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.

SECTION A – PROPERTY INFORMATION					FOR INSUF	RANCE COMPANY USE
A1. Building Owner's Name					Policy Num	ber:
JOE & KERRY HOLT	JOE & KERRY HOLT					
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2014 COUNTRY CLUB DRIVE				Company N	IAIC Number:	
City	State			ZIP Code		
LYNN HAVEN	Florida			32444		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL NUMBER: 08732-501-000, LOTS 3 AND 4, TROPICAL BAY						
A4. Building Use (e.g., Residentia	al, Non-Residential, A	ddition	, Accessory,	etc.) RESIDEN	ITIAL	
A5. Latitude/Longitude: Lat. 30°1	15'17.0"N L	ong. 8	5°37'33.8"W	Horizonta	l Datum: NAD 1	927 X NAD 1983
A6. Attach at least 2 photographs	of the building if the	Certific	ate is being ι	sed to obtain floo	d insurance.	
A7. Building Diagram Number	1B					
A8. For a building with a crawlspa	ce or enclosure(s):					
a) Square footage of crawlsp.	ace or enclosure(s)			N/A sq ft		
b) Number of permanent flood	d openings in the crav	wispace	e or enclosure	e(s) within 1.0 fool	t above adjacent gra	ide N/A
c) Total net area of flood oper	nings in A8.b		N/A sq in	r.		
d) Engineered flood openings	? Yes 🗵 No)				
A9. For a building with an attached	I garage:					
a) Square footage of attached	garage		402.00 sq ft			
b) Number of permanent flood	d openings in the attac	ched g	arage within	1.0 foot above adj	acent grade 0	
c) Total net area of flood open	c) Total net area of flood openings in A9.b 0.00 sq in					
d) Engineered flood openings	d) Engineered flood openings?					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Con CITY OF LYNN HAVEN	nmunity Number 120009		B2. County BAY	Name		B3. State Florida
B4. Map/Panel B5. Suffix B Number	6. FIRM Index Date	Effe	M Panel	B8. Flood Zone(s)	B9. Base Flood El (Zone AO, use	levation(s) Base Flood Depth)
12005C0219 H 0	6-02-2009	06-02-2	rised Date 2009	AE	7.0	
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 DPA						

OMB No. 1660-0008 **ELEVATION CERTIFICATE** 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: 2014 COUNTRY CLUB DRIVE ZIP Code Company NAIC Number City State LYNN HAVEN Florida 32444 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. Check the measurement used. a) Top of bottom floor (including basement, crawlspace, or enclosure floor) X feet meters N/A ☐ feet meters b) Top of the next higher floor N/A feet meters c) Bottom of the lowest horizontal structural member (V Zones only) 8.3 |X | feet ☐ meters d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building N/A ☐ feet meters (Describe type of equipment and location in Comments) 5.0 ☐ meters X feet Lowest adjacent (finished) grade next to building (LAG) 6.5 X feet ☐ meters g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs, including N/A ☐ feet meters structural support 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. ⊠Yes □ No Were latitude and longitude in Section A provided by a licensed land surveyor? Check here if attachments. Certifier's Name License Number ROGER BLAIN ANGLIN 5521 Title PROFESSIONAL SURVEYOR AND MAPPER Company Name ANGLIN SURVEYING, LLC Address 3712 CORNELIA LANE State ZIP Code PANAMA CITY Florida 32409 Telephone Signature Date Fxt 12-19-2020 (850) 271-4055 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)

ELEVATION CERTIFICATE

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

MPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSU	JRANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, at 2014 COUNTRY CLUB DRIVE	nd/or Bldg. No.) o	r P.O. Route and Box No	Policy Nur	nber:	
City	State	ZIP Code	Company	NAIC Number	
LYNN HAVEN	Florida	32444	-		
SECTION E - BUILDING E FOR ZON	LEVATION INFO	ORMATION (SURVEY) NE A (WITHOUT BFE)	NOT REQUIRE	D)	
For Zones AO and A (without BEE), complete Items E complete Sections A, B, and C. For Items E1=E4, use enter meters.	1-E5. If the Certinatural grade, if	ficate is intended to suppayailable. Check the mea	oort a LOMA or L surement used.	OMR-F request, In Puerto Rico only,	
E1. Provide elevation information for the following an the highest adjacent grade (HAG) and the lowest	d check the appro adjacent grade (ppriate boxes to show wh LAG).	ether the elevati	on is above or below	
a) Top of bottom floor (including basement, crawlspace, or enclosure) is		[] feet [] n	neters 🔲 abov	ve or Delow the HAG.	
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet 🔲 n	neters 🔲 abov	ve or Delow the LAG.	
E2. For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in	openings provide	d in Section A Items 8 an	nd/or.9 (see page	es 1–2 of Instructions),	
the diagrams) of the building is		feet m	neters 🗀 abov	re or Delow the HAG.	
E3. Attached garage (top of slab) is	<u> </u>	feet 🗍 in	neters 🔲 abov	re or Delow the HAG.	
E4. Top of platform of machinery and/or equipment servicing the building is		[] feet [] m	neters 🔲 abov	re 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?					
SECTION F - PROPERTY OW	NER (OR OWNE	R'S REPRESENTATIVE) CERTIFICATION	NC NC	
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	: : : :		3		
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OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, S 2014 COUNTRY CLUB DRIVE	Policy Number:					
City	State	ZIP Code	Company NAIC Number			
LYNN HAVEN		32444				
SECTION	ON G - COMMUNITY INFO	RMATION (OPTIONAL)				
Sections A, B, C (or E), and G of this Elevation	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 Riccionly, 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 Sect or Zone AO.	ion E for a building located	in Zone A (without a FEM	A-Issued or community-issued BFE)			
.G3 The following information (Items G4-	-G10) is provided for comm	unity floodplain managem	ent purposes.			
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for: New Construction Dubstantial Improvement						
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	the building site:		meters Datum			
G10. Community's design flood elevation:		feet	meters Datum			
Local Official's Name	Tit	tle				
Community Name	Te	elephone.				
Signature	Da	ate .·				
Comments (including type of equipment and loc	cation, per C2(e), if applicat	ole)	 			
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r						
•						
:			•			
			Check here if attachments.			

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

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Building Street Address (including A 2014 COUNTRY CLUB DRIVE	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

12/16/2020

Clear Photo One

Photo Two

Photo Two Caption

Clear Photo Two

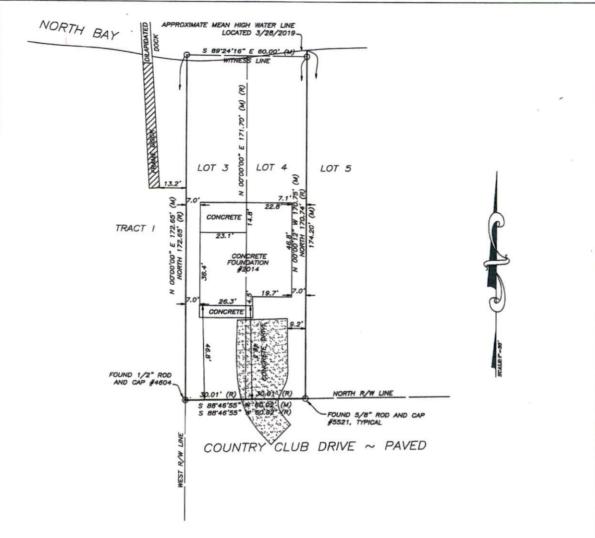
BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, copy the co	rresponding information	from Section A	FOR INCLIDANCE COMPANY LISE
Building Street Address (including Apt., Unit, 2014 COUNTRY CLUB DRIVE	FOR INSURANCE COMPANY USE Policy Number:		
City	State	ZIP Code	Company NAIC Number
LYNN HAVEN	Florida	32444	Company texto Number
If submitting more photographs than will fit with: date taken; "Front View" and "Rear photographs must show the foundation with	on the preceding page.	affix the additional photogra	phs below. Identify all photographs Left Side View." When applicable, s, as indicated in Section A8.
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e	Photo Three	• <u>, , , </u>	
Photo Three Caption	•	•	Clear Photo Three
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Photo Four Caption	Photo Four		Clear Photo Four



CERTIFIED TO: STEPHEN JOSEPH HOLT JR. AND KERRY RATHEL HOLT INNOVATIONS FEDERAL CREDIT UNION CORNERSTONE TITLE AGENCY, LLC FIRST AMERICAN TITLE INSURANCE COMPANY

SYMBOLS AND ABBREVIATIONS:

"= DEGREES WHEN USED IN A BEARING OR ANGLE, '= MINUTES WHEN USED IN A BEARING OR ANGLE, '= FEET WHEN USED IN A DISTANCE N= NORTH, E= EAST, S= SOUTH, W= WEST, (R)= RECORD DATA, (M)= MEASURED DATA, R= RANGE FCM= FDUND CONCRETE MONUMENT, FIR= FDUND IRON ROD,

LEGAL DESCRIPTION (PROVIDED BY OTHERS)
LOTS 3 AND 4, TROPICAL BAY, ACCORDING TO THE PLAT THEREOF, AS RECORDED IN PLAT BOOK 14, PAGE 15, IN THE OFFICE OF THE
CLERK OF THE CIRCUIT OF BAY COUNTY, FLORIDA.

SURVEYOR'S NOTES.

1) SOURCE OF INFORMATION IS A DEED FURNISHED BY THE CLIENT.

2) BEARRING BASE: S 88*46*35* V FOR NORTH R/V LINE COUNTRY CLUB DRIVE.

3) THIS IS A SURFACE SURVEY ONLY. ALL IMPROVEMENTS ARE VISIBLE AS SHOWN UNLESS NOTED, NO ATTEMPT WAS MADE TO LOCATE UNDERGROUND IMPROVEMENTS OR UTILITIES.

4) FIELD VOIRY WAS COMPLETED ON 12/16/20.

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 12005C0219 H, INDICATES THAT THE PARCEL SHOWN HEREON IS WITHIN ZONE 'AE'.

7) THERE ARE NO VISIBLE ENCROACHMENTS EXCEPT AS SHOWN HEREON.

8) THIS SURVEY NOT VALID WITHOUT THE DRIGINAL RAISED SEAL AND SIGNATURE OF A FLORIDA LICENSED SURVEYOR AND MAPPER.

9) IN SOME INSTANCES IT IS NECESSARY TO EXAGGERATE THE LOCATION OF SOME FIXTURES, SUCH AS FENCES, ADDITIONAL PROPERTY CORNERS FOUND, ETC. IN DROPER TO MICH EARLY REPRESENT THE AFOREMENTIONED ITEMS.

SURVEYOR'S CERTIFICATE.
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 5J-17 OF THE FLORIDA ADMINISTRATIVE CODE PURSUANT TO SECTION 472.027 OF THE
FLORIDA STATUTES.

ROCER BCAIM/ANGLIN

BOUNDARY SURVEY PREPARED BY ANGLIN SURVEYING, LLC

PROFESSIONAL SURVEYOR AND MAPPER
FOR: STEPHEN JOSEPH HOLT JR, AND KERRY RATHEL HOLT 32409

DATE SIGNED 1/2 7 70

DRAWN BY: KC APPROVED BY: RA FIELD BOOK 197, PAGE 56 PROJECT #20-1388

(850) 271-4055