

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name TAYLOR LANTIS & KELSEY KEPPNER		FOR INSURANCE COMPANY USE
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1304 NEW JERSEY AVENUE		Policy Number:
City LYNN HAVEN State FL		Company NAIC Number:
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 3 & 4, BLOCK A-94, PLAT NO. 2 LYNN HAVEN		ZIP Code 32444
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL		
A5. Latitude/Longitude: Lat. 30° 14' 20.20" N Long. 85° 40' 06.10" W 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 1-B		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) NA sq ft		a) Square footage of attached garage 462 sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade NA		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0
c) Total net area of flood openings in A8.b NA sq in		c) Total net area of flood openings in A9.b 0 sq in
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number CITY OF LYNN HAVEN 120009			B2. County Name BAY		B3. State FL
B4. Map/Panel Number 12005C0331	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) 7.0
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					

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: **J-42** Vertical Datum: **NAVD 1988**

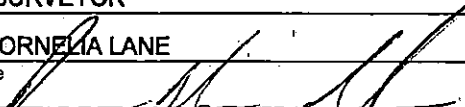
Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 NAVD 1988 Other/Source: _____
 Datum used for building elevations must be the same as that used for the BFE.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>6.8</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>NA</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>NA</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>5.5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>5.0</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>4.9</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>5.2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>NA</u>	<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.

Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No
 Check here if attachments.

Certifier's Name ROGER BLAIN ANGLIN		License Number 5521	
Title LAND SURVEYOR		Company Name ANGLIN SURVEYING, LLC	
Address 3712 CORNELIA LANE		City PANAMA CITY	State FL
Signature 		ZIP Code 32409	Telephone (850) 271-4055
Date 04/06/2016			



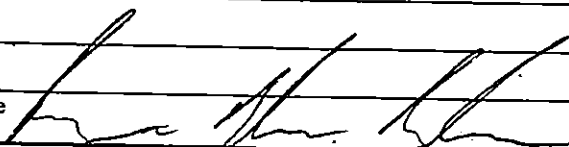
ELEVATION CERTIFICATE, page 2

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. 1304 NEW JERSEY AVENUE			Policy Number:	
City LYNN HAVEN	State FL	ZIP Code 32444	Company NAIC Number:	

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments EQUIPMENT SERVICING BUILDING IS AN AIR CONDITIONER UNIT.

Signature 

Date 04/06/2016

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 8–9 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.

SECTION G – COMMUNITY INFORMATION (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 E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4–G10) is provided for community floodplain management purposes.

G4. Permit Number _____	G5. Date Permit Issued _____	G6. Date Certificate Of Compliance/Occupancy Issued _____
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- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters Datum _____
- G10. Community's design flood elevation: _____ feet meters Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments _____

Check here if attachments.

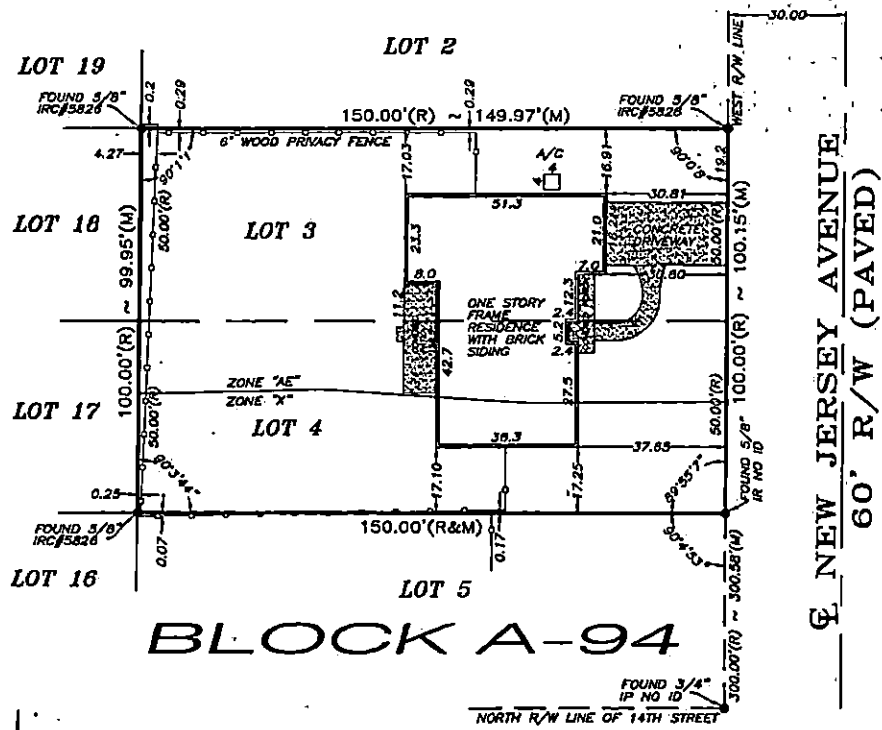
BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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. 1304 NEW JERSEY AVENUE			Policy Number:	
City LYNN HAVEN	State FL	ZIP Code 32444	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.





THIS SURVEY IS CERTIFIED TO:
 FEMBI MORTGAGE,
 TAYLOR LANTIS AND KELSEY KEPPNER,
 BONNEY & ASSOCIATES, PA,
 FIDELITY NATIONAL TITLE INSURANCE
 COMPANY.

LEGAL DESCRIPTION:
 LOT 3 AND 4, BLOCK A-94, PLAT
 NO. 2 LYNN HAVEN, ACCORDING TO
 THE PLAT THEREOF AS RECORDED IN
 PLAT BOOK 5, PAGE(S) 12, OF THE
 PUBLIC RECORDS OF BAY COUNTY,
 FLORIDA.

PROPERTY ADDRESS:
 1304 NEW JERSEY AVENUE, LYNN
 HAVEN, FLORIDA 32444.

SURVEYOR'S NOTES:

- 1) SOURCE OF INFORMATION IS A DEED PROVIDED BY THE CLIENT.
- 2) BEARING BASE: N/A
- 3) THIS IS A SURFACE SURVEY ONLY. ALL IMPROVEMENTS ARE VISIBLE AS SHOWN UNLESS OTHERWISE NOTED. NO ATTEMPT WAS MADE TO LOCATE UNDERGROUND IMPROVEMENTS OR UTILITIES.
- 4) FIELD WORK WAS COMPLETED ON 04/04/16
- 5) THE UNDERSIGNED SURVEYOR HAS NOT BEEN PROVIDED WITH A CURRENT TITLE OPINION OR ABSTRACT OF MATTERS AFFECTING THE TITLE OR BOUNDARY TO THE SUBJECT PROPERTY. IT IS POSSIBLE THAT THERE ARE DEEDS OF RECORD, UNRECORDED DEEDS, EASEMENTS OR OTHER INSTRUMENTS THAT COULD AFFECT THE BOUNDARIES. NO SEARCH OF THE PUBLIC RECORDS HAS BEEN MADE BY THIS OFFICE OR THE UNDERSIGNED SURVEYOR.
- 6) A REVIEW OF THE FLOOD INSURANCE RATE MAPS OF BAY COUNTY FLORIDA, MAP NUMBER 12005 02331 M, INDICATES THAT THE PARCELS SHOWN HEREIN IS WITHIN ZONE "C" & "AE". THERE ARE NO VISIBLE ENCROACHMENTS EXCEPT AS SHOWN HEREIN.
- 7) THIS SURVEY NOT VALID WITHOUT THE ORIGINAL BASED SEAL AND SIGNATURE OF A FLORIDA LICENSED SURVEYOR AND MAPPER.
- 8) IN SOME INSTANCES IT IS NECESSARY TO ENLARGE THE LOCATION AND/OR SIZE OF SOME FEATURES, SUCH AS FENCES, ADDITIONAL PROPERTY CORNERS FOUND, ETC. IN ORDER TO MORE CLEARLY REPRESENT THE AFORESAID ITEMS.

ORGANIZATION_NAME

ANGUN SURVEYING, LLC 3712
 CORNELIA LANE PANAMA CITY, FL
 32409 (850) 271-4055
 BOUNDARY SURVEY IS PREPARED
 FOR: TAYLOR LANTIS AND KELSEY
 KEPPNER.

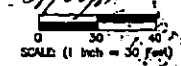
LEGEND

SYMBOLS AND ABBREVIATIONS: ° = DEGREES WHEN USED IN A BEARING OR ANGLE, ' = MINUTES WHEN USED IN A BEARING OR ANGLE, " = SECONDS WHEN USED IN A BEARING OR ANGLE, ' = FEET WHEN USED IN A DISTANCE, N = NORTH, S = SOUTH, E = EAST, W = WEST, (R) = RECORD DATA, (M) = MEASURED DATA, ID = IDENTIFICATION, CM = CONCRETE MONUMENT, A/C = AIR CONDITIONER, R/W = RIGHT OF WAY, # = NUMBER, PC = POINT OF CURVATURE, CL = CENTERLINE, IRC = IRON ROD AND CAP, N&D = NAIL AND DISC, C/CALC = CALCULATED DATA, P/H = PUMP HOUSE, TYP = TYPICAL, IP = IRON PIPE, R = RADIUS, L = ARC LENGTH, C = CURVE, CH = CHORD, Δ = DELTA ANGLE, T.O.B. = TOP OF DITCH BANK, CONC = CONCRETE, IR = IRON ROD, POC = POINT OF COMMENCEMENT, POB = POINT OF BEGINNING, ST = STREET, COR = CORNER, SEC = SECTION, TWP = TOWNSHIP, RGE = RANGE.

CERTIFICATION

THIS CERTIFIES THAT THE SURVEY SHOWN HEREON MEETS THE STANDARDS OF PRACTICE FOR LAND SURVEYING IN THE STATE OF FLORIDA, SET FORTH BY THE BOARD OF PROFESSIONAL LAND SURVEYORS IN CHAPTER 17 OF THE FLORIDA ADMINISTRATIVE CODE PURSUANT TO SECTION 472.027 OF THE FLORIDA STATUTES.

ROGER BLAIN ANGLIN PROFESSIONAL
 SURVEYOR AND MAPPER FLORIDA
 CERTIFICATE NUMBER 5521
 DATE: 04/08/16



DRAWN BY: ERIK SCHUMBERG
 APPROVED BY: ROGER ANGLIN
 FIELD BOOK # 121, PAGE 51

SCALE SHEET NUMBER

1"=30'
 PLOT DATE 04/05/2016
 SHEET NUMBER 1 of 1

PROJECT #
 16-204