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 Ce	ertificate and all attach	ments for	r (1) communi	ty official, (2	) iņsun	ance agent/compan	ıy, and (3) building owner.
SECTION A - PROPERTY INFORMATION						ļ	FOR INSU	RANCE COMPANY USE
A1. Building Owner's Name ALDI INC.				<u>-</u> .		Policy Num	ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. i 2260 HWY 77 S						Company N	NAIC Number:	
City LYNN HAVEN	City State LYNN HAVEN Florida					ZIP Code 32444		
	•	nd Block Numbers, Ta ICIAL RECORD BOO			gal Descripti	on, etc	c.)	_
A4. Building Use (	e.g., Resider	ntial, Non-Residential,	Addition	, Accessory,	etc.) COI	MMER	CIAL	
A5. Latitude/Longi	tude: Lat. <u>N</u>	30°13'27.5422"	Long. V	/85°39'.0485	35" Hor	izontal	Datum: NAD 1	1927 🗵 NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being u	sed to obta	in flood	f insurance.	
A7. Building Diagra	am Number	1B						
A8. For a building	with a crawls	pace or enclosure(s):						
a) Square foo	tage of crawl	space or enclosure(s)			N/A sq	ft		i
b) Number of	ermanent flo	ood openings in the cr	awispac	e or enclosure	e(s) within 1	.0 foot	above adjacent gra	ade N/A
c) Total net ar	ea of flood op	penings in A8.b		N/A sqir				
d) Engineered	flood openir	igs? ☐ Yes 🗵 N	10					
A9. For a building v	A9. For a building with an attached garage:							
a) Square foot	a) Square footage of attached garage N/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 are	ea of flood op	enings in A9.b		N/A sq	in	,		
d) Engineered	d) Engineered flood apenings?							
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Commun CITY OF LYNN HA	•	Community Number	-	B2. County BAY	Name	,		B3. State Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date			B8. Flood Zone(s)	B9. Base Flood I (Zone AO, us		Elevation(s) se Base Flood Depth)
12005C0332	Н	06-02-2009	06-02-2	2009	Α		21.00	
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 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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## **ELEVATION CERTIFICATE**

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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. 2260 HWY 77 S	Policy Number:					
City State ZIP Code LYNN HAVEN Florida 32444	Company NAIC Number					
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
C1. Building elevations are based on: Construction Drawings* Building Under Const  *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, Al Complete Items C2.a–h below according to the building diagram specified in Item A7. In Pue Benchmark Utilized: 46-10-A03V  Vertical Datum: NAVD88	R/AE, AR/A1-A30, AR/AH, AR/AO.					
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.  a) Top of bottom floor (including basement, crawlspace, or enclosure floor)  b) Top of the next higher floor	Check the measurement used.  23.00   feet   meters  N/A   feet   meters					
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A ☐ feet ☐ meters					
d) Attached garage (top of slab)	N/A   feet   meters					
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	22.02 🔀 feet 🗌 meters					
f) Lowest adjacent (finished) grade next to building (LAG)	21.45 🗶 feet 🗌 meters					
g) Highest adjacent (finished) grade next to building (HAG)	23.02 X feet  meters					
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	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 TONY G. SYFRETT 5943	Internal Control of the Control of t					
Title PROFESSIONALSURVEYOR AND MAPPER	Place					
Company Name SOUTHEASTERN SURVEYING & MAPPING	」 <sup>(5)</sup> [ 東京 <b>Sea</b> l [ 東京 。 ]					
Address 1130 HIGHWAY 90	Here					
City State ZIP Code CHIPLEY Florida 32428	THE STATE OF THE PARTY OF THE P					
Signature Date Telephone (850) 638-0790	Ext. 3207					
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) C2 E)THE LOWEST ELEVATION OF MACHERY SERRVICING THE BUILDING IS A TRANSFORMER AS THE A/C UNITS ARE ON TOP OF THE ROOF.						
BFE AS SHOWN HEREON WAS TAKEN FROM LETTER CIRCULATED BY CITY OF LYNN HAVEN DATED MARCH 27, 2017 AND WAS MADE SPECIFICALLY FOR THIS SITE SIGNED BY JAMES H. SIONONA. ANY QUESTIONS REGARDING BFE OR CONTENTS REGARDING SAID LETTER CONTACT CITY OF LYNN HAVEN.						

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#### **ELEVATION CERTIFICATE**

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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. **Policy Number:** 2260 HWY 77 \$ 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, 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, 00.02 crawlspace, or enclosure) is b) Top of bottom floor (including basement, 1.55 crawispace, or enclosure) is 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 N/A the diagrams) 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 N/A 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 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 TONY G. SYFRETT ZIP Code Address City State 1130 HIGHWAY 96 CHIPLEY Florida 32428 Date Telephone Signature 08-04-2022 (850) 638-0790 Comment\$ Check here if attachments.

## **ELEVATION CERTIFICATE**

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IMPORTANT: In these spaces, copy the corr	esponding informat	ion from Section A.		FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, S 2260 HWY 77 S	Policy Number:			
City LYNN HAVEN	State Florida	ZIP Code 32444		Company NAIC Number
		INFORMATION (OPTIC	SMALS	
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevatior used in Items G8–G10. In Puerto Rico only, er	Certificate. Complet	r the community's floodp e the applicable item(s) a	lain mar and sign	nagement ordinance can complete below. Check the measurement
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)	en from other docum ed by law to certify e	entation that has been si levation information. (Ind	igned ar icate the	nd sealed by a licensed surveyor, e source and date of the elevation
G2. A community official completed Sect or Zone AO.	ion E for a building lo	cated 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	ınageme	ent purposes.
G4. Permit Number	G5. Date Permit Is	sued	G6. C	Pate Certificate of ompliance/Occupancy Issued
G7. This permit has been issued for:	New Construction	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	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 a	oplicable)		<del></del>
				☐ Check here if attachments.

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#### **BUILDING PHOTOGRAPHS**

## **ELEVATION CERTIFICATE**

See Instructions for Item A6.

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IMPORTANT: In these spaces, consultations Street Address (including	FOR INSURANCE COMPANY USE Policy Number:		
2260 HWY 77 S			
City	State	ZIP Code	Company NAIC Number
LYNN HAVEN	Florida	32444	1

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 NORTH SIDE

Clear Photo One



Photo Two

Photo Two Caption SOUTH SIDE

Replaces all previous editions.

Clear Photo Two
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### **BUILDING PHOTOGRAPHS**

## **ELEVATION CERTIFICATE**

Continuation Page

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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 Caption EAST SIDE

Clear Photo Three



Photo Four Caption WEST SIDE

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Clear Photo Four Form Page 6 of 6

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