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	RANCE COMPANY USE
A1. Building Owner's Name					Policy Num	ber:
D R Horton, Inc						
A2. Building Street Address (Box No.	ncluding Apt., Unit, Suit	e, and/o	r Bldg. No.) o	r P.O. Route and	Company N	AIC Number:
1220 Conolly Blvd						
City State ZIP Code						
Lynn Haven			Florida		32405	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)						
Lot 18, Andrews Plantation Phase 2 Parcel ID 11588-975-180						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential						
A5. Latitude/Longitude: Lat.	30°13'26.32" N	Long. 8	5°37'48.42" V	V Horizonta	Datum: NAD 1	1927 X NAD 1983
A6. Attach at least 2 photogra	phs of the building if the	e Certific	ate is being u	sed to obtain floor	d insurance.	
A7. Building Diagram Numbe	1A					
A8. For a building with a crav	dspace or enclosure(s):					
a) Square footage of cra	wlspace or enclosure(s)			sq ft		
b) Number of permanent	flood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ade
c) Total net area of flood	openings in A8.b		sq in	i		
d) Engineered flood ope	nings? Yes N	No				
A9. For a building with an atta	ched garage:					
a) Square footage of atta			416.00 sa ft			
2 %					acent grade N/A	
b) Number of permanent		lacrieu g		0 (5	acent grade NA	
c) Total net area of flood			N/A sq	ın		
d) Engineered flood oper	ings? ☐ Yes ⊠ N	No				
	SECTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM) INF	ORMATION	
B1. NFIP Community Name &			B2. County			B3. State
Bay County - 120004	Community Humber		Bay	rano		Florida
	T	T		Tao =: .	Tao a	
B4. Map/Panel B5. Suffit Number	B6. FIRM Index Date	Effe	ective/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	e Base Flood Depth)
12005C0332 H	06-02-2009	06-02-	vised Date 2009	AE	28.9'	
B10. Indicate the source of the	B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:					
☐ FIS Profile ☒ FIRM	Community Deter	mined [Other/Sou	rce:		
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 Reso	ources S	ystem (CBRS) area or Otherwis	e Protected Area (JPA)? ∐ Yes ⊠ No
Designation Date:		CBRS				y signed by Scot C. Rutherford, ate of Florida, License No. 70041
			0	f Florida, License	No. 70041 Date: 2	022.07.13 10:10:16 -05'00'

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY U						
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number: 1220 Conolly Blvd						
City State Lynn Haven Florid		1000000	Company NAIC	Number		
SECTION C – BUILDING ELE	VATION INFORMATI	ON (SURVEY RE	QUIRED)			
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when core	nstruction of the building	-		hed Construction		
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 building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: NGS BM W290 Elev. = 32.43' Vertical Datum: NAVD 88						
Indicate elevation datum used for the elevations in ite ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/So		1.				
Datum used for building elevations must be the same		E.	Check the m	easurement used.		
a) Top of bottom floor (including basement, crawlspa	ce, or enclosure floor)		32.3 × 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 meters		
d) Attached garage (top of slab)			31.9 × feet	meters meters		
e) Lowest elevation of machinery or equipment servi (Describe type of equipment and location in Communication in Communication)		A Company of the Comp	32.4 × feet	meters		
f) Lowest adjacent (finished) grade next to building (LAG)	4	31.3 × feet	meters meters		
g) Highest adjacent (finished) grade next to building	(HAG)		31.7 × feet	meters		
h) Lowest adjacent grade at lowest elevation of deck structural support	or stairs, including		N/A [] feet	meters		
SECTION D - SURVEYOR,	ENGINEER, OR ARC	HITECT CERTIF	ICATION			
This certification is to be signed and sealed by a land surval certify that the information on this Certificate represents statement may be punishable by fine or imprisonment und	my best efforts to inter	pret the data availa	y law to certify ele able. I understand	vation information. I that any false		
Were latitude and longitude in Section A provided by a lice		⊠Yes □ No	Check he	re if attachments.		
Certifier's Name	License Number PE 70041			Digitally signed by Scot C.		
Scot C. Rutherford Title	PE 70041		_	Rutherford, P.E., State of Florida, License No. 70041 DN: cn=Scot C. Rutherford, P.E.,		
Civil Engineer/Vice President			STATE C. RUTHER	State of Florida, License No. 70041, o=This item has been electronically signed and sealed		
Company Name			No 70041	by Scot C. Rutherford, PE, on the date adjacent to the seal a using		
SCR & Associates NWFL, Inc.			STATE OF	a SHA authentication code., ou=Printed copies of this tu = document are not considered		
Address P O Box 958			STATE OF	signed and sealed and the SHA authentication code must be verified on any electronic copies,, email=scot@scr.us.com,		
City	State	ZIP Code		c=US Date: 2022.07.13 10:09:35 -05'00 Adobe Acrobat version:		
Lynn Haven	Florida	32444		2022.001.20142		
Signature Scot C. Rutherford, P.E., State of Florida, License No. 70041 Digitally signed by Scot C. Rutherford, P.E., State of Florida, License No. 70041 Date: 2022.07.13 10:09:55 -05'00'	Date 07-11-2022	Telephone (850) 265-6979	Ext.			
Copy all pages of this Elevation Certificate and all attachmer	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 *** Engineer or Surveyor will not be responsible for any el- valid unless dated and seal on bottom right of page 2.		een changed by o	thers. *** Signatu	re on page 2 is not		
B8. and B9. LOMR CASE No.: 20-04-2912P Effective Dat C2.e) Lowest machinery taken from bottom of HVAC unit.	e August 16, 2021					

IMPORTANT: In these spaces, copy the corresponding info	mation from Section A.	FOR INSURANCE COMPANY USE.			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. 1220 Conolly Blvd		Policy Number:			
City State Lynn Haven Florida	ZIP Code 32405	Company NAIC Number			
SECTION E - BUILDING ELEVATION FOR ZONE AO AN	N INFORMATION (SURVEY N ND ZONE A (WITHOUT BFE)	OT REQUIRED)			
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. 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	ne appropriate boxes to show whe grade (LAG).	ther the elevation is above or below			
a) Top of bottom floor (including basement, crawlspace, or enclosure) is		eters above or below the HAG.			
b) Top of bottom floor (including basement, crawlspace, or enclosure) is	☐ feet ☐ m				
E2. For Building Diagrams 6-9 with permanent flood openings	provided in Section A Items 8 and	1/or 9 (see pages 1-2 of Instructions),			
the next higher floor (elevation C2.b in the diagrams) of the building is	feet ⊡ m	eters above or below the HAG.			
E3. Attached garage (top of slab) is	feet 🗌 m	eters above or below the HAG.			
E4. Top of platform of machinery and/or equipment servicing the building is	[feet] m	eters above or below the HAG.			
E5. Zone AO only: If no flood depth number is available, is the floodplain management ordinance? Yes No					
SECTION F - PROPERTY OWNER (OF	NOWNER'S REPRESENTATIVE	CERTIFICATION			
SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or					
i Tile piopelly owner of owner staumonzen representative who c		Levie of familiar at Francisco Fr			
community-issued BFE) or Zone AO must sign here. The stater	nents in Sections A, B, and E are	correct to the best of my knowledge.			
reproperty owner or owner's authorized representative who community-issued BFE) or Zone AO must sign here. The stater Property Owner or Owner's Authorized Representative's Name	ments in Sections A; B, and E are	correct to the best of my knowledge.			
community-issued BFE) or Zone AO must sign here. The stater	ments in Sections A; B, and E are	correct to the best of my knowledge. State ZIP Code			
community-issued BFE) or Zone AO must sign here. The stater Property Owner or Owner's Authorized Representative's Name Address	ments in Sections A, B, and E are	State ZIP Code			
community-issued BFE) or Zone AO must sign here. The stater Property Owner or Owner's Authorized Representative's Name Address	ments in Sections A, B, and E are	correct to the best of my knowledge.			
community-issued BFE) or Zone AO must sign here. The stater Property Owner or Owner's Authorized Representative's Name Address	ments in Sections A, B, and E are	State ZIP Code			
Community-Issued BFE) or Zone AO must sign here. The stater Property Owner or Owner's Authorized Representative's Name Address Signature	ments in Sections A, B, and E are	State ZIP Code			
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Community-Issued BFE) or Zone AO must sign here. The stater Property Owner or Owner's Authorized Representative's Name Address Signature	ments in Sections A, B, and E are	State ZIP Code			
Community-Issued BFE) or Zone AO must sign here. The stater Property Owner or Owner's Authorized Representative's Name Address Signature	ments in Sections A, B, and E are	State ZIP Code			

IMPORTANT: In these spaces, copy the corres	ponding information from	n Section A.	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite 1220 Conolly Blvd	e, and/or Bldg. No.) or P.C). Route and Box No.	Policy Number:		
City Lynn Haven	State Florida	ZIP Code 32405	Company NAIC Number		
SECTION	G - COMMUNITY INFOR	RMATION (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.		•			
G3. The following information (Items G4–G	10) is provided for commu	nity floodplain managem	ent purposes.		
G4. Permit Number	35. Date Permit Issued	G6. [Date Certificate of Compliance/Occupancy Issued		
بالمنظون والمستوال		·	· · · · · · · · · · · · · · · · · · ·		
G7. This permit has been issued for.	New Construction Sub	stantial Improvement			
G8. Elevation of as-built lowest floor (including to of the building:	pasement)	feet	meters Datum		
G9. BFE or (in Zone AO) depth of flooding at the	e building site:	feet	meters Datum		
G10. Community's design flood elevation:	-	, feet	meters Datum		
Local Official's Name	Titl	B			
Community Name	Tel	ephone			
Signature	Da	te			
Comments (including type of equipment and local	tion per C2(e) if applicab	٠ , راما			
Continuente fundamina Abe or edichment due toor	notif het osfelt it abbiiosp	(0)			
			!		
			Check here if attachments.		

ELEVATION CERTIFICATE

See Instructions for Item A6.

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. 1220 Conolly Blvd			Policy Number:	
City	State	ZIP Code	Company NAIC Number	
Lynn Haven	Florida	32405		

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 7/11/22

Clear Photo One



Photo Two Caption

Left Side View 7/11/22

Clear Photo Two

ELEVATION CERTIFICATE

Continuation Page

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. 1220 Conolly Blvd			Policy Number:
City	State	ZIP Code	Company NAIC Number
Lynn Haven	Florida	32405	227

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 7/11/22

Clear Photo Three



Photo Four

Photo Four Caption Right Side View 7/11/22

Clear Photo Four

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.

., .	SEC.	TION A - PROPERTY	INFOR	MATION	•	· ·	FOR INSUR	ANCE COMPANY USE
A1. Building Owne	A1. Building Owner's Name					Policy Numb	Policy Number:	
D R Horton, Inc						-		
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1220 Conolly Blvd 						Company N	AIC Number:	
City							ZIP Code	· · ·
Lynn Haven	•					32405		
A3. Property Desc	ription (Lot a	nd Block Numbers, Ta	x Parcel	Number, Leg	ja! Descri	ption, etc.)	-	•
Lot 18, Andrews Pl	antation Pha	se 2 Parcel ID 11	588-975	-180				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential								
. A5. Latitude/Longit	tude: Lat. 30	0°13'26.6" N	Long. 8	5°37'48.1" W	н	lorizontal Datu	ım: 🗍 NAD 1	927 🗵 NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being u	sed to ob	tain flood insu	rance.	
A7. Building Diagra	am Number	1A						
A8. For a building.	with a crawls	pace or enclosure(s):						
a) Square foo	tage of crawl	space or enclosure(s)			\$	q ft		
b) Number of p	ermanent flo	ood openings in the cr	awispac	e or enclosure	e(s) within	1.0 foot abov	e adjacent gra	de
c) Total net an	ea of flood o	penings in A8.b		sq ir)			,
d) Engineered	flood openir	ngs? 🗌 Yes 🔲 N	10					
A9. For a building v	vith an attach	ned garage:						
_		ned garage		416.00 saft		•		
		ood openings in the at				hove adjacent	urade N/A	
		_	lacried g	_		bove adjacent	glade MA	
·	_	penings in A9.b		N/A sq	uı			
d) Engineered	tiood openin	gs? ☐ Yes ⊠ N	10					
-	SE	CTION B - FLOOD	INSURA	NCE RATE	MAP (FII	RM) INFORM	ATION	
B1. NFIP Commun	ity Name & 0	Community Number		B2. County	Name			B3. State
Bay County - 1200	04	•		Bay				Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/	B8. Floo Zone(s)		Base Flood El (Zone AO, use	evation(s) Base Flood Depth)
12005C0332	н	06-02-2009	06-02-2	vised Date 2009	AE	28.9	- 9'	
810. Indicate the s	ource of the	Base Flood Elevation	(BFE) d	ata or base fl	ood deptin	entered in Ite	em B9:	
		Community Deter						
B11. Indicate eleva	ation datum u	used for BFE in Item B	9: 🗌 N	IGVD 1929	⊠ NAVD	1988 🗌 (Other/Source:	
R12 is the building	a located in s	a Coastal Barrier Reso	ources Si	vstem (CBRS) area or	Otherwise Pro	otected Area (C	PA)? ☐ Yes ⊠ No
l '	_				ot C. Ru	therford, P.E	, Digitally	signed by Scot C.
Designation 1	Date:	⊔	CBRS	St	ate of Fl	orida, Licen	//	ord, P.E., State of Florida, No. 70041
				No	o. 70041			22.02.28 14:09:13 -06'00'

IMPORTANT: In these spaces, copy the corresponding		FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or 1220 Conolly Blvd	Policy Number:			
City State			Company NAIC N	lumber
Lynn Haven Flori	da 3240	5		
SECTION C – BUILDING ELE	VATION INFORMATI	ON (SURVEY RE	QUIRED)	
C1. Building elevations are based on: *A new Elevation Certificate will be required when co	enstruction of the building			ed Construction
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), \ Complete Items C2.a–h below according to the build Benchmark Utilized: NGS BM W290 Elev. = 32.43'		Item A7. In Puerto		
Indicate elevation datum used for the elevations in ite		L		
☐ NGVD 1929 ⊠ NAVD 1988 ☐ Other/S				
Datum used for building elevations must be the same	e as that used for the Bi	-E.	Check the mea	asurement used.
a) Top of bottom floor (including basement, crawlspa	ace, or enclosure floor)		22.0 × feet	meters
b) Top of the next higher floor			N/A [] feet	meters
c) Bottom of the lowest horizontal structural member	r (V Zones only)		N/A [] feet	meters
d) Attached garage (top of slab)			21.5 × feet	meters
e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Comi	icing the building ments)		21.5 × feet	meters
f) Lowest adjacent (finished) grade next to building	(LAG)		N/A [] feet	meters
g) Highest adjacent (finished) grade next to building	(HAG)		N/A [] feet	meters
h) Lowest adjacent grade at lowest elevation of decl structural support	k or stairs, including		N/A [] feet	meters
SECTION D - SURVEYOR,	ENGINEER, OR ARC	HITECT CERTIFI	CATION	
This certification is to be signed and sealed by a land sun I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment und	my best efforts to interp	ret the data availa	law to certify elevable. I understand to	ation information. hat any false
Were latitude and longitude in Section A provided by a lic	ensed land surveyor?	☐ Yes ☒ No	Check here	if attachments.
Certifier's Name	License Number			Digitally signed by Scot C. Rutherford, P.E., State of
Scot C. Rutherford	PE 70041			Florida, License No. 70041 DN: cn=Scot C. Rutherford, P.E., State of Florida, License No.
Title Civil Engineer/Vice President			BUTHER	70041, o=This item has been electronically signed and sealed by Scot C. Rutherford,
Company Name SCR & Associates NWFL, Inc.			No 70041	PE, on the date adjacent to the seal a using a SHA authentication code., ou=Printed copies of this
Address P O Box 958			ORIO STATE OF 4	document are not considered signed and sealed and the SHA authentication code must be verified on any electronic
City Lynn Haven	State Florida	ZIP Code 32444		copies., email=scot@scr.us.com, c=US Date: 2022.02.28 14:08:19 -06'00' Adobe Acrobat version:
Signature Scot C. Rutherford, P.E., State P.E., State of Florida, License No.	^{d,} Date	Telephone	Ext.	2021.011.20039
of Florida, License No. 70041 70041 Date: 2022.02.28 14:08:42 -06'00'	02-28-2022	(850) 265-6979		
Copy all pages of this Elevation Certificate and all attachmen	nts for (1) community offi	cial, (2) insurance a	agent/company, and	(3) building owner.
Comments (including type of equipment and location, per C2(e), if applicable) *** Engineer or Surveyor will not be responsible for any elevation data that has been changed by others. *** Signature on page 2 is not valid unless dated and seal on bottom right of page 2. A5.) Lat./Longs taken from Google Maps. C2.a) thru C2.e) All elevations given are proposed elevations. No construction or surveying work has been performed to date. Contact any Agencies involved for other possible requirements.				
B8. and B9. LOMR CASE No.: 20-04-2912P Effective Date	te August 16, 2021			
				Form Page 2 of 6

IMPORTANT: In these spaces, copy the correspon	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, ar			Policy Number:		
1220 Conolly Blvd					
City	State Florida	ZIP Code 32405	Company NAIC Number		
Lynn Haven			T DEOLUGED)		
SECTION E - BUILDING E FOR ZOI	NE AO AND ZONE				
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. 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).					
 a) Top of bottom floor (including basement, crawlspace, or enclosure) is 			ers above or below the HAG.		
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet mete	ers above or below the LAG.		
E2. For Building Diagrams 6–9 with permanent flood	openings provided in	Section A Items 8 and/o	or 9 (see pages 1–2 of Instructions),		
the next higher floor (elevation C2.b in the diagrams) of the building is		feet mete	ers above or below the HAG.		
E3. Attached garage (top of slab) is			ers above or below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is			ers above or below the HAG.		
E5. Zone AO only: If no flood depth number is availa floodplain management ordinance? Yes	ble, is the top of the l	pottom floor elevated in a n. The local official mus	ccordance with the community's t certify this information in Section G.		
SECTION F - PROPERTY OV	VNER (OR OWNER'	S REPRESENTATIVE) C	ERTIFICATION		
The property owner or owner's authorized representa community-issued BFE) or Zone AO must sign here.	tive who completes S The statements in Se	Sections A, B, and E for 2 ections A, B, and E are co	Cone A (without a FEMA-issued or		
Property Owner or Owner's Authorized Representativ	e's Name				
Address	. Cit	y §	State ZIP Code		
Signature	Da	te T	elephone		
Comments					
-					
·					
			Check here if attachments.		

IMPORTANT: In these spaces, copy the corre	IMPORTANT: In these spaces, copy the corresponding information from Section A.					
Building Street Address (including Apt., Unit, Su	ite, and/or Bldg. No.)	or P.O. Route and Box	No. Policy Num	ber:		
1220 Conolly Blvd		710 0 1		1001		
City. Lynn Haven	State Florida	ZIP Code 32405	Company N	AIC Number		
	N G - COMMUNITY I		NAL)			
· · · · · · · · · · · · · · · · · · ·		<u>.</u>				
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.						
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 Zone AO.	on E for a building loca	ated in Zone A (withou	a FEMA-issued or co	ommunity-issued BFE)		
G3. The following information (Items G4	G10) is provided for co	ommunity floodplain m	nagement purposes			
G4. Permit Number	G5. Date Permit Issu	ued	G6. Date Certifica Compliance/C	te of occupancy Issued		
G7. This permit has been issued for:	New Construction	Substantial Improve	ent			
G8. Elevation of as-built lowest floor (including of the building:	p basement)		☐ feet ☐ meters	Datum		
G9. BFE or (in Zone AO) depth of flooding at t	he building site:		☐ feet ☐ meters	Datum		
G10. Community's design flood elevation:	<u>-</u>		feet meters	Datum		
Local Official's Name		Title				
Community Name		Telephone	-			
Signature		Date	<u> </u>			
Comments (including type of equipment and log	cation, per C2(e), if ap	plicable)	.			
3 7						
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			☐ Ch	eck here if attachments.		

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1220 Conolly Blvd			Policy Number:
City	State	ZIP Code	Company NAIC Number
Lynn Haven	Florida	32405	

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 Caption Pre-Construction Site

Clear Photo One



ELEVATION CERTIFICATE

Continuation Page

MPORTANT: In these spaces, copy the correspon	FÖR INSURANCE C	OMPANY USE		
Building Street Address (including Apt., Unit, Suite, at 1220 Conolly Blvd	Policy Number:			
City	State	ZIP Code	Company NAIC Num	ber
Lynn Haven	Florida	32405	• • •	
If submitting more photographs than will fit on the with: date taken; "Front View" and "Rear View"; photographs must show the foundation with represe	preceding page, affix and, if required, "Ri ntative examples of the	the additional photograp ght Side View" and "L flood openings or vents	ohs below. Identify all eft Side View." Whe , as indicated in Secti	photographs n applicable, on A8.
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Photo Three Caption			Į (Clear Photo Three
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	Photo Four			
Photo Four Caption				Clear Photo Four

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 D R Horton, Inc						oer:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1220 Conolly Blvd Company NAIC Number:						AIC Number:		
City State ZIP Code Lynn Haven Florida 32405								
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 18, Andrews Plantation Phase 2 Parcel ID 11588-975-180								
A4. Building Use (e.g., Resider	ntial, Non-Residential, A	ddition,	Accessory, e	etc.) Residentia	I			
A5. Latitude/Longitude: Lat. 3	0°13'26.6" N	ong. 85	5°37'48.1" W	Horizontal	Datum: NAD 1	927 X NAD 1983		
A6. Attach at least 2 photograp	ohs of the building if the	Certifica	ate is being u	sed to obtain flood	I insurance.	_		
A7. Building Diagram Number	1A							
A8. For a building with a crawls	space or enclosure(s):							
a) Square footage of craw	Ispace or enclosure(s)			sq ft				
b) Number of permanent fl	ood openings in the cra-	wlspace	or enclosure	(s) within 1.0 foot	above adjacent gra	de		
c) Total net area of flood o	penings in A8.b		sq in					
d) Engineered flood openi								
A9. For a building with an attact								
a) Square footage of attack	hed garage		416.00 sq ft					
	a) Square footage of attached garage416.00 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							
			1071 04					
d) Engineered flood openings? ☐ Yes ☒ No								
S	ECTION B - FLOOD IN	ISURA	NCE RATE	MAP (FIRM) INF	ORMATION			
B1. NFIP Community Name & 0	Community Number		B2. County	Name		B3. State		
Bay County - 120004			Bay			Florida		
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Sone(s) B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)						levation(s) Base Flood Depth)		
12005C0332 H 06-02-2009 Revised Date 06-02-2009 AE 28.9'								
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:								
FIS Profile X 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 Scot C. Rutherford, P.E., State Digitally signed by Scot C. Rutherford, P.E., State of Florida, License No. 70041 Date: 2022.05.23 14:10:35 -05'00'								

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Suite, and/or 1220 Conolly Blvd	Policy Number:						
City State Lynn Haven Flori		Code	Company NAIC Number				
SECTION C – BUILDING ELE	VATION INFORMAT	ION (SURVEY RE	EQUIRED)				
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when co		ding Under Construng is complete.	uction*	hed Construction			
Complete Items C2.a-h below according to the build	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 building diagram specified in Item A7. In Puerto Rico only, enter meters.						
Benchmark Utilized: NGS BM W290 Elev. = 32.43'	Vertical Datum:						
Indicate elevation datum used for the elevations in ite ☐ NGVD 1929 ☑ NAVD 1988 ☐ Other/S	ource:						
Datum used for building elevations must be the same	as that used for the E	BFE.	Check the me	easurement used.			
a) Top of bottom floor (including basement, crawlspa	ace, or enclosure floor)	32.3 × feet	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)	(,		31.9 × feet	meters			
e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Comi	icing the building ments)		N/A [] feet	meters			
f) Lowest adjacent (finished) grade next to building			31.2 × feet	meters			
g) Highest adjacent (finished) grade next to building	•		31.5 × feet	meters			
h) Lowest adjacent grade at lowest elevation of decl structural support	12.00		N/A _ feet	meters			
SECTION D - SURVEYOR,	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? 🗵 Yes 🗆 No 💮 Check here if attachments.							
Certifier's Name	License Number			Digitally signed by Scot C.			
Scot C. Rutherford	PE 70041			Rutherford, P.E., State of Florida, License No. 70041 DN: cn=Scot C. Rutherford, P.E.,			
Title Civil Engineer/Vice President			RUTHERA	State of Florida, License No. 70041, o=This Item has been electronically signed and sealed			
Company Name			No 70041	by Scot C. Rutherford, PE, on the date adjacent to the seal a using a SHA authentication code.			
SCR & Associates NWFL, Inc.			STATE OF	ou=Printed copies of this document are not considered signed and sealed and the SHA			
Address P O Box 958			STATE OF	authentication code must be verified on any electronic copies, email=scot@scr.us.com			
City Lynn Haven	State Florida	ZIP Code 32444	11	C=US Date: 2022.05.23 14:11:16 -05'00 Adobe Acrobat version: 2022.001.20117			
Signature Scot C. Rutherford, P.E., State of Florida, License No. 70041 Of Florida, License No. 70041 Digitally signed by Scot C. Rutherford P.E., State of Florida, License No. 7004 Date: 2022.05.23 14:10:54-05'00'	Date 1 05-20-2022	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.							
Comments (including type of equipment and location, per	C2(e), if applicable)						
*** Engineer or Surveyor will not be responsible for any elevation data that has been changed by others. *** Signature on page 2 is not valid unless dated and seal on bottom right of page 2. A5.) Lat./Longs taken from Google Maps. B8. and B9. LOMR CASE No.: 20-04-2912P Effective Date August 16, 2021 C2.e) and C2.h) No machinery or stairs/steps have been installed to date.							

IMPORTANT: In these spaces, copy the correspon	FO	R INSURANCE COMPANY USE.				
Building Street Address (including Apt., Unit, Suite, ar 1220 Conolly Blvd		cy Number:				
City Lynn Haven	State Florida	ZIP Code 32405	Cor	npany NAIC Number		
SECTION E - BUILDING E FOR ZON	LEVATION INFO	RMATION (SURVE) E A (WITHOUT BFE	Y NOT REC	IUIRED)		
For Zones AO and A (without BFE), complete Items E complete Sections A, B, and C. For Items E1–E4, use enter meters.	1–E5. If the Certifi natural grade, if a	cate is intended to su valiable. Check the m	pport a LON easurement	MA or LOMR-F request, used. In Puerto Rico only,		
E1. Provide elevation information for the following an the highest adjacent grade (HAG) and the lowest	d check the approp adjacent grade (L	priate boxes to show (AG).	whether the	elevation is above or below		
a) Top of bottom floor (including basement, crawlspace, or enclosure) is b) Top of bottom floor (including basement)	······································	feet [] meters [above or below the HAG.		
b) Top of bottom floor (including basement, crawlspace, or enclosure) is	· · · · · · · · · · · · · · · · · · ·	feet [] meters [above or Delow the LAG.		
E2. For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in	openings provided			<u>.</u>		
the diagrams) of the building is E3: Attached garage (top of slab) is			-	☐ above or ☐ below the HAG. ☐ above or ☐ below the HAG.		
E4. Top of platform of machinery and/or equipment		— —	- · -	- · · -		
servicing the building is E5. Zone AO only: If no flood depth number is available to the servicing of the s	ble, is the top of the	□ feet □ feet □	d in accorda	above or below the HAG.		
floodplain management ordinance? 🔲 Yes 🔲 No 📋 Unknown. The local official must certify this information in Section G.						
<u> </u>						
SECTION F - PROPERTY OV	* * * * * * * * * * * * * * * * * * * *	4 4 4 4				
<u> </u>	tive who completes	Sections A. B. and E	for Zone A	(without a FEMA-issued or		
SECTION F - PROPERTY ON The property owner or owner's authorized representat	tive who completes The statements in S	Sections A. B. and E	for Zone A	(without a FEMA-issued or		
SECTION F - PROPERTY ON The property owner or owner's authorized represental community-issued BFE) or Zone AO must sign here.	tive who completes The statements in S e's Name	Sections A. B. and E	for Zone A	(without a FEMA-issued or		
SECTION F – PROPERTY OW The property owner or owner's authorized representation community-issued BFE) or Zone AO must sign here. Property Owner or Owner's Authorized Representative	tive who completes The statements in s e's Name	s Sections A, B, and E Sections A, B, and E	for Zone A are correct t	(without a FEMA-issued or o the best of my knowledge. ZIP Code		
SECTION F – PROPERTY ON The property owner or owner's authorized represental community-issued BFE) or Zone AO must sign here. Property Owner or Owner's Authorized Representative Address	tive who completes The statements in s e's Name	s Sections A, B, and E Sections A, B, and E	for Zone A are correct t	(without a FEMA-issued or o the best of my knowledge. ZIP Code		
SECTION F – PROPERTY ON The property owner or owner's authorized representationmunity-issued BFE) or Zone AO must sign here. Property Owner or Owner's Authorized Representative Address Signature	tive who completes The statements in s e's Name	Sections A, B, and E Sections A, B, and E	for Zone A are correct t	(without a FEMA-issued or o the best of my knowledge. ZIP Code		
SECTION F – PROPERTY ON The property owner or owner's authorized representationmunity-issued BFE) or Zone AO must sign here. Property Owner or Owner's Authorized Representative Address Signature	tive who completes The statements in s e's Name	Sections A, B, and E Sections A, B, and E	for Zone A are correct t	(without a FEMA-issued or o the best of my knowledge. ZIP Code		
SECTION F – PROPERTY ON The property owner or owner's authorized representationmunity-issued BFE) or Zone AO must sign here. Property Owner or Owner's Authorized Representative Address Signature	tive who completes The statements in s e's Name	Sections A, B, and E Sections A, B, and E	for Zone A are correct t	(without a FEMA-issued or o the best of my knowledge. ZIP Code		
SECTION F – PROPERTY ON The property owner or owner's authorized representationmunity-issued BFE) or Zone AO must sign here. Property Owner or Owner's Authorized Representative Address Signature	tive who completes The statements in s e's Name	Sections A, B, and E Sections A, B, and E	for Zone A are correct t	(without a FEMA-issued or o the best of my knowledge. ZIP Code		
SECTION F – PROPERTY ON The property owner or owner's authorized representationmunity-issued BFE) or Zone AO must sign here. Property Owner or Owner's Authorized Representative Address Signature	tive who completes The statements in s e's Name	Sections A, B, and E Sections A, B, and E	for Zone A are correct t	(without a FEMA-issued or o the best of my knowledge. ZIP Code		
SECTION F – PROPERTY ON The property owner or owner's authorized representationmunity-issued BFE) or Zone AO must sign here. Property Owner or Owner's Authorized Representative Address Signature	tive who completes The statements in s e's Name	Sections A, B, and E Sections A, B, and E	for Zone A are correct t	(without a FEMA-issued or o the best of my knowledge. ZIP Code		
SECTION F – PROPERTY ON The property owner or owner's authorized representationmunity-issued BFE) or Zone AO must sign here. Property Owner or Owner's Authorized Representative Address Signature	tive who completes The statements in s e's Name	Sections A, B, and E Sections A, B, and E	for Zone A are correct t	(without a FEMA-issued or o the best of my knowledge. ZIP Code		
SECTION F – PROPERTY ON The property owner or owner's authorized representationmunity-issued BFE) or Zone AO must sign here. Property Owner or Owner's Authorized Representative Address Signature	tive who completes The statements in s e's Name	Sections A, B, and E Sections A, B, and E	for Zone A are correct t	(without a FEMA-issued or o the best of my knowledge. ZIP Code		
SECTION F – PROPERTY ON The property owner or owner's authorized representationmunity-issued BFE) or Zone AO must sign here. Property Owner or Owner's Authorized Representative Address Signature	tive who completes The statements in s e's Name	Sections A, B, and E Sections A, B, and E	for Zone A are correct t	(without a FEMA-issued or o the best of my knowledge. ZIP Code		
SECTION F – PROPERTY ON The property owner or owner's authorized representationmunity-issued BFE) or Zone AO must sign here. Property Owner or Owner's Authorized Representative Address Signature	tive who completes The statements in s e's Name	Sections A, B, and E Sections A, B, and E	for Zone A are correct t	(without a FEMA-issued or o the best of my knowledge. ZIP Code		
SECTION F – PROPERTY ON The property owner or owner's authorized representationmunity-issued BFE) or Zone AO must sign here. Property Owner or Owner's Authorized Representative Address Signature	tive who completes The statements in s e's Name	Sections A, B, and E Sections A, B, and E	for Zone A are correct t	(without a FEMA-issued or o the best of my knowledge. ZIP Code		
SECTION F – PROPERTY ON The property owner or owner's authorized representationmunity-issued BFE) or Zone AO must sign here. Property Owner or Owner's Authorized Representative Address Signature	tive who completes The statements in s e's Name	Sections A, B, and E Sections A, B, and E	for Zone A are correct t	(without a FEMA-issued or o the best of my knowledge. ZIP Code		
SECTION F – PROPERTY ON The property owner or owner's authorized representationmunity-issued BFE) or Zone AO must sign here. Property Owner or Owner's Authorized Representative Address Signature	tive who completes The statements in s e's Name	Sections A, B, and E Sections A, B, and E	for Zone A are correct t	(without a FEMA-issued or o the best of my knowledge. ZIP Code		
SECTION F – PROPERTY ON The property owner or owner's authorized representationmunity-issued BFE) or Zone AO must sign here. Property Owner or Owner's Authorized Representative Address Signature	tive who completes The statements in s e's Name	Sections A, B, and E Sections A, B, and E	for Zone A are correct t	(without a FEMA-issued or o the best of my knowledge. ZIP Code		

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, S 1220 Conolly Blvd) or P.O. Route and Box N	lo. Policy Number:
City	State	ZIP Code	Company NAIC Number
Lynn Haven	Florida	32405	
SECTION	ON G - COMMUNITY	INFORMATION (OPTION	(AL)
The local official who is authorized by law or o Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, er	n Certificate. Complete	r the community's floodpla e the applicable item(s) an	in management ordinance can complete d sign below. Check the measurement
G1. The information in Section C was talengineer, or architect who is authorized at a in the Comments area below.)	ten from other docum zed by law to certify e	entation that has been sign levation information. (Indic	ned and sealed by a licensed surveyor, ate the source and date of the elevation
G2. A community official completed Sector Zone AO.	ion E for a building lo	cated in Zone A (without a	FEMA-issued or community-issued BFE)
G3. The following information (Items G4-	-G10) is provided for	community floodplain man	agement purposes.
G4. Permit Number	G5. Date Permit Is	sued	G6. Date Certificate of Compliance/Occupancy Issued
	<u> </u>	<u>·</u> 1	
G7. This permit has been issued for:		Substantial Improveme	nt
G8. Elevation of as-built lowest floor (includin of the building:	g basement) —		feet meters Datum
G9. BFE or (in Zone AO) depth of flooding at	the building site:	<u></u> [feet meters Datum
G10. Community's design flood elevation:	<u></u>	·	feet meters Datum
Local Official's Name		Title	
Community Name		Telephone	
Signature	• • • • • • • • • • • • • • • • • • • •	Date	
Comments (including type of equipment and lo	cation, per C2(e), if a	pplicable)	
	,		
			•
			☐ Check here if attachments.

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1220 Conolly Blvd			Policy Number:
City	State	ZIP Code	Company NAIC Number
Lynn Haven	Florida	32405	

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 5/20/22 Clear Photo One



Photo Two

Photo Two Caption Left Side View 5/20/22

Clear Photo Two

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, c	FOR INSURANCE COMPANY USE Policy Number:		
Building Street Address (including 1220 Conolly Blvd			
City	State	ZIP Code	Company NAIC Number
Lynn Haven	Florida	32405	

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 5/20/22

Clear Photo Three



Photo Four Caption

Right Side View 5/20/22

Clear Photo Four