-issued BFE) or Zone Property Owner or Owner's Auth Address Signature	AO must sign hê	re. The statements in	Sections A, B, and E a	e correct to the	e best of my knowledge.
community-issued BFE) or Zone Property Owner or Owner's Auth Address Signature	AO must sign hê	re. The statements in	Sections A, B, and E a	e correct to the	e best of my knowledge.
community-issued BFE) or Zone Property Owner or Owner's Auth Address Signature	AO must sign hê	re. The statements in	Sections A, B, and E a	e correct to the	e best of my knowledge.
community-issued BFE) or Zone Property Owner or Owner's Auth Address Signature	AO must sign hê	re. The statements in	Sections A, B, and E a	e correct to the	e best of my knowledge.
community-issued BFE) or Zone Property Owner or Owner's Auth Address Signature	AO must sign hê	re. The statements in	Sections A, B, and E a	e correct to the	e best of my knowledge.
community-issued BFE) or Zone Property Owner or Owner's Auth Address Signature	AO must sign hê	re. The statements in	Sections A, B, and E a	e correct to the	e best of my knowledge.
community-issued BFE) or Zone Property Owner or Owner's Auth Address Signature	AO must sign hê	re. The statements in	Sections A, B, and E a	e correct to the	e best of my knowledge.
community-issued BFE) or Zone Property Owner or Owner's Auth Address Signature	AO must sign hê	re. The statements in	Sections A, B, and E a	e correct to the	e best of my knowledge.
community-issued BFE) or Zone Property Owner or Owner's Auth Address Signature	AO must sign hê	re. The statements in	Sections A, B, and E a	e correct to the	e best of my knowledge.
community-issued BFE) or Zone Property Owner or Owner's Auth Address Signature	AO must sign hê	re. The statements in	Sections A, B, and E a	e correct to the	e best of my knowledge.
community-issued BFE) or Zone Property Owner or Owner's Auth Address Signature	AO must sign hê	re. The statements in	Sections A, B, and E a	State Telephone	e best of my knowledge.

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Su 1208 Jack Jack Drive	Policy Number:					
City Lynn Haven	State Florida	ZIP Code 32444	Company NAIC Number			
SECTIO	N G - COMMUNITY INF	ORMATION (OPTIONAL)				
The local official who is authorized by law or ord Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, ent	Certificate, Complete the	community's floodplain ma applicable item(s) and sign	nagement ordinance can complete n below. Check the measurement			
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 locate	d in Zone A (without a FEM	A-issued or community-issued BFE)			
G3. The following information (Items G4–G10) is provided for community floodplain management purposes.						
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for: New Construction Substantial 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 t	he building site:	feel	meters Datum			
G10. Community's design flood elevation:		fee	meters Datum			
Local Official's Name		Title				
Community Name		Telephone				
Signature		Date				
Comments (including type of equipment and loc	ation, per C2(e), if applic	able)				
		•	•			
	•	•				
· · · · · · · · · · · · · · · · · · ·			•			
			Check here if attachments.			

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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IMPORTANT: In these spaces, c	FOR INSURANCE COMPANY USE		
Building Street Address (including 1208 Jack Jack Drive	Apt., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
Lynn Haven	Florida	32444	

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.



3/2/2023 **Photo One Caption** Front View Clear Photo One



FEMA Form 086-0-33 (12/19)

Photo Two Caption

Replaces all previous editions.

3/2/2023

Left View

Clear Photo Two Form Page 5 of 6

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding information from Section A.					
, Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:			
State	ZIP Code	Company NAIC Number			
Florida	32444	The state of the s			
	, Unit, Suite, and/or Bldg. No.) State	, Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. State ZIP Code			

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 Rear View 3/2/2023 Clear Photo Three



Photo Four

Photo Four Caption Right side View 3/2/2023 Clear Photo Four