U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

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

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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	RANCE COMPANY USE	
A1. Building Owner			•			Policy Num		
GEORGE E & MAR	RION B PELI	LAND						
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number:								
1819 MAINE AVE								
City				State		ZIP Code		
LYNN HAVEN		od Diode Niverborn To	v Dansal	Florida	, nal Danasintian, ata	32444		
• •	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOTS 11 & 12, BLOCK A-11, LYNN HAVEN PLAT NO. 2 (PARCEL ID: 10895-000-000)							
A4. Building Use (e	.g., Residen	tial, Non-Residential,	Addition,	, Accessory,	etc.) RESIDENTI	AL'		
				35° 39' 40.34"		Datum: 🔲 NAD 1	1927 🗖 NAD 1983	
•		ns of the building if the			<u> </u>	<u>—</u>		
A7. Building Diagra	m Number	1B						
A8. For a building w	ith a crawls	pace or enclosure(s):						
-	•	space or enclosure(s)		,	· N/A sq ft			
b) Number of p	ermanent flo	od openings in the cra	wispace			above adjacent gra	ade _{N/A}	
c) Total net are		,		N/A sqir				
d) Engineered	flood openin	gs? 🗌 Yes 🔀 N	lo					
, -	·							
A9. For a building w				og fi	-		:	
a) Square foota				N/A sq ft				
b) Number of po	ermanent flo	od openings in the att	ached g	arage within	1.0 foot above adja	icent grade N/A		
c) Total net are	a of flood op	enings in A9.b		N/A sq	in			
, d) Engineered f	lood openin	gs? 🗌 Yes 🔀 N	0 4					
	SE	CTION B - FLOOD I	NSURA	NCE RATE	MAP (FIRM) INFO	ORMATION	·	
B1, NFIP Communit	•			B2. County			B3. State	
	-				· vairio			
CITY OF LYNN HA		-		BAY			Florida	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	levation(s) e Base Flood Depth)	
12005C 0331								
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item.B9:								
FIS Profile 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								
B12. Is the building	located in a	Coastal Barrier Reso	urces Sy	stem (CBRS	area or Otherwise	e Protected Area (C	JEAN TES X NO	
Designation D	ate:	🗆	CBRS	☐ OPA				
		•						

IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and	Policy Number:				
1819 MAINE AVE		Code			
City	Company NAIC Number				
LYNN HAVEN	Florida 324	44			
SECTION C – BUILDING	ELEVATION INFORMAT	TON (SURVEY RE	EQUIRED)		
C1. Building elevations are based on: Constru	iction Drawings*	ding Under Constru	action* ☐ Finished Construction		
*A new Elevation Certificate will be required whe		200			
C2. Elevations – Zones A1–A30, AE, AH, A (with BF Complete Items C2.a–h below according to the bases)	ouilding diagram specified i	n Item A7. In Puert	AE, AR/A1–A30, AR/AH, AR/AO. o Rico only, enter meters.		
Benchmark Utilized: TOPNET LIVE - RTK+ SOUT					
Indicate elevation datum used for the elevations	in items a) through h) below	w.			
☐ NGVD 1929 ☐ NAVD 1988 ☐ Oth					
Datum used for building elevations must be the s	same as that used for the B	FE.	Check the measurement used.		
a) Top of bottom floor (including basement, crav	wispace, or enclosure floor)	·	15.34 🔀 feet 🗌 meters		
b) Top of the next higher floor	25.0	20 200	N/A feet meters		
c) Bottom of the lowest horizontal structural men	mber (V Zones only)		N/A feet meters		
d) Attached garage (top of slab)	(N/A feet meters		
e) Lowest elevation of machinery or equipment (Describe type of equipment and location in Company)	servicing the building Comments)		15.32 🔀 feet 🗌 meters		
f) Lowest adjacent (finished) grade next to build	ding (LAG)		13.7 🔀 feet 🗌 meters		
g) Highest adjacent (finished) grade next to buil			14.7 🔀 feet 🗌 meters		
h) Lowest adjacent grade at lowest elevation of structural support			N/A feet meters		
And the control of th	OR, ENGINEER, OR ARC	CHITECT CERTIF	ICATION		
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		☐ Yes ☒ No	Check here if attachments.		
Certifier's Name	License Number		annilling.		
CURTIS C HAMPTON	107370	-	HINTIS HAMP		
Title CIVIL ENGINEER			No. 86188 *		
CIVIL ENGINEER Company Name			─ * No. 86188 \ *		
COBALT ENGINEERING			*		
Address			STATE OF OF		
12005 DELANY ROAD			LORIDA		
City	State	ZIP Code	William STONAL ENGINE		
LA MARQUE	Texas	77568	The state of the s		
Signature	Date	Telephone	Ext.		
	09/29/2022	(409) 354-5925	anant/company and (2) building aures		
Copy all pages of this Elevation Certificate and all attac		iiciai, (2) insurance	ageni/company, and (3) building owner.		
Comments (including type of equipment and location,					
1. TBM EL = 13.80 FEET; SET PK NAIL IN CENTER 2. CENTERLINE STREET EL = 13.80 FEET (MAINE 3. SECTION C2a & C2e ARE BASED ON 1.5 FEET	E AVE): 13.72 FEET (W 19	TH ST)			

IMPORTANT: In these spaces, copy the correspor	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Suite, a	Policy Number:						
1819 MAINE AVE							
City	State	ZIP Code	Company NAIC Number				
LYNN HAVEN	Florida	32444					
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 complete Sections A, B, and C. For Items E1-E4, use enter meters.	E1–E5. If the Certifica natural grade, if ava	ate is intended to support a ilable. Check the measure	a LOMA or LOMR-F request, ement used. In Puerto Rico only,				
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).							
Top of bottom floor (including basement, crawlspace, or enclosure) is		feet mete	rs 🔲 above or 🗌 below the HAG.				
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet mete	rs 🔲 above or 🔲 below the LAG.				
E2. For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in the diagrams) of the building is	l openings provided in	n Section A Items 8 and/or					
E3. Attached garage (top of slab) is		feet mete	rs ☐ above or ☐ below the HAG.				
E4. Top of platform of machinery and/or equipment servicing the building is		feet _ mete	rs ☐ above or ☐ below the HAG.				
E5. Zone AO only: If no flood depth number is availar floodplain management ordinance? Yes	able, is the top of the	bottom floor elevated in ac n. The local official must	ccordance with the community's certify this information in Section G.				
SECTION F - PROPERTY OF	WNER (OR OWNER	S REPRESENTATIVE) C	ERTIFICATION				
The property owner or owner's authorized represents community-issued BFE) or Zone AO must sign here.	ative who completes the statements in Se	Sections A, B, and E for Zoections A, B, and E are co	one A (without a FEMA-issued or rrect to the best of my knowledge.				
Property Owner or Owner's Authorized Representation	ve's Name						
Address	Ci	ty S	tate ZIP Code				
Signature	Da	ate To	elephone				
Comments			-				
,		·					
			Check here if attachments.				
			Check here if attachments.				

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE							
Building Street Address (including Apt., Unit, St	No. Policy Number:							
1819 MAINE AVE								
City	State	ZIP Code	Company NAIC Number					
LYNN HAVEN	Florida	32444						
SECTIO	N G - COMMUNI	TY INFORMATION (OPTIO	NAL)					
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Compl	ster the community's floodpl lete the applicable item(s) a	ain management ordinance can complete nd sign below. Check the measurement					
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 Zone AO.	on E for a building	located in Zone A (without	a FEMA-issued or community-issued BFE)					
G3. The following information (Items G4-	G10) is provided fo	or community floodplain ma	nagement purposes.					
G4. Permit Number	G5. Date Permit	Issued	G6. Date Certificate of Compliance/Occupancy Issued					
G7. This permit has been issued for:	New Construction	n 🔲 Substantial Improvem	ent					
G8. Elevation of as-built lowest floor (including of the building:	g basement) -	[☐ feet ☐ meters Datum					
G9. BFE or (in Zone AO) depth of flooding at t	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 loc	cation, per C2(e), if	f applicable)						
			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 A	Policy Number:		
1819 MAINE AVE			
City	State	ZIP Code	Company NAIC Number
LYNN HAVEN	Florida	32444	

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 (09/28/2022)



Photo Two

Photo Two Caption RIGHT (09/28/2022)

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE		
Building Street Address (including A	Policy Number:		
1819 MAINE AVE			
City	State	ZIP Code	Company NAIC Number
LYNN HAVEN	Florida	32444	

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 (09/28/2022)



Photo Four

FEMA Form 086-0-33 (12/19)

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 Flevation 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					-	Policy Numb			
GEORGE E & MAR		AND.							
A2. Building Street A	Company N	AIC Number:							
1819 MAINE AVE									
City	·								
LYNN HAVEN		· · · · · · · · · · · · · · · · · · ·	<u> </u>	Florida		32444			
• •	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)								
		YNN HAVEN PLAT N				<u> </u>	-		
A4. Building Use (e.	.g., Residen	tial, Non-Residential,	Addition,	Accessory, e	tc.) <u>RESIDENTI</u>	<u> </u>			
A5. Latitude/Longitu	ıde: Lat. <u>3</u>	0° 13' 49.07" N	Long. 8	5° 39' 40.34"	W Horizontal	Datum: NAD 1	927 🔀 NAD 1983		
A6. Attach at least 2	2 photograpl	ns of the building if the	Certific	ate is being u	sed to obtain flood	insurance.			
A7. Building Diagra	m Number	<u>1B</u>							
A8. For a building w	ith a crawls	pace or enclosure(s):							
a) Square foots	age of crawls	space or enclosure(s)			N/A sq ft				
b) Number of po	ermanent flo	od openings in the cra	awispace	e or enclosure	(s) within 1.0 foot	above adjacent gra	ide N/A		
c) Total net are	a of flood op	enings in A8.b		N/A sqin					
d) Engineered	flood openin	gs? 🗌 Yes 🖾 N	lo						
A9. For a building wi	ith an attach	ed garage:							
a) Square foota		•		N/A sq ft					
		od openings in the att	ached g	arage within	I.0 foot above adja	cent grade N/A			
c) Total net are				N/A sq					
d) Engineered f	lood openin	gs? ∐ Yes 🔀 N	lo						
	SE	CTION B - FLOOD I	NSURA	NCE RATE	MAP (FIRM) INFO	DRMATION			
B1. NFIP Communit	y Name & C	ommunity Number		B2. County	Name		B3. State		
CITY OF LYNN HA	VEN - 1200	09		BAY	•		Florida		
B4. Map/Panel Number	B5, Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)		
12005C 0331	12005C 0331 H 06/02/2009 06/02/2009 X UNSHADED N/A								
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ☐ FIS Profile ☑ FIRM ☐ Community Determined ☐ Other/Source:									
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X 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: CBRS OPA									

MPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY US							
Building Street Address (including Apt., Unit, Suite, and	Policy Number:						
1819 MAINE AVE							
E IM. An experience contribute approximate		Code	Company NAIC Number				
LYNN HAVEN	Florida 324						
SECTION C – BUILDING	ELEVATION INFORMAT	ION (SURVEY RE	:QUIRED)				
C1. Building elevations are based on: Constru	ction Drawings*	ling Under Constru	ction*				
*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: TOPNET LIVE - RTK+ SOUT							
Indicate elevation datum used for the elevations		v.					
Datum used for building elevations must be the s	arrie as triat used for the b	re.	Check the measurement used.				
a) Top of bottom floor (including basement, crav	vispace, or enclosure floor)		15.34 🔀 feet 🗌 meters				
b) Top of the next higher floor			N/A feet meters				
c) Bottom of the lowest horizontal structural mer	nber (V Zones only)		N/A feet meters				
d) Attached garage (top of slab)			N/A feet meters				
Example 2			15.32 🔀 feet 🗌 meters				
f) Lowest adjacent (finished) grade next to build	ling (LAG)		13.7 🔀 feet 🗌 meters				
g) Highest adjacent (finished) grade next to build	ding (HAG)		14.7 🔀 feet 🗌 meters				
h) Lowest adjacent grade at lowest elevation of structural support	deck or stairs, including		N/A feet 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	License Number						
CURTIS C HAMPTON	107370		TIS HAMP				
Title			No. 86188 *				
CIVIL ENGINEER Company Name			No. 86188 *				
COBALT ENGINEERING			*				
Address			STATE OF				
12005 DELANY ROAD			LORIDA				
City	State	ZIP Code	SIONAL ENGINEER				
LA MARQUE	Texas	77568					
Signature	Date	Telephone	Ext.				
	09/29/2022	(409) 354-5925	1/0) 1/1				
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)							
1. TBM EL = 13.80 FEET; SET PK NAIL IN CENTER 2. CENTERLINE STREET EL = 13.80 FEET (MAINE 3. SECTION C2a & C2e ARE BASED ON 1.5 FEET	AVE); 13.72 FEET (W 197	TH ST)	N C2e IS USED FOR THE A/C PAD				

IMPORTANT: In these spaces, copy the correspo	nding information f	rom Section A.	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite,	and/or Bldg. No.) or F	O. Route and Box No.	Policy Number:					
1819 MAINE AVE								
City	State	ZIP Code	Company NAIC Number					
LYNN HAVEN	Florida	32444						
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 complete Sections A, B,and C. For Items E1–E4, us 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 floo the next higher floor (elevation C2.b in the diagrams) of the building is	d openings provided	in Section A Items 8 and/o ☐ feet ☐ mete						
E3. Attached garage (top of slab) is		feet	ers					
E4. Top of platform of machinery and/or equipment servicing the building is		feet	ers					
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 O	WNER (OR OWNER	'S REPRESENTATIVE) C	ERTIFICATION					
The property owner or owner's authorized represent community-issued BFE) or Zone AO must sign here	ative who completes . The statements in S	Sections A, B, and E for Zections A, B, and E are co	one A (without a FEMA-issued or rrect to the best of my knowledge.					
Property Owner or Owner's Authorized Representat	ive's Name							
Address	C	ity S	tate ZIP Code					
Signature	D	ate To	elephone					
Comments								
			·					
·			•					
			•					
			Check here if attachments.					

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number:						
1819 MAINE AVE						
City	State	ZIP Code	Company NAIC Number			
LYNN HAVEN	Florida	32444				
SECTION	N G - COMMUNITY INF	ORMATION (OPTION	AL)			
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete the	community's floodplain applicable item(s) and	management ordinance can complete sign below. Check the measurement			
G1. The information in Section C was takengineer, or architect who is authorized that in the Comments area below.)	en from other documenta ed by law to certify eleva	ition that has been signation information. (Indica	ed and sealed by a licensed surveyor, te the source and date of the elevation			
G2. A community official completed Section Zone AO.	on E for a building locate	d in Zone A (without a F	EMA-issued or community-issued BFE)			
G3. The following information (Items G4-	G10) is provided for com	munity floodplain mana	gement purposes.			
G4. Permit Number	G5. Date Permit Issued	d	6. Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for:	New Construction S	Substantial Improvemen	t			
G8. Elevation of as-built lowest floor (including of the building:	g basement) ———	□	feet meters			
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 lo	nation ner C2(e) if applic					
Comments (including type of equipment and ic	cation, per Oz(e), il applic	able)				
			Check here if attachments.			

OMB No. 1660-0008

See Instructions for Item A6. Expiration Date: November 30, 2022

IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE		
Building Street Address (including A	Policy Number:		
1819 MAINE AVE			
City	State	ZIP Code	Company NAIC Number
LYNN HAVEN	Florida	32444	

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 FRONT (09/28/2022)

ELEVATION CERTIFICATE



Photo Two

Photo Two Caption RIGHT (09/28/2022)

OMB No. 1660-0008

Expiration Date: November 30, 2022 Continuation Page

ELEVATION CERTIFICATE 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. Policy Number: 1819 MAINE AVE ZIP Code State Company NAIC Number City Florida 32444 LYNN HAVEN

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 (09/28/2022)



Photo Four

Photo Four Caption LEFT (09/28/2022)