



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 Peter & Sherri Mallory | | | | Policy Number: | |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1330 Country Club Drive | | | | Company NAIC Number: | |
| City Lynn Haven | | State Florida | | ZIP Code 32444 | |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Bay County Parcel No: 08731-106-000 | | | | | |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u> | | | | | |
| A5. Latitude/Longitude: Lat. <u>30 15' 12.3</u> Long. <u>85 38' 00.6</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>1B</u> | | | | | |
| A8. For a building with a crawlspace or enclosure(s): | | | | | |
| a) Square footage of crawlspace or enclosure(s) <u>0</u> sq ft | | | | | |
| b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u> | | | | | |
| c) Total net area of flood openings in A8.b <u>0</u> sq in | | | | | |
| d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | |
| A9. For a building with an attached garage: | | | | | |
| a) Square footage of attached garage <u>539</u> sq ft | | | | | |
| b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u> | | | | | |
| c) Total net area of flood openings in A9.b <u>0</u> 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 Lynn Haven, City of 120009 | | | B2. County Name Bay | | B3. State Florida |
| B4. Map/Panel Number 12005C0219H | B5. Suffix H | B6. FIRM Index Date 06/02/2009 | B7. FIRM Panel Effective/ Revised Date 06/02/2009 | B8. Flood Zone(s) AE, X | B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) EL 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 | | | | | |

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

| | | | |
|--|------------------|-------------------|----------------------------------|
| IMPORTANT: In these spaces, copy the corresponding information from Section A. | | | FOR INSURANCE COMPANY USE |
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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 K 42 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.

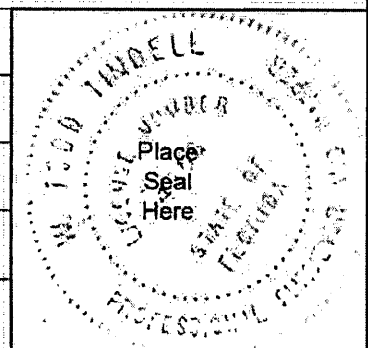
- | | | | |
|---|--------------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) | <u>8.37</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor | <u>24.83</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | _____ | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab) | <u>7.90</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>7.72</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | <u>5.19</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | <u>7.75</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>5.73</u> | <input checked="" 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 W. Todd Tindell | License Number 4958 | |
| Title Land Surveyor | | |
| Company Name Buchanan & Harper, Inc. | | |
| Address 735 W. 11th Street | | |
| City Panama City | State Florida | ZIP Code 32401 |
| Signature | Date 02/06/2017 | Telephone (850) 763-7427 |



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)

B&H Job No. 9247; FB. 1038 PA. 16-17

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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.

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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 |
|-------------------|------------------------|---|

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 (including type of equipment and location, per C2(e), if applicable)

Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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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



Photo Two

Photo Two Caption Rear View

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BUILDING PHOTOGRAPHS

Continuation Page

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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 One

Photo One

Photo One Caption

Photo Two

Photo Two

Photo Two Caption

NOTICE OF COMMENCEMENT

File # 2021090744
BK 4492, PG: 736 Pages: 1 of 1
Recorded 11/30/2021 11:45 AM
Bill Kinsaul, Clerk, Bay County, FL
Deputy Clerk GB Trans # 1729915

State of Florida
County of Bay

To Whom It May Concern:

The undersigned hereby gives Notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

Description of property (legal description of the property, and street address if available): Lots 8 & 9, Bay Breeze, Plat Book 14, Page 13; 1330 Country Club Dr., Lynn Haven
General description of improvement: Construction of residential house

Owner Name: Peter A. Mallory and wife Sherri Denton Mallory
Address: P.O. Box 2178, Panama City, FL 32402
Owner's interest in site of the improvement: 100% - Fee Simple

Fee Simple Titleholder Name: Peter A. Mallory and wife, Sherri Denton Mallory
Address: P.O. Box 2178, Panama City, FL 32402

Contractor Name: owner - Sherri Denton Mallory
Address: _____
Phone Number: _____

Payment Bond Surety: N/A
Address: _____
Phone Number: _____ Amount of Bond: N/A

Lender Name: N/A
Address: _____
Phone Number: _____

Person within the State of Florida designated by Owner upon whom Notices or other documents may be served as provided by Section 713.13(1) (a) 7., Florida Statutes:

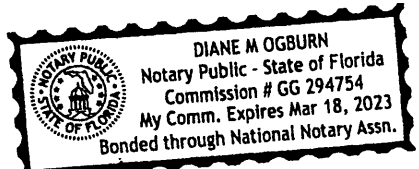
Name Sherri Denton Mallory, Esq.
Address P.O. Box 2178, Panama City, FL 32402
Phone Number: 850-596-2973

In addition to himself or herself, Owner designates N/A of N/A to receive a copy of the Lienor's Notice as provided in Section 713.13(1) (b), Florida Statutes. Phone Number: _____

Expiration date of Notice of Commencement is one (1) year from date of recording unless a different date is specified _____.

Sherri Denton Mallory
Signature of Owner

Sworn to (or affirmed) and subscribed before me this 30 day of November, 2021, by _____ (name of person making statement).



Diane M Ogburn
Signature of Notary Public (State of Florida)

NOTARY SEAL

Personally Known X or Produced Identification _____
Type of Identification Produced _____

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROVER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK ON RECORDING YOUR NOTICE OF COMMENCEMENT.

Plan Review notes "Mallory"

The following plan review notes pertain the above referenced residential project:

1. All bedrooms and rooms classified as bedrooms shall have hard wired smoke detectors installed no more than 12 inches from the highest point in the ceiling. Please note: in some cases a combo smoke detector will be needed in a more common area. Hallways outside of bedrooms are also required to have hard wired smoke detectors.
2. Proper submittal of elevation shall be required
3. Windows exceeding 48 inches outside from ground to window seal must be minimum of 24 inches from the finish floor on the inside the home
4. Railings and guardrails will be required where the drop off exceeds 30 inches
5. Windows must meet energy code requirements
6. Slab/foundation plan must meet in line with engineered floor systems and roof trusses. All proper grade beams if applicable must be in place prior to slab pour inspection.
7. Glazed/Tempered windows must be in place where required by code upon the time of the final inspection.
8. All proper inspections to be made through out the building phases of the project
9. Prior to final inspection, Home owner/Contractor must call in and all required city inspections to utilities. These must be passed prior to the issuance of the Building Certificate of Occupancy.
10. Upon the first initial inspection, A porta toilet must be on site, along with any silt fence in areas to help reduce the runoff of mud and silt to adjoining and neighboring properties. This also includes reducing the amount of dirt in silt into the streets.
11. Engineered trusses and floor systems must be installed per plan. Any modifications to the installation will result in an engineer to sign off before moving forward to the next phase,