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.

SEC	CTION A - PROPERTY	INFOR	MATION		FOR INSUF	RANCE COMPANY USE
A1. Building Owner's Name PETER J. GLEASON						ber:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2206 WINDJAMMER DRIVE						AIC Number:
City LYNN HAVEN		-	State Florida	· · ·	ZIP Code 32444	
A3. Property Description (Lot of PARCEL ID: 08925-140-000, N	·		, ,	gal Description, et	c.)	 ,
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL						
A5. Latitude/Longitude: Lat. 30.23808^N Long. 85.67344^W Horizontal Datum: NAD 1927 NAD 1983						
A6. Attach at least 2 photogra	phs of the building if the	Certific	ate is being ι			.
A7. Building Diagram Number				•		
A8. For a building with a crawl	space or enclosure(s):					
a) Square footage of craw				N/A sq ft		
b) Number of permanent fi	lood openings in the cra	wispac	e or enclosum	 e(s) within 1.0 foot	l above adjacent gra	ide: N/A
c) Total net area of flood o			N/A sqin	•		
d) Engineered flood openi	·	<u></u>				
A9. For a building with an attac		•				
a) Square footage of attact			N/A saft			
b) Number of permanent fl					acont arada NIA	
c) Total net area of flood o	•	•			acent grade ivit	.
•	· · · · · · · · · · · · · · · · · · ·		N/A sq	In		
d) Engineered flood opening	ngs? 🗌 Yes 🗵 No	3				
<u> </u>	ECTION B - FLOOD IN	ISURA	NCE RATE	MAP (FIRM) INF	ORMATION	
B1. NFIP Community Name &		<u> </u>	B2. County			B3. State
City of Lynn Haven 120009	,		Bay			Florida
B4. Map/Panel B5. Suffix Number	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)
12005C0331 H 06-02-2009 06-02-2009 AE 8.0						
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	i 🗀 N	GVD 1929	☑ NAVD 1988	Other/Source:	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes X No						
Designation Date: CBRS OPA						
	<u> </u>	, L. 1.	0			
<u> </u>						

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IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2206 WINDJAMMER DRIVE			Policy Number:		
City	te ZIP	Code	Company NAIC Number		
LYNN HAVEN Flor	rida 324	44			
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					
C1. Building elevations are based on: Construction	The state of the s	ding Under Constru	iction*		ned 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: GPS Vertical Datum: NAVD 1988					
Indicate elevation datum used for the elevations in it		w.			
☐ NGVD 1929 ☑ NAVD 1988 ☐ Other/S					
Datum used for building elevations must be the sam	e as that used for the E	BFE.	Check	the me	asurement used.
a) Top of bottom floor (including basement, crawlsp	ace, or enclosure floor)		feet	meters
b) Top of the next higher floor	,		500000000000000000000000000000000000000	feet	meters
Colo Pili Properti de la Colo Colo Personal Paris de Colo Pilipa d	- 0/7				
c) Bottom of the lowest horizontal structural member	r (V Zones only)			feet	meters
d) Attached garage (top of slab)			5.9 ×	feet	meters
 e) Lowest elevation of machinery or equipment sen (Describe type of equipment and location in Com 	ments)	***************************************	7.5 ×	•	meters
 f) Lowest adjacent (finished) grade next to building 	(LAG)		4.2 ×	feet	meters meters
g) Highest adjacent (finished) grade next to building	(HAG)		5.3 ×	feet	meters
 h) Lowest adjacent grade at lowest elevation of dec structural support 	k or stairs, including		4.2 ×] feet	meters
SECTION D - SURVEYOR	ENGINEER OR ARC	CHITECT CERTIE	CATION		
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 lice	ensed land surveyor?	☐ Yes ⊠ No	Che	ck here	if attachments.
Certifier's Name	License Number				
Jeremy W. Fletcher	LS6712				CONTRACTOR OF THE PARTY OF THE
Title				The state of the s	
Professional Surveyor and Mapper			0	19	90
Company Name J W Fletcher Surveying			de	$\int_{-\infty}^{\infty}$	1100000
Address 204 Monument Avenue				- William	The Court of the C
City	State	ZIP Code			
Port St Joe	Florida	32456			
Signature Jeremy W. Fletcher Digitally signed by Jeremy W. Fletcher Date: 2021.02.22 (6.40:38 -0500*	Date 02-22-2021	Telephone (850) 227-7322	Ext.		
Copy all pages of this Elevation Certificate and all attachme	nts for (1) community of	ficial, (2) insurance a	agent/comp	anv. and	(3) building owner.
Comments (including type of equipment and location, per C2(e), if applicable) Latitude and Longitude provided by Google Earth Application. The lowest machinery is an air conditioner on the north side of the home. The Concrete Porch on the rear of the home is Elevation 6.4' (NAVD 88)					
Job No: 2362 FB: 155					

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	paces, copy the corresp			•		FOR INSURA	NCE COMPANY US
Building Street Address (2206 WINDJAMMER DR	(including Apt., Unit, Suite RIVE	, and/or Bldg. No.)	or P.O. Rou	te and Bo	ox No.	Policy Number	•
City LYNN HAVEN		State Florida	ZIP (3244	Code 14		Company NAI	C Number
······································	SECTION E - BUILDING FOR 2	S ELEVATION INF	ORMATIO	N (SUR\ HOUT E	/EY NOT	REQUIRED)	· · · · · · · · · · · · · · · · · · ·
For Zones AO and A (wit complete Sections A, B, enter meters.	thout BFE), complete Item and C. For Items E1–E4, t	is E1–E5. If the Ceruse natural grade, it	tificate is int available. (ended to theck the	support a	LOMA or LOMI ment used. In P	R-F request, uerto Rico only,
E1. Provide elevation in the highest adjacent	formation for the following t grade (HAG) and the low	and check the app vest adjacent grade	ropriate box (LAG).	es to sho	w whethe	r the elevation is	above or below
crawispace, or e		· · · · · · · · · · · · · · · · · · ·	 	⊠ feet	meter	s 🔲 above or	r 🔲 below the HAG
 b) Top of bottom flo crawlspace, or e 	oor (including basement, enclosure) is			⊠ feet	☐ meter	s 🗌 above o	r 🔲 below the LAG.
E2. For Building Diagrar the next higher floor	ms 6–9 with permanent flo	od openings provid	ed in Sectio	n A Item	s 8 and/or	9 (see pages 1-	-2 of Instructions),
the diagrams) of the			_ .	⊠ feet	meter meter	s 🗌 above o	r Delow the HAG
E3: Attached garage (to	• • • • • • • • • • • • • • • • • • • •	- :		⊠ feet	meter	s above or	r Delow the HAG
 1 Top of platform of m servicing the buildin 	nachinery and/or equipmer ig is	nt ————		⊠feet	meter	s 🔲 above o	r ☐ below the HAG
5. Zone AO only, If no floodplain managem	flood depth number is avanent ordinance? Yes	ailable, is the top of	the bottom t nown: The	iloor elev local offi	ated in acc	cordance with the	e community's nation in Section G.
Si	ECTION F - PROPERTY	OWNER (OR OWN	FR'S REPI	ZESENT/	ATIVE) CE	RTIFICATION	
The property owner or ov	wner's authorized represe	ntative who comple	tes Sections	A. B. an	d E for Zo	ne A (without a	FEMA-issued or
community-issued BFE)	or Zone AO must sign her	re. The statements i	in Sections /	A, B, and	E are con	rect to the best o	of my knowledge.
Property Owner or Owne	er's Authorized Representa	ative's Name	, .		•		· ,
Address	· · · · · · · · · · · · · · · · · · ·	,	City		Sta	ate	ZIP Code
		• • •	Date		— · Te	lephone	
Signature					• •	•	
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Signature					1		here if attachments.

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IMPORTANT: In these spaces, copy the co	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit 2206 WINDJAMMER DRIVE	Policy Number:					
City LYNN HAVEN	State Florida	ZIP Code 32444	Company NAIC Number			
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 So or Zone AO.	ection E for a building loca	ted in Zone A (without a FEM	A-issued or community-issued BFE)			
G3. The following information (Items 6)	34-G10) is provided for co	mmunity floodplain managem	ent purposes.			
G4. Permit Number	G5. Date Permit Issu	ed 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 (included of the building:	ling basement)	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:			t meters Datum			
Local Official's Name		Title				
Community Name	·*:	Telephone	 			
Signature		Date				
Comments (including type of equipment and	Comments (including type of equipment and location, per C2(e), if applicable)					
	,					
			,			
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•			Check here if attachments.			
			in Super usion arradiuments.			

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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IMPORTANT: In these spaces, copy th	FOR INSURANCE COMPANY USE Policy Number:		
Building Street Address (including Apt., 1 2206 WINDJAMMER DRIVE			
City	State	ZIP Code	Company NAIC Number
LYNN HAVEN	Florida	32444	Souther the state of the state

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 NORTH SIDE OF HOME

Clear Photo One



Photo Two

Photo Two Caption NORTHWEST SIDE OF HOME

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including 2206 WINDJAMMER 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 SOUTH SIDE OF HOME

Clear Photo Three



Photo Four

Photo Four Caption WEST SIDE OF HOME

Clear Photo Four