

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

<b>SECTION A - PROPERTY INFORMATION</b>		For Insurance Company Use:
A1. Building Owner's Name Baber Construction and Development		Policy Number
A2. Building Street Address (Including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2312 Country Club Drive City Lynn Haven State FL ZIP Code 32444		Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 37, 38 & 39 Tropical Bay, Plat book 14, Page 15, Public Records of Bay		

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A5. Latitude/Longitude: Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Horizontal Datum:  NAD 1927  NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number 1

A8. For a building with a crawl space or enclosure(s), provide

a) Square footage of crawl space or enclosure(s) _____ sq ft	A9. For a building with an attached garage, provide:
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____ sq in	a) Square footage of attached garage _____ sq ft
c) Total net area of flood openings in A8.b _____ sq in	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____
	c) Total net area of flood openings in A9.b _____ sq in

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number City of Lynn Haven-120009		B2. County Name Bay	B3. State FL
B4. Map/Panel Number 12005C0219	B5. Suffix G	B6. FIRM Index Date 09/18/2002	B7. FIRM Panel Effective/Revised Date 09/18/2002
		B8. Flood Zone(s) AE & X	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 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 (Describe) \_\_\_\_\_

B11. Indicate elevation datum used for BFE in Item B9:  NGVD 1929  NAVD 1988  Other (Describe) \_\_\_\_\_

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Yes  No

Designation Date \_\_\_\_\_  CBRS  OPA

## 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-g below according to the building diagram specified in Item A7.

Benchmark Utilized BM 872 9102 TIDAL 8 Vertical Datum NAVD 88

Conversion/Comments \_\_\_\_\_

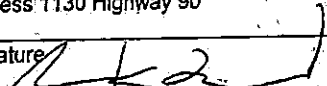
Check the measurement used.

a) Top of bottom floor (Including basement, crawl space, or enclosure floor)	<u>14.40</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V-Zones only)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>12.70</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building. (Describe type of equipment in Comments)	<u>12.45</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<u>11.53</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<u>12.70</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)

## 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.

Check here if comments are provided on back of form.

Certifier's Name Thomas K. Mead, P.S.M.	License Number 5624
Title Project Surveyor	Company Name Southeastern Surveying & Mapping Corp.
Address 1130 Highway 90	City Chipley State FL ZIP Code 32428
Signature 	Date 05/12/07 Telephone 850-638-0790

