

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

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: <u>JEFF & BONNIE LYN WIRRICK</u>	Policy Number: _____
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>1804 COUNTRY CLUB DR</u>	Company NAIC Number: _____
City: <u>LYNN HAVEN</u> State: <u>FL</u> ZIP Code: <u>32444</u>	
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: <u>08732-725-000, HIGHLAND SHORES LOT 26 & 27</u>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): <u>Residential</u>	
A5. Latitude/Longitude: Lat. <u>N30d15'18"</u> Long. <u>W85d37'43"</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983 <input type="checkbox"/> WGS 84	
A6. Attach at least two and when possible four clear photographs (one for each side) of the building (see Form pages 7 and 8).	
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): <u>0.00</u> sq. ft.	
b) Is there at least one permanent flood opening on two different sides of each enclosed area? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>0</u> Engineered flood openings: <u>0</u>	
d) Total net open area of non-engineered flood openings in A8.c: <u>0.00</u> sq. in.	
e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructions): <u>0.00</u> sq. ft.	
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): <u>0.00</u> sq. ft.	
A9. For a building with an attached garage:	
a) Square footage of attached garage: <u>666.00</u> sq. ft.	
b) Is there at least one permanent flood opening on two different sides of the attached garage? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>0</u> Engineered flood openings: <u>0</u>	
d) Total net open area of non-engineered flood openings in A9.c: <u>0.00</u> sq. in.	
e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructions): <u>0.00</u> sq. ft.	
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): <u>0.00</u> sq. ft.	

SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	
B1.a. NFIP Community Name: <u>CITY OF LYNN HAVEN</u>	B1.b. NFIP Community Identification Number: <u>120009</u>
B2. County Name: <u>BAY</u>	B3. State: <u>FL</u> B4. Map/Panel No.: <u>12005C0219</u> B5. Suffix: <u>H</u>
B6. FIRM Index Date: <u>06/02/2009</u>	B7. FIRM Panel Effective/Revised Date: <u>06/02/2009</u>
B8. Flood Zone(s): <u>X</u>	B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): <u>NONE</u>
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: <input type="checkbox"/> FIS <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other: _____	
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	
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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City: LYNN HAVEN State: FL ZIP Code: 32444	Policy Number: _____
	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, AO, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO, A99. Complete Items C2.a-h below according to the Building Diagram specified in Item A7. In Puerto Rico only, enter meters.
Benchmark Utilized: BE 0655 Vertical Datum: 8.47'

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929 NAVD 1988 Other: _____

Datum used for building elevations must be the same as that used for the BFE. Conversion factor used? Yes No

If Yes, describe the source of the conversion factor in the Section D Comments area.

Check the measurement used:

- | | | |
|---|--------------|--|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor): | <u>13.30</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| b) Top of the next higher floor (see Instructions): | <u>23.30</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (see Instructions): | <u>0.00</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| d) Attached garage (top of slab): | <u>12.90</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area): | <u>12.20</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| f) Lowest Adjacent Grade (LAG) next to building: <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Finished | <u>11.30</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| g) Highest Adjacent Grade (HAG) next to building: <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Finished | <u>12.50</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| h) Finished LAG at lowest elevation of attached deck or stairs, including structural support: | <u>0.00</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 state 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 and describe in the Comments area.

Certifier's Name: ROBERT WAYNE RICHMOND License Number: L.S. #6616

Title: PROFESSIONAL SURVEYOR & MAPPER

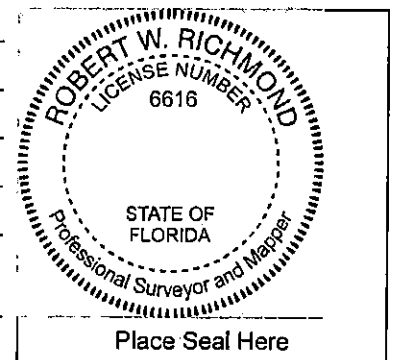
Company Name: SEA LEVEL SURVEYING AND MAPPING (L.B. #5800)

Address: 1219 MAINE AVE

City: LYNN HAVEN State: FL ZIP Code: 32444

Signature: *Robert W. Richmond* Date: 08/03/2023

Telephone: (850) 265-4800 Ext.: 1 Email: SeaLevel@SeaLevelSurveying.com



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

Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and description of any attachments):

LOWEST MACHINERY IS AN OUTSIDE AIR CONDITIONER ON A PLASTIC PAD.

AT TIME OF CERTIFICATE, HOME IS IN FLOOD ZONE X.

LATER IN 2023, FLOOD ZONE IS EXPECTED TO CHANGE TO "0.2 PCT ANNUAL CHANCE FLOOD HAZARD".

ELEVATION OF THE CROWN OF THE ROAD IS 10.8 FEET.

JOB NUMBER: 9824C

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City: LYNN HAVEN State: FL ZIP Code: 32444	Policy Number: _____
	Company NAIC Number: _____

SECTION E – BUILDING MEASUREMENT INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO, ZONE AR/AO, AND ZONE A (WITHOUT BFE)

For Zones AO, AR/AO, and A (without BFE), complete Items E1–E5. For Items E1–E4, use natural grade, if available. If the Certificate is intended to support a Letter of Map Change request, complete Sections A, B, and C. Check the measurement used. In Puerto Rico only, enter meters.

Building measurements are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

E1. Provide measurements (C.2.a in applicable Building Diagram) for the following and check the appropriate boxes to show whether the measurement is above or below the natural HAG and the 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 (C2.b in applicable Building Diagram) 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 AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without BFE) or Zone AO must sign here. *The statements in Sections A, B, and E are correct to the best of my knowledge*

Check here if attachments and describe in the Comments area.

Property Owner or Owner's Authorized Representative Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____

Telephone: _____ Ext.: _____ Email: _____

Comments: _____

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 1804 COUNTRY CLUB DR	FOR INSURANCE COMPANY USE
City: LYNN HAVEN State: FL ZIP Code: 32444	Policy Number: _____
	Company NAIC Number: _____

SECTION G – COMMUNITY INFORMATION (RECOMMENDED FOR COMMUNITY OFFICIAL COMPLETION)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Section A, B, C, E, G, or H of this Elevation Certificate. Complete the applicable item(s) and sign below when:

- 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 state law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.a. A local official completed Section E for a building located in Zone A (without a BFE), Zone AO, or Zone AR/AO, or when item E5 is completed for a building located in Zone AO.
- G2.b. A local official completed Section H for insurance purposes.
- G3. In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E and H.
- G4. The following information (Items G5–G11) is provided for community floodplain management purposes.
- G5. Permit Number: _____ G6. Date Permit Issued: _____
- G7. Date Certificate of Compliance/Occupancy Issued: _____
- G8. This permit has been issued for: New Construction Substantial Improvement
- G9.a. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters Datum: _____
- G9.b. Elevation of bottom of as-built lowest horizontal structural member: _____ feet meters Datum: _____
- G10.a. BFE (or depth in Zone AO) of flooding at the building site: _____ feet meters Datum: _____
- G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member: _____ feet meters Datum: _____
- G11. Variance issued? Yes No If yes, attach documentation and describe in the Comments area.

The local official who provides information in Section G must sign here. *I have completed the information in Section G and certify that it is correct to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.*

Local Official's Name: _____ Title: _____

NFIP Community Name: _____

Telephone: _____ Ext.: _____ Email: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____

Comments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information in Sections A, B, D, E, or H):

ELEVATION CERTIFICATE

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City: LYNN HAVEN State: FL ZIP Code: 32444	Policy Number: _____
	Company NAIC Number: _____

SECTION H - BUILDING'S FIRST FLOOR HEIGHT INFORMATION FOR ALL ZONES (SURVEY NOT REQUIRED) (FOR INSURANCE PURPOSES ONLY)

The property owner, owner's authorized representative, or local floodplain management official may complete Section H for all flood zones to determine the building's first floor height for insurance purposes. Sections A, B, and I must also be completed. Enter heights to the nearest tenth of a foot (nearest tenth of a meter in Puerto Rico). *Reference the Foundation Type Diagrams (at the end of Section H Instructions) and the appropriate Building Diagrams (at the end of Section I Instructions) to complete this section.*

H1. Provide the height of the top of the floor (as indicated in Foundation Type Diagrams) above the Lowest Adjacent Grade (LAG):

a) For Building Diagrams 1A, 1B, 3, and 5-9. Top of bottom _____ feet meters above the LAG floor (include above-grade floors only for buildings with subgrade crawlspaces or enclosure floors) is:

b) For Building Diagrams 2A, 2B, 4, and 6-9. Top of next _____ feet meters above the LAG higher floor (i.e., the floor above basement, crawlspace, or enclosure floor) is:

H2. Is all Machinery and Equipment servicing the building (as listed in Item H2 instructions) elevated to or above the floor indicated by the H2 arrow (shown in the Foundation Type Diagrams at end of Section H instructions) for the appropriate Building Diagram?

Yes No

SECTION I - PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and H must sign here. *The statements in Sections A, B, and H are correct to the best of my knowledge. Note: If the local floodplain management official completed Section H, they should indicate in Item G2.b and sign Section G.*

Check here if attachments are provided (including required photos) and describe each attachment in the Comments area.

Property Owner or Owner's Authorized Representative Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____

Telephone: _____ Ext.: _____ Email: _____

Comments: _____

ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19
BUILDING PHOTOGRAPHS

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:
1804 COUNTRY CLUB DR

City: LYNN HAVEN State: FL ZIP Code: 32444

FOR INSURANCE COMPANY USE

Policy Number: _____

Company NAIC Number: _____

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Photo One

Photo One Caption: 7-31-2023 Front View

Clear Photo One

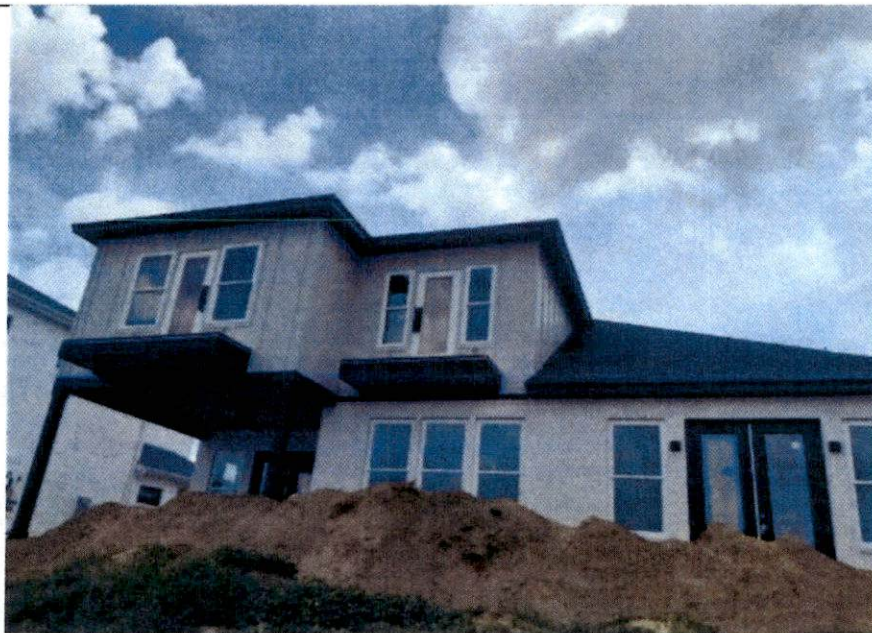


Photo Two

Photo Two Caption: 7-31-2023 Rear View

Clear Photo Two

ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19
BUILDING PHOTOGRAPHS

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:
1804 COUNTRY CLUB DR

City: LYNN HAVEN State: FL ZIP Code: 32444

FOR INSURANCE COMPANY USE

Policy Number: _____

Company NAIC Number: _____

Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.

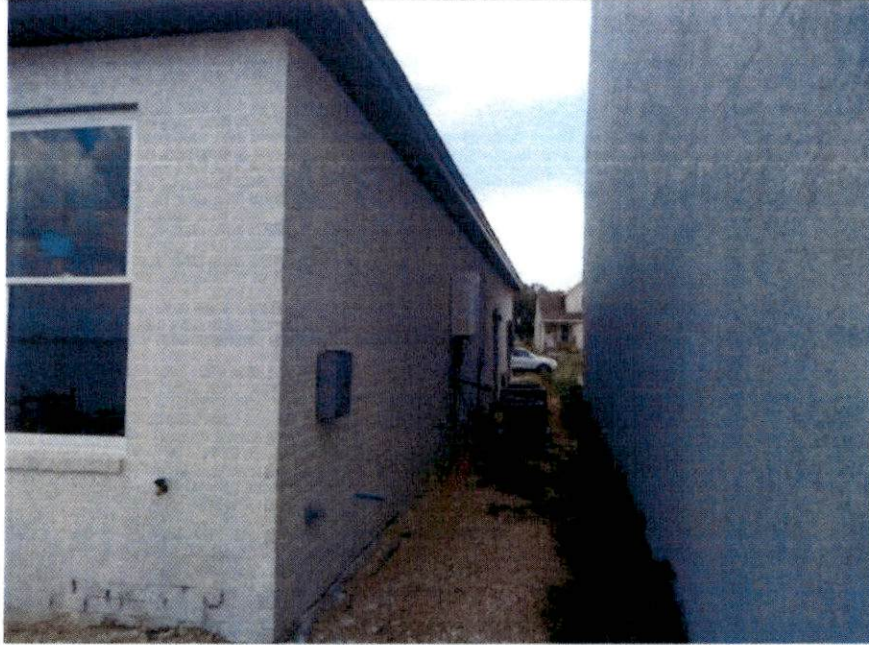


Photo Three

Photo Three Caption: 7-31-2023 Right Side View

Clear Photo Three

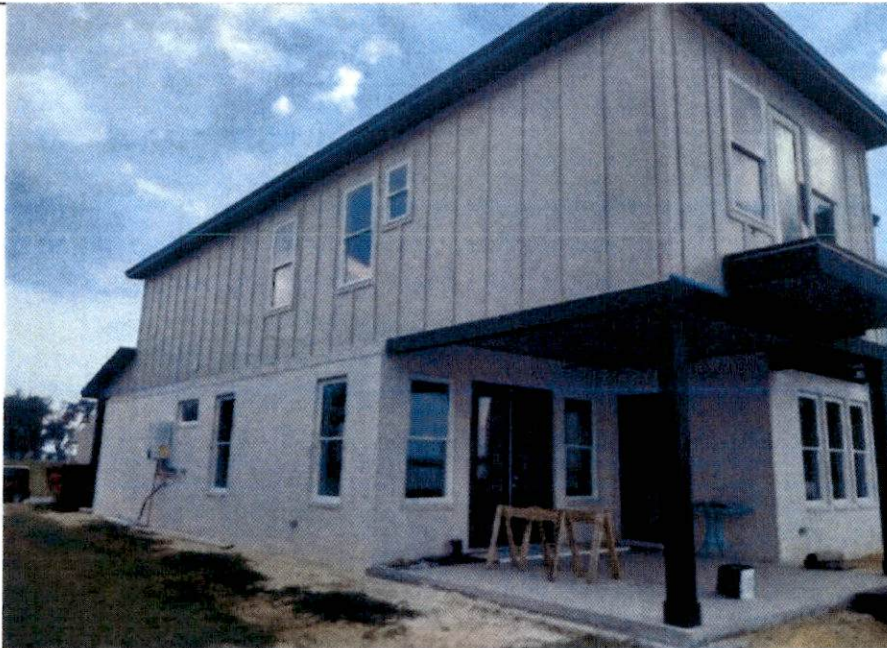
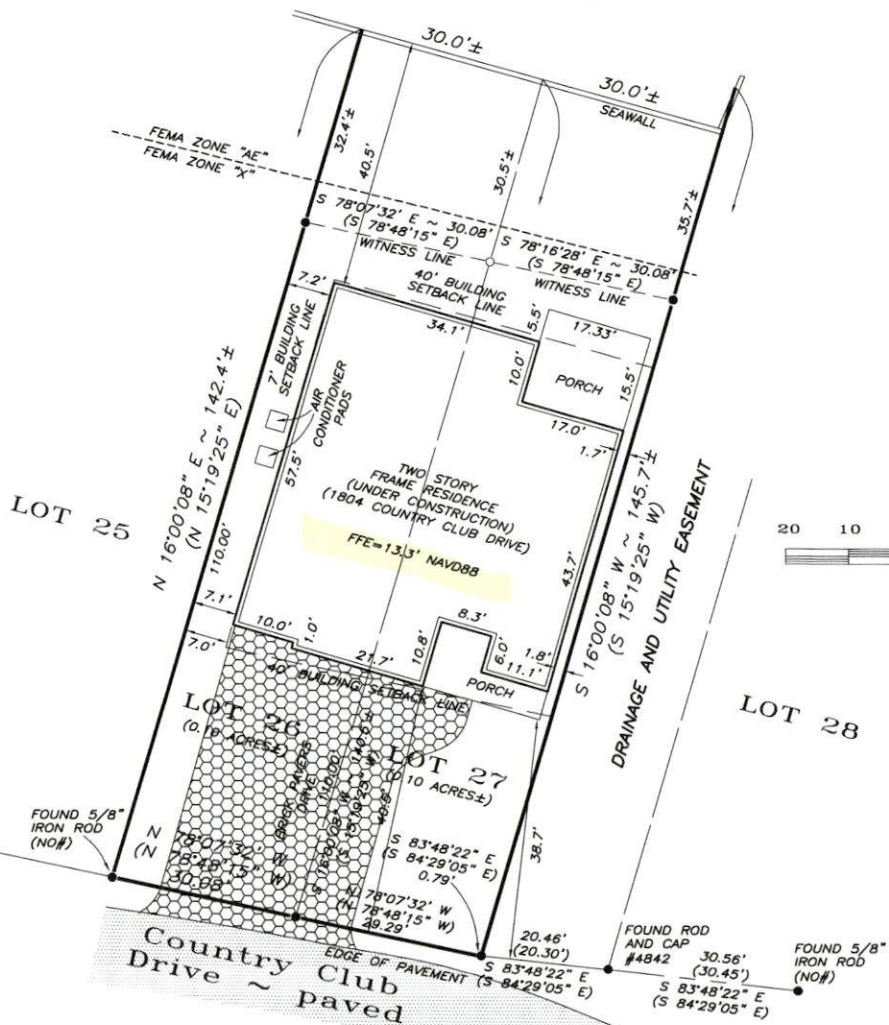


Photo Four

Photo Four Caption: 7-31-2023 Left Side View

Clear Photo Four

North Bay



SYMBOLS and ABBREVIATIONS

○	SET 5/8" IRON ROD AND CAP #LB5800	R.O.W.	RIGHT OF WAY
□	SET 4"x4" CONCRETE P.R.M. #LB5800	P.O.B.	POINT OF BEGINNING
●	FOUND ROD AND CAP	P.O.C.	POINT OF CURVATURE
■	FOUND P.R.M.	P.T.	POINT OF TANGENCY
⊕	CENTERLINE	P.C.P.	PERMANENT CONTROL POINT
-P-	AERIAL POWER LINE	P.O.C.	POINT OF COMMENCEMENT
-x-	FENCE	P.R.C.	POINT OF REVERSE CURVATURE
-.-	DISTANCE IN FEET AND TENTHS OF A FOOT	P.C.C.	POINT OF COMPOUND CURVATURE
°	DEGREES	P.R.M.	PERMANENT REFERENCE MONUMENT
'	MINUTES	CONC.	CONCRETE
"	SECONDS	R.C.P.	CORRUGATED METAL PIPE
FFE	FINISH FLOOR ELEVATION		
R.C.P.	REINFORCED CONCRETE PIPE		

DESCRIPTION

LOT 26 HIGHLAND SHORES, ACCORDING TO PLAT ON FILE IN PLAT BOOK 14, PAGE 14, IN THE OFFICE OF THE CLERK OF THE CIRCUIT COURT OF BAY COUNTY, FLORIDA.

LOT 27 HIGHLAND SHORES, ACCORDING TO PLAT ON FILE IN PLAT BOOK 14, PAGE 14, IN THE OFFICE OF THE CLERK OF THE CIRCUIT COURT OF BAY COUNTY, FLORIDA.

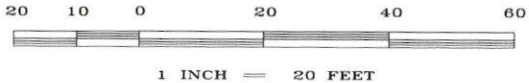
FLOOD ZONE STATEMENT

A REVIEW OF THE FEDERAL EMERGENCY MANAGEMENT AGENCY'S FLOOD INSURANCE RATE MAP NO. 12005C0219H, DATED JUNE 2, 2009 INDICATES THE SUBJECT PROPERTY LIES WITHIN ZONE "X" AND ZONE "AE" AS SHOWN. LOCATION APPROXIMATE.

THE FORMATTED CERTIFICATION IS FOR

JEFF WIRRICK AND BONNIE LYN WIRRICK
 PANHANDLE CREDIT UNION, ISAQA/ATIMA
 MTI TITLE INSURANCE AGENCY, INC.
 STEWART TITLE GUARANTY CO

GRAPHIC SCALE



SURVEYORS NOTES:

1. A COMPARISON HAS BEEN MADE BETWEEN RECORD OR PLATTED BEARINGS AND DISTANCES WITH FIELD MEASURED DIMENSIONS. WHEN A DIFFERENCE IS FOUND, RECORD OR PLATTED DIMENSIONS ARE SHOWN IN PARENTHESIS.
2. THE UNDERSIGNED SURVEYOR MAKES NO CLAIM AS TO THE EXISTENCE OF SUBSURFACE FEATURES SUCH AS UNDERGROUND UTILITIES, FOOTINGS, ETC., OTHER THAN THE SURFACE EVIDENCE OF SAME AS SHOWN HEREON.
3. EXTERIOR WALLS OF BUILDINGS AND STRUCTURES ARE AS SHOWN HEREON. EAVES, OVERHANGS OR FOOTINGS INCLUDING RAIN GUTTERS ARE NOT SHOWN ON THIS SURVEY DRAWING UNLESS THEY REPRESENT AN ENCROACHMENT.
4. A TITLE SEARCH OF THE SUBJECT PROPERTY HAS NOT BEEN CONDUCTED BY THE UNDERSIGNED SURVEYOR. IT IS POSSIBLE THERE ARE DEEDS, (RECORDED OR UNRECORDED), EASEMENTS, RIGHT OF WAYS, STATE OR FEDERAL JURISDICTIONS WHICH COULD AFFECT THE BOUNDARIES AND/OR USE OF THE SUBJECT PROPERTY.

SEA LEVEL SURVEYING and MAPPING, INC.

(850) 285-4800 • 1219 MAINE AVENUE • LYNN HAVEN, FLORIDA 32444 LB NO. 5800

I HEREBY CERTIFY THAT THE SURVEY SHOWN HEREON MEETS OR EXCEEDS THE STANDARDS OF PRACTICE SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL SURVEYORS AND MAPPERS CHAPTER 5J-17, FLORIDA ADMINISTRATIVE CODE, PURSUANT TO SECTION 472.027, FLORIDA STATUTES.

TYPE OF SURVEY BOUNDARY FOR WIRRICK

DATE SURVEYED 3/30/2022 IMPROVEMENTS VISIBLE AS SHOWN SCALE 1"=20'

REVISED 8/3/2023 ADDED IMPROVEMENTS

SOURCE OF INFORMATION BAY COUNTY O.R.B. 4512, PAGE 1177

BEARING REFERENCE ASSUMED N 78°07'32" W FOR NORTH R.O.W. COUNTRY CLUB DRIVE

ELEVATION REFERENCE N/A

JOB NO. 9824 FILE NO. C-10940 F.B. 485 PG. 38 DRAWN BY: JMK SHEET NO. 1 OF 1



NOT VALID UNLESS SIGNED AND SEALED

NFWWMD Report

Preliminary SFHA Flood Map (Prelim Issue Date: 10/25/2019)



Effective SFHA Flood Map (Effective Issue Date: 6/2/2009)



Zone VE: A coastal area inundated by 100-year flooding and subject to a velocity hazard (wave action) where BFEs have been determined. **Zone AE:** An area inundated by 100-year flooding, for which BFEs have been determined. **Zone AO/AH:** An area inundated by 100-year flooding; (AO) Sheet flow, ponding, or shallow flooding where Base Flood Depths are provided; (AH) Shallow flooding base floodplain where BFEs have been determined. **Zone A:** An area inundated by 100-year flooding, for which no BFEs have been determined. **Zone 0.2PCT (0.2 PCT ANNUAL CHANCE FLOOD HAZARD/X500):** An area inundated by 500-year flooding an area inundated by 100-year flooding with average depths of less than 1 foot or with drainage areas less than 1 square mile or an area protected by levees from 100-year flooding. **Zone X:** An area of minimal flood hazard.

Disclaimer: Although derived directly from a variety of sources, including the Federal Emergency Management Agency's (FEMA's) Flood Insurance Rate Maps (FIRMs), the District's digital elevation model, the counties' digital parcel maps and data from other governmental sources, the data provided through this portal is for informational purposes only. The user is advised to be aware that for flood insurance or regulatory determinations, or for supporting an application for a Letter of Map Change (LOMC), only the official and latest FEMA FIRM and Flood Insurance Study (FIS) report should be consulted. Also, all elevation data submitted in support of a LOMC application must be certified by a licensed land surveyor, engineer, or architect. The NFWWMD, FEMA, its agents, and partners shall not be held responsible for the misuse or misinterpretation of the information presented in this portal.

Geographical Information

Latitude/Longitude: 30.25494,-85.62867
 Address: 1804 Country Club Dr, Lynn Haven, FL, 32444, USA
 Parcel ID: **08732-726-000**
 Firm Panel (Preliminary): **12005C0219J**
 Firm Panel (Effective): 12005C0219H

Flood Information

Flood Zone Information

Preliminary Flood Zone

Location of Interest: 0.2 PCT ANNUAL CHANCE FLOOD HAZARD
 Parcel: **0.2 PCT ANNUAL CHANCE:83%; VE:17%;**
 Base Flood Information*: **14.0 ft**

Effective Flood Zone

Location of Interest: X
 Parcel: **AE:27%; X:73%;**
 Base Flood Information*: **7.0 ft**

*The computed elevation to which floodwater is anticipated to rise during the base flood (100 Year Flood). Base Flood Elevations (BFEs) are shown on Flood Insurance Rate Maps (FIRMs) and on the flood profiles. The BFE is the regulatory requirement for the elevation or floodproofing of structures. The relationship between the BFE and a structure's elevation determines the flood insurance premium. **Datum of measurement is NAVD1988.**