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

			FOR INSU	RANCE COMPANY USE		
A1. Building Owner's Name DALLAS FINCH				ber:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2012 CORAL DRIVE				NAIC Number:		
City LYNN HAVEN,	•			-		
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 4, BLOCK D, NORTH HARBOUR; PID#08925-163-000; O.R.B. 3852, PAGE 906					
A4. Building Use (e.g., Residential, Non-Residential, Additio	n, Accessory,	etc.) RESIDENT	IAL	-		
A5. Latitude/Longitude: Lat. 30.2392 DEGREES Long.	-85,6713DEG	REES Horizontal I	Datum: NAD	1927 🔀 NAD 1983		
A6. Attach at least 2 photographs of the building if the Certifi	cate is being ι	used to obtain flood	insurance.			
A7. Building Diagram Number 1B .						
A8. For a building with a crawlspace or enclosure(s):						
a) Square footage of crawlspace or enclosure(s)		N/A sq ft				
b) Number of permanent flood openings in the crawlspace	æ or enclosur	e(s) within 1.0 foot a	bove adjacent gr	ade N/A		
c) Total net area of flood openings in A8.b	N/A sqir	1		-		
d) Engineered flood openings?		1				
A9. For a building with an attached garage:	A9. For a building with an attached garage:					
a) Square footage of attached garageN/A sq ft						
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A						
c) Total net area of flood openings in A9.b N/A sq in						
d) Engineered flood openings?						
SECTION B – FLOOD INSURA B1. NFIP Community Name & Community Number	7		RIVIATION	D2 Ctate		
CITY OF LYNN HAVEN 120009	B2. County BAY	Name		B3. State Florida		
Number Date Ef	nel B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date B8. Flood Zone(s) B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)					
12005C0331 H 06-02-2009 06-02-2009 AE 8.00'						
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						

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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. 2012 CORAL DRIVE			Policy Number:		
NN HAVEN, State ZIP Code 32444		Company NAIC Number			
SECTION C - BUILDING EL	EVATION INFORMA	TION (SURVEY RE	EQUIRED)	-	
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when concern the complete Items C2.a—h below according to the build Benchmark Utilized: NGS BE0764 Indicate elevation datum used for the elevations in it NGVD 1929 NAVD 1988 Other/S Datum used for building elevations must be the same a) Top of bottom floor (including basement, crawlspub) Top of the next higher floor c) Bottom of the lowest horizontal structural member of Attached garage (top of slab) e) Lowest elevation of machinery or equipment sen (Describe type of equipment and location in Comf) Lowest adjacent (finished) grade next to building	on Drawings* Bu construction of the build VE, V1-V30, V (with E ding diagram specified Vertical Datum tems a) through h) belo Source: e as that used for the sace, or enclosure floo er (V Zones only) vicing the building ments) (LAG)	ilding Under Constru ling is complete. BFE), AR, AR/A, AR/ in Item A7. In Puert : NAVD88 ow.	Check the n 9.5 \times feet N/A \times feet N/A \times feet N/A \times feet 4.1 \times feet	neasurement used. meters meters meters meters meters meters meters meters	
g) Highest adjacent (finished) grade next to building	(HAG)		<u>5.4</u>	meters	
h) Lowest adjacent grade at lowest elevation of dec structural support	k or stairs, including	 	feet	meters	
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION					
This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment un Were latitude and longitude in Section A provided by a lice	my best efforts to inte der 18 U.S. Code, Sed	rpret the data availal ction_1001	ble. I understand	evation information. I that any false ere if attachments.	
Certifier's Name MARK C. DRAGON Title PRESIDENT Company Name DRAGON LAND SURVEY, INC. Address 5328 CHERRY STREET City PANAMA CITY, Signature Copy all pages of this Elevation Certaincate and all attachme		ZIP Code 32404 Telephone (850) 763-7997 fficial, (2) insurance a	FL La	24 ce Sea 1-2022 S No. 4842 and (3) building owner.	
Comments (including type of equipment and location, per THE LATITUDE AND LONGITUDE WERE OBTAINED FI EQUIPMENT LISTED IN ITEM C2e IS AN AIR CONDITION.	ROM THE BAY COUN	TY PROPERTY API	PRAIŠERS WEE	BSITE. THE	

ELEVATION CERTIFICATE

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

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: 2012 CORAL DRIVE 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 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 ☐ feet ☐ meters the diagrams) of the building is ☐ above or ☐ below the HAG. E3. Attached garage (top of slab) is above or below the HAG. ☐ feet ☐ meters 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 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 ZIP Code Address City State Signature Date Telephone Comments Check here if attachments.

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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. 2012 CORAL DRIVE			No.	Policy Number:		
City LYNN HAVEN,	State Florida	ZIP Code 32444		Company NAIC Number		
SECTIO	N G - COMMUNIT	Y INFORMATION (OPTIC	NAL)			
The local official who is authorized by law or on Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Comple	er the community's floodplete the applicable item(s) a	lain mar ınd sign	nagement ordinance can complete below. Check the measurement		
G1. The information in Section C was take engineer, or architect who is authorized data in the Comments area below.)	ed by law to certify e	elevation information. (Indi	icate the	e source and date of the elevation		
G2: A community official completed Section or Zone AO.	on E for a building lo	ocated in Zone A (without	a FEMA	a-issued or community-issued BFE)		
G3. The following information (Items G4-	G10) is provided for	community floodplain ma	nageme	ent purposes.		
G4. Permit Number	G5. Date Permit Is	ssued		ate Certificate of ompliance/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:						
G9. BFE or (in Zone AO) depth of flooding at t	he 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	ation, per C2(e), if a	upplicable)				
		F				
				☐ Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Building Street Address (including 2012 CORAL DRIVE	Apt., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:	
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 VIEW 12-14-2020

Clear Photo One



Photo Two

Photo Two Caption REAR VIEW 12-14-2020

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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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. 2012 CORAL DRIVE			Policy Number:
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 RIGHT SIDE VIEW 12-14-2020

Clear Photo Three

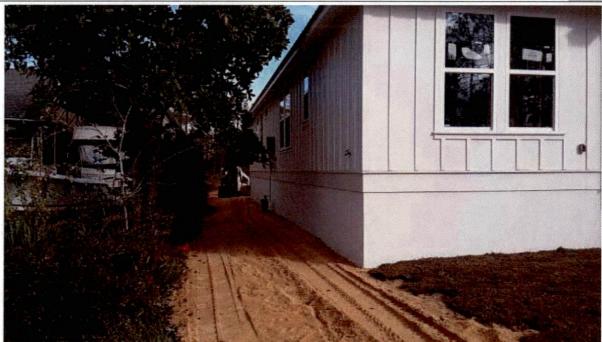


Photo Fou

Photo Four Caption LEFT SIDE VIEW 12-14-2020

Clear Photo Four

