U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

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 ARTHUR KINEARD				Policy Num	ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2404 CORAL DRIVE			Company N	IAIC Number:		
City LYNN HAVEN			State FLORIDA		ZIP Code 32444	
A3. Property Description (Lot and PARCEL ID#08925-178-000, LOT	•		• -	scription, etc.)		
A4. Building Use (e.g., Residentia	al, Non-Residential, A	ddition	, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longitude: Lat. N30)d14'16" ι	_ong. ⊻	/85d40'31"	Horizontal Datum	: 🔲 NAD 1	1927 🗵 NAD 1983
A6. Attach at least 2 photographs	of the building if the	Certific	ate is being used to	o obtain flood insura	nce.	
A7. Building Diagram Number	1B					
A8. For a building with a crawlspa	ace or enclosure(s):					
a) Square footage of crawlsp	ace or enclosure(s)		0 sq ft			
b) Number of permanent floo	d openings in the cra	wispac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade0
c) Total net area of flood ope	nings in A8.b0	s	qin			
d) Engineered flood openings	s? ∐Yes ⊠ No)				
A9. For a building with an attache	d garage:					
a) Square footage of attache	d garage0		sq ft			
b) Number of permanent floo	d openings in the atta	ached g	garage within 1.0 foo	ot above adjacent g	rade	0
c) Total net area of flood ope	nings in A9.b	0	sq in			
d) Engineered flood openings	s? ☐ Yes ⊠ No	0				
SEC	TION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMA	TION	·
B1. NFIP Community Name & Cor LYNN HAVEN 120009	mmunity Number	•	B2. County Name BAY		-	B3. State FLORIDA
B4. Map/Panel B5. Suffix Number 12005C0331 H	B6. FIRM Index Date 06/02/2009	E	IRM Panel ffective/ evised Date 06/02/2009	B8. Flood Zone(s)	(Zoi	se Flood Elevation(s) ne AO, use Base od Depth) 11.0
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 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						
			_			

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSU	RANC	E COMPANY US	E	
2404 CORAL DRIVE				Policy Num				
· · ·	ate ORIDA	ZIP (3244	Code 14		Company N	AIĈ N	lumber	
SECTION C – BUILDING EI	EVATION IN	FORMAT	ION (SURV	EY RE	QUIRED)			
C1. Building elevations are based on: Constructi	on Drawings*	☐ Build	ding Under C	onstru	ction* 🗵	Finish	ed Construction	
*A new Elevation Certificate will be required when o	construction of	the buildir	ng is complet	e.				
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE) Complete Items C2.a–h below according to the bui	lding diagram s	specified in	n Item A7. In	A, AR/	AE, AR/A1-A o Rico only, e	A30, A enter i	R/AH, AR/AO. neters.	
Benchmark Utilized:		al Datum:		_	 	—		
Indicate elevation datum used for the elevations in ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/	, ,	n h) belov	V.			,		
Datum used for building elevations must be the san		for the B	 FE.	_				
•			_	4			asurement used.	
a) Top of bottom floor (including basement, crawls	pace, or enclos	ure floor)		5	×		meters	
b) Top of the next higher floor				3	×	feet	meters	
c) Bottom of the lowest horizontal structural memb	er (V Zones on	ly)	NA		<u> </u>		☐ meters	
d) Attached garage (top of slab)				8	×	feet	meters '	
 e) Lowest elevation of machinery or equipment set (Describe type of equipment and location in Cor 	vicing the build nments)	ling	<u> </u>	1	🗵	feet	☐ meters	
f) Lowest adjacent (finished) grade next to building	g (LAG)		4.	7		feet	meters meters	
g) Highest adjacent (finished) grade next to buildin	g (HAG)		6	4	×	feet	meters meters	
 h) Lowest adjacent grade at lowest elevation of de structural support 	ck or stairs, inc	luding	NA.		X	feet	meters	
SECTION D - SURVEYOR	, ENGINEER,	OR ARC	HITECT CE	RTIF	CATION			
This certification is to be signed and sealed by a land su I certify that the information on this Certificate represent statement may be punishable by fine or imprisonment up	s my best effon	ts to interp	oret the data	zed by availai	law to certify ble. I undersi	eleva tand ti	ation information. hat any false	
Were latitude and longitude in Section A provided by a li	icensed land su	ırveyor?	⊠Yes □	No	Chec	k here	if attachments.	
Certifier's Name WILLIAM E. MCDANIEL	License Nur L.B.#5800		9					
Title REGISTERED LAND SURVEYOR		-			1		·	
Company Name SEA LEVEL SURVEYING AND MARPING, INC.		-			/	Pla Se		
Address					- /			
1219 MAINE AVENUE	01-4-		715.0-4-			/	20.18	
City LYNN HAVEN	State FLORIDA		ZIP Code 32444			1.		
Signature	Date 01/30/2018	_	Telephone (850) 265-4					
Copy all pages of this Elevation Certificate and all attachme	ents for (1) com	munity off	icial, (2) insur	ance a	igent/compan	y, and	(3) building owne	r.
Comments (including type of equipment and location, pe	r C2(e), if appli	icable)						
C2(e) AIR CONDITION ON PAD OUTSIDE OF STRUCTURE								

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and 2404 CORAL DRIVE	i/or Bldg. No.) or P.	O. Route and Box No.	Policy Number:	
•	State FLORIDA	ZIP Code 32444	Company NAIC Number	
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 complete Sections A, B,and C. For Items E1–E4, use nenter meters.	–E5. If the Certifica atural grade, if avai	ite is intended to support a ilable. Check the measure	a LOMA or LOMR-F request, ment used. In Puerto Rico only,	
E1. Provide elevation information for the following and the highest adjacent grade (HAG) and the lowest a a) Top of bottom floor (including basement,			r the elevation is above or below	
crawlspace, or enclosure) is		feet meter	rs 🔲 above or 🔲 below the HAG.	
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet mete	rs 🔲 above or 🗌 below the LAG.	
E2. For Building Diagrams 6-9 with permanent flood of	penings provided in	Section A Items 8 and/or	9 (see pages 1–2 of Instructions),	
the next higher floor (elevation C2.b in the diagrams) of the building is			rs 🔲 above or 🔲 below the HAG.	
E3. Attached garage (top of slab) is			rs above or below the HAG.	
E4. Top of platform of machinery and/or equipment servicing the building is		feet _ mete	rs 🔲 above or 🔲 below the HAG.	
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	e, is the top of the b No Dunknowr	oottom floor elevated in ac n. The local official must	cordance with the community's certify this information in Section G.	
SECTION F - PROPERTY OWI	NER (OR OWNER'S	S REPRESENTATIVE) CI	ERTIFICATION	
The property owner or owner's authorized representation community-issued BFE) or Zone AO must sign here. The property owner is a community-issued BFE or Zone AO must sign here.	ve who completes S he statements in Se	Sections A, B, and E for Zo ections A, B, and E are cor	one A (without a FEMA-issued or rect to the best of my knowledge.	
Property Owner or Owner's Authorized Representative	's Name			
Address	City	y St	ate ZIP Code	
Signature	Da	te Te	lephone	
Comments				
			,	
			•	
			Check here if attachments.	

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/ 2404 CORAL DRIVE	No. Policy Number:	
l ,	tate ZIP Code LORIDA 32444	Company NAIC Number
SECTION G - C	OMMUNITY INFORMATION (OPTIO	NAL)
The local official who is authorized by law or ordinance sections A, B, C (or E), and G of this Elevation Certifica used in Items G8–G10. In Puerto Rico only, enter meter	te. Complete the applicable item(s) a	
G1. The information in Section C was taken from a engineer, or architect who is authorized by law data in the Comments area below.)	other documentation that has been sign to certify elevation information. (Indi	ned and sealed by a licensed surveyor, cate the source and date of the elevation
G2. A community official completed Section E for or Zone AO.	a building located in Zone A (without a	FEMA-issued or community-issued BFE)
G3. The following information (Items G4-G10) is p	rovided for community floodplain mai	nagement purposes.
G4. Permit Number G5. Da	te Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	onstruction Substantial Improveme	ent
G8. Elevation of as-built lowest floor (including baseme of the building:	nt)[feet meters Datum
G9. BFE or (in Zone AO) depth of flooding at the building	ng 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 location, pe	r C2(e), if applicable)	
	,	
•		
•		
		Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2404 CORAL DRIVE			FOR INSURANCE COMPANY USE Policy 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 Two

Photo One Caption

Photo Two Caption





Photo Three

Photo Four

Photo Three Caption

Photo Four Caption

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including 2404 CORAL DRIVE	Apt., Unit, Suite, and/or Bldg. No.) o	or P.O. Route and Box No.	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 Six Photo Five

Photo Five Caption

Photo Six Caption

Photo Eight Photo Seven

Photo Seven Caption

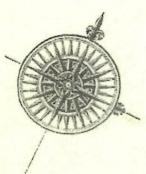
Photo Eight Caption

Sea Level Surveying and Mapping, Inc. 1219 Maine Ave. Lynn Haven, FL 32444

01/25/2018

SALE			Total:	\$300.00
VISA	xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx			
Exp. Date:	xx/xx			
Name:	Kineard, Arthur			
Auth. Code:	878912	QuickBooks Trans. No:		
Trans. ID:	PG0138363988	Merchant No.:	42669650	000254333
x				
Signature				

I agree to pay the total amount shown above in compliance with the cardholder agreement



Sea Level Surveying and Mapping, Inc.

Bus. (850)265-4800 Fax (850)265-4801 1219 Maine Avenue Lynn Haven, FL 32444-2125

Invoice

Job#

Date

		1/25/2018	10883
Bill To	Job Location		
Cineard, Arthur	2404 Coral Drive		

		Terms	File#	
		Due on receipt		
	Description		Amount	
Elevation Certificate Sea	AS I D AN 2 5 2018 I level surveying		300.00	

Total	\$300.00		
Payments/Credits	\$0.00		
Balance Due	\$300.00		