

# 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 INSURANCE COMPANY USE	
A1. Building Owner's Name D R Horton, Inc					Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1229 Conolly Blvd					Company NAIC Number:	
City Lynn Haven		State Florida		ZIP Code 32405		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 28, Andrews Plantation Phase 2 Parcel ID 11588-975-280						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>						
A5. Latitude/Longitude: Lat. <u>30°13'26.28" N</u> Long. <u>85°37'50.48" W</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983						
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.						
A7. Building Diagram Number <u>1A</u>						
A8. For a building with a crawlspace or enclosure(s):						
a) Square footage of crawlspace or enclosure(s) _____ sq ft						
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____						
c) Total net area of flood openings in A8.b _____ sq in						
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No						
A9. For a building with an attached garage:						
a) Square footage of attached garage <u>416.00</u> sq ft						
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>						
c) Total net area of flood openings in A9.b _____ N/A sq in						
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number Bay County - 120004				B2. County Name Bay		B3. State Florida
B4. Map/Panel Number 12005C332	B5. Suffix H	B6. FIRM Index Date 06-02-2009	B7. FIRM Panel Effective/ Revised Date 06-02-2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 24.3'	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____						
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA						
				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: 2022.09.07 08:30:49 -05'00'

# ELEVATION CERTIFICATE

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1229 Conolly Blvd			Policy Number:
City Lynn Haven	State Florida	ZIP Code 32405	Company NAIC Number

## SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on:     Construction Drawings\*     Building Under Construction\*     Finished Construction

\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations – Zones A1–A30, AE, AH, 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 items a) through h) below.

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

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.


- |   |      |  |                                 |
|---|------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor)   | 31.8 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor   | N/A  | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only)   | N/A  | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| d) Attached garage (top of slab)  | 31.3 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building<br>(Describe type of equipment and location in Comments) | 32.1 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | 31.0 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | 31.4 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support                                  | N/A  | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |

## SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by 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 Scot C. Rutherford	License Number PE 70041	
Title Civil Engineer/Vice President		
Company Name SCR & Associates NWFL, Inc.		
Address P O Box 958		
City Lynn Haven	State Florida	ZIP Code 32444



Digitally signed by Scot C. Rutherford, P.E., State of Florida, License No. 70041  
DN: cn=Scot C. Rutherford, P.E., State of Florida, License No. 70041, o=This item has been electronically signed and sealed by Scot C. Rutherford, PE, on the date adjacent to the seal a using SHA authentication code.  
Printed copies of this document are not considered signed and sealed and the SHA authentication code must be verified on any electronic copies.  
email=scot@scr.us.com, c=US  
Date: 2022.09.07 08:30:10 -05'00'  
Adobe Acrobat version: 2022.002.20191

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: 2022.09.07 08:30:28 -05'00'	Date 09-02-2022	Telephone (850) 265-6979	Ext.
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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.

B8. and B9. LOMR CASE No.: 20-04-2912P Effective Date August 16, 2021  
C2.e) Lowest machinery taken from bottom of HVAC unit.

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**SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED)  
FOR ZONE AO AND ZONE A (WITHOUT BFE)**

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 \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

**SECTION F – PROPERTY OWNER (OR OWNER'S 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 community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative's Name			
Address	City	State	ZIP Code
Signature	Date	Telephone	

Comments

Check here if attachments.

# ELEVATION CERTIFICATE

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<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1229 Conolly Blvd			Policy Number:		
City Lynn Haven	State Florida	ZIP Code 32405	Company NAIC Number		
<b>SECTION G – COMMUNITY INFORMATION (OPTIONAL)</b>					
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.					
<p>G1. <input type="checkbox"/> 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.)</p> <p>G2. <input checked="" type="checkbox"/> A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.</p> <p>G3. <input type="checkbox"/> The following information (Items G4–G10) is provided for community floodplain management purposes.</p>					
G4. Permit Number		G5. Date Permit Issued		G6. Date Certificate of Compliance/Occupancy Issued	
<p>G7. This permit has been issued for:     <input type="checkbox"/> New Construction   <input type="checkbox"/> Substantial Improvement</p> <p>G8. Elevation of as-built lowest floor (including basement) of the building: _____ <input type="checkbox"/> feet   <input type="checkbox"/> meters   Datum _____</p> <p>G9. BFE or (in Zone AO) depth of flooding at the building site: _____ <input type="checkbox"/> feet   <input type="checkbox"/> meters   Datum _____</p> <p>G10. Community's design flood elevation: _____ <input type="checkbox"/> feet   <input type="checkbox"/> meters   Datum _____</p>					
Local Official's Name			Title		
Community Name			Telephone		
Signature			Date		
Comments (including type of equipment and location, per C2(e), if applicable)					
<input type="checkbox"/> Check here if attachments.					

# BUILDING PHOTOGRAPHS

OMB No. 1660-0008  
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## ELEVATION CERTIFICATE

See Instructions for Item A6.

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City Lynn Haven	State Florida	ZIP Code 32405	Company NAIC Number

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 9/2/22	Clear Photo One
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Photo Two

Photo Two Caption	Left Side View 9/2/22	Clear Photo Two
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# BUILDING PHOTOGRAPHS

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

## ELEVATION CERTIFICATE

Continuation Page

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
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City Lynn Haven	State Florida	ZIP Code 32405	Company NAIC Number

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 9/2/22

Clear Photo Three

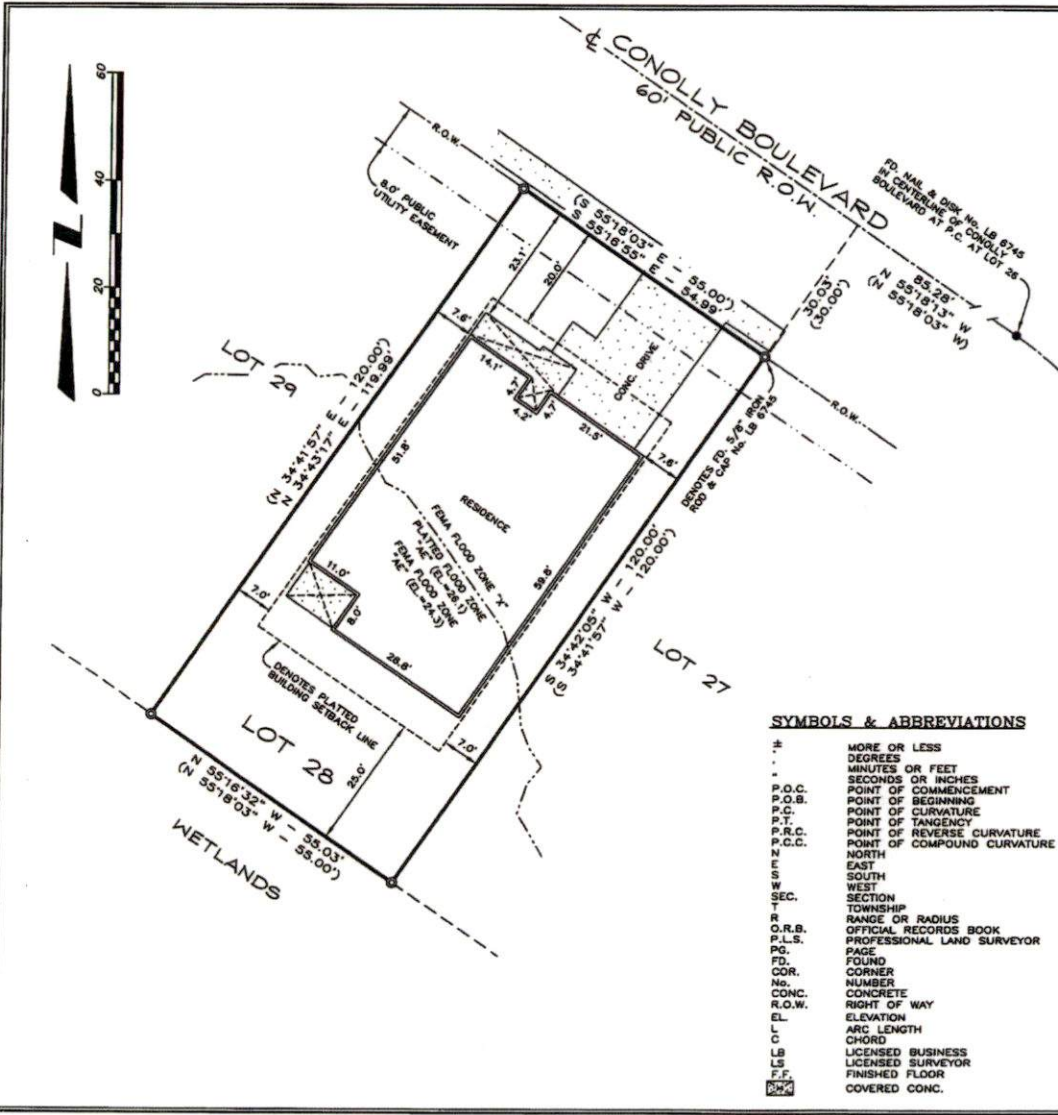


Photo Four

Photo Four Caption

Right Side View 9/2/22

Clear Photo Four



**DESCRIPTION**

LOT 28, ANDREWS PLANTATION II, AS PER PLAT RECORDED IN PLAT BOOK 29, PAGES 1 THRU 5 OF THE PUBLIC RECORDS OF BAY COUNTY, FLORIDA.

**SURVEYOR'S NOTES:**

THIS IS A BOUNDARY SURVEY WITH THE LOCATION OF ABOVE GROUND FIXED IMPROVEMENTS IN THE IMMEDIATE VICINITY OF THE ABOVE DESCRIBED PARCEL BOUNDARY ONLY; NO ATTEMPT WAS MADE TO INVESTIGATE THE LOCATION OF UNDERGROUND UTILITIES, FOUNDATIONS, OR OTHER IMPROVEMENTS, IF ANY EXIST.

THE LEGAL DESCRIPTION SHOWN HEREON WAS FURNISHED BY CLIENT.

THE UNDERSIGNED SURVEYOR HAS NOT BEEN PROVIDED A CURRENT TITLE OPINION OR ABSTRACT OF MATTERS AFFECTING THE TITLE OR BOUNDARY OF THE SUBJECT PROPERTY. IT IS POSSIBLE THAT THERE ARE DEEDS OF RECORD, UNRECORDED DEEDS, EASEMENTS OR OTHER INSTRUMENTS THAT COULD AFFECT THE BOUNDARIES.

THE BEARINGS AS SHOWN HEREON ARE BASED ON PLAT BEARING OF SOUTH 03°00'18" WEST ALONG CENTERLINE OF CASON CIRCLE FROM THE INTERSECTION OF CASON DRIVE SOUTH TO THE P.C. NEAR LOT 40 AND REFERENCED TO GEODETIC NORTH BASED ON THE FLORIDA STATE PLANE COORDINATES SYSTEM, NORTH ZONE, NAD 1983/99, U.S. SURVEY FEET, DATUM ESTABLISHED USING FLORIDA PERMANENT REFERENCE NETWORK.

THE MINIMUM HORIZONTAL ACCURACY FOR THIS SUBURBAN SURVEY, PREPARED IN ACCORDANCE WITH THE STANDARDS OF PRACTICE SET FORTH BY THE BOARD OF PROFESSIONAL SURVEYORS AND MAPPERS IN CHAPTER 5J-17.050-.052 OF THE FLORIDA ADMINISTRATION CODE, IS ONE PART IN 7,500. THE MAP AND MEASUREMENT METHODS USED FOR THIS SURVEY MEET OR EXCEED THIS REQUIREMENT. THE DIMENSIONS SHOWN HEREON ARE IN FEET AND DECIMALS THEREOF.

A COMPARISON BETWEEN RECORDED DIRECTIONS AND DISTANCES AND FIELD MEASURED DIRECTIONS AND DISTANCES WERE MADE. THE RECORD MEASUREMENTS ARE SHOWN IN PARENTHESES.

THIS SURVEY DOES NOT DETERMINE OWNERSHIP OF THE LANDS SHOWN HEREON.

A REVIEW OF THE FLOOD INSURANCE RATE MAP FOR BAY COUNTY, FLORIDA, MAP No. 12005C0332H, REVISED JUNE 2, 2009 INDICATES THAT THE PARCEL SHOWN HEREON IS WITHIN ZONES "X" AND "AE" (EL.=24.3), AS PER LOMR CASE No.: 20-04-2912P, EFFECTIVE DATE AUGUST 16, 2021.

THE FLOOD ZONE LINE DEPICTED HEREON WAS EXTRACTED FROM FEMA'S NATIONAL FLOOD HAZARD GIS DATA VIEWER AND WAS NOT CONTOURED OR BASED ON GROUND VERIFICATION.

THE SURVEY MAP(S) AND REPORT ARE NOT VALID WITHOUT THE SIGNATURE AND ORIGINAL RAISED SEAL OF THE FLORIDA LICENSED SURVEYOR AND MAPPER WHO PREPARED IT. ADDITIONS OR DELETIONS TO SURVEY MAP(S) OR REPORT BY OTHER THAN THE SIGNING PARTY IS PROHIBITED WITHOUT WRITTEN CONSENT OF THE SIGNING PARTY.

FEATURES SHOWN BY SYMBOL AS INDICATED IN THE LEGEND ARE NOT TO SCALE.

THE FORMATTED CERTIFICATION IS FOR:  
D.R. HORTON, INC

**CERTIFICATE**

I HEREBY CERTIFY THE SURVEY HEREON TO BE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AS OF THE DATE SURVEYED.

**SYMBOLS & ABBREVIATIONS**

- ± MORE OR LESS
- ° DEGREES
- ' MINUTES OR FEET
- " SECONDS OR INCHES
- P.O.C. POINT OF COMMENCEMENT
- P.O.B. POINT OF BEGINNING
- P.C. POINT OF CURVATURE
- P.T. POINT OF TANGENCY
- P.R.C. POINT OF REVERSE CURVATURE
- P.C.C. POINT OF COMPOUND CURVATURE
- N NORTH
- E EAST
- S SOUTH
- W WEST
- SEC. SECTION
- T TOWNSHIP
- R RANGE OR RADIUS
- O.R.B. OFFICIAL RECORDS BOOK
- P.L.S. PROFESSIONAL LAND SURVEYOR
- P.C. PAGE
- FD. FOUND
- GOR. CORNER
- No. NUMBER
- CONC. CONCRETE
- R.O.W. RIGHT OF WAY
- EL. ELEVATION
- L. ARC LENGTH
- C. CHORD
- LB. LICENSED BUSINESS
- LS. LICENSED SURVEYOR
- F.F. FINISHED FLOOR
- COVERED CONC. COVERED CONC.



08-22-2022  
DATE OF SURVEY

SKIPPER C. RUTHERFORD  
PROFESSIONAL SURVEYOR & MAPPER  
FLORIDA LICENSE No. LS 3961

MAP OF SURVEY  
 1229 CONOLLY BLVD - LYNN HAVEN  
 SECTION 15, T3S, R14W - BAY COUNTY - FLORIDA

**S&A Associates**  
 ENGINEERING & SURVEYING  
 3445 HWY. 268, PANAMA CITY, FLORIDA, 32409  
 Phone (850) 285-8979 Fax (850) 285-8942 - LICENSE No. LS 7729

JOB No.  
8717  
FILE No.  
R18058-F