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 Number:					ber:		
CHARLES CARD			 ,,-				
A2, Building Street Box No.	A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number:						IAIC Number:
315 CAROLINA A	.VE						
City				State		ZIP Code	
LYNN HAVEN	<u> </u>			Florida		32444	
<u> </u>	•	and Block Numbers, Ta		•	gal Description, etc	c.)	
		HAVEN (PARCEL ID					
		ntial, Non-Residential,			•		
	_	30° 15' 06.89" N					1927 🔀 NAD 1983
		ohs of the building if the	e Certific	ate is being ι	used to obtain floor	d insurance.	
A7. Building Diagra	am Number	_5					
A8. For a building	with a crawls	space or enclosure(s):					
a) Square foot	tage of craw	rispace or enclosure(s)			N/A sq ft		
b) Number of p	permanent flo	ood openings in the cra	awlspac	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ade N/A
c) Total net are	ea of flood o	penings in A8.b		N/A sqir	1		_
d) Engineered	l flood openir	ngs? 🗌 Yes 🗵 N	No				
A9. For a building w	vith an attacl	hed garage:					
a) Square foot	age of attach	hed garage		N/A sq ft	i		
b) 'Number of p	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A						
c) Total net area of flood openings in A9.b sq in							
d) Engineered	flood openir	ngs? 🗌 Yes 🕱 N	1 0				
		ECTION B - FLOOD I	INSURA	NCE RATE	MAP (FIRM) INF	ORMATION	
B1. NFIP Communi	ity Name & C	Community Number		B2. County	Name		B3. State
CITY OF LYNN HA	4VEN - 1200			BAY			Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	Elevation(s) e Base Flood Depth)
12005C 0218	н	06/02/2009	06/02/	2009	AE	7.0 FEET	
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 eleva	B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:						
B12. Is the building	g located in ε	a Coastal Barrier Reso	ources Sy	/stem (CBRS) area or Otherwis	e Protected Area (0	DPA)? ☐ Yes 🗵 No
Designation Date: CBRS OPA							
<u> </u>							

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IMPORTANT: In these spaces, copy the correspondi	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and	Policy Number:				
315 CAROLINA AVE					
City State ZIP Code		Company NAIC Number			
LYNN HAVEN	Florida	32444			
SECTION C – BUILDING E	LEVATION INFORM	MATION (SURVEY RE	EQUIRED)		
C1. Building elevations are based on: Construction	ction Drawings*	Building Under Constru	ıction* ☑ Finished Construction		
*A new Elevation Certificate will be required when		(A)			
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: TOPNET LIVE - RTK+ SOUTH	HEAST Vertical Datu	ım: _{NAVD} 1988			
Indicate elevation datum used for the elevations in	n items a) through h) b	elow.			
□ NGVD 1929					
Datum used for building elevations must be the sa	ame as that used for th	e BFE.	Check the measurement used.		
a) Top of bottom floor (including basement, crawl	Ispace, or enclosure flo	oor)	9.71 🔀 feet 🗌 meters		
b) Top of the next higher floor			N/A feet meters		
c) Bottom of the lowest horizontal structural mem	ber (V Zones only)		N/A feet meters		
d) Attached garage (top of slab)	,		N/A feet meters		
e) Lowest elevation of machinery or equipment s (Describe type of equipment and location in Co	ervicing the building		9.83 🗶 feet 🗌 meters		
f) Lowest adjacent (finished) grade next to buildi	1,000		4.2 x feet meters		
			□ foot □ motors		
g) Highest adjacent (finished) grade next to build		*	4,7 X feet meters		
 h) Lowest adjacent grade at lowest elevation of d structural support 	leck or stairs, including		4.7 🔀 feet 🗌 meters		
SECTION D - SURVEYO	R, ENGINEER, OR A	ARCHITECT CERTIF	ICATION		
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 surveyo	or? Yes 🗵 No	Check here if attachments.		
Certifier's Name	License Number				
CURTIS C HAMPTON	86188		TIS HAMPSON		
Title			CENSEON		
CIVIL ENGINEER			No. 86188		
Company Name	* * * * * *				
COBALT ENGINEERING & INSPECTIONS - FL, LLC	<u>.</u>		STATE OF O		
Address 515 FAST PARK AVENUE 2ND FLOOR					
515 EAST PARK AVENUE 2ND FLOOR City	State	ZIP Code	Hampto Hampton		
TALLAHASSEE	Florida	32301	n 11:19:52 -05'00'		
Signature	Date 06/08/2023	Telephone (409) 354-5925	Ext.		
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)					
1. TBM EL = 4.33 FEET; SET PK NAIL IN CENTER OF CAROLINA AVE & W 4TH ST AT INTERSECTION 2. CENTERLINE STREET EL = 4.06 FEET (CAROLINA AVE); 4.02 FEET (4TH ST) 3. SECTION C2e IS USED FOR THE A/C PAD					

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, an	Policy Number:				
315 CAROLINA AVE					
City		IP Code	Company NAIC Number		
LYNN HAVEN SECTION E – BUILDING EI		32444	BEOLIDED)		
	E AO AND ZONE A (V		REQUIRED)		
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,					
enter meters. 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, crawlspace, or enclosure) is 		_	s above or below the HAG.		
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet _ meter			
E2. For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in	openings provided in Sec				
the diagrams) of the building is		_	s above or below the HAG		
E3. Attached garage (top of slab) is		_	s above or below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is		_	s 🔲 above or 🔲 below the HAG.		
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes			cordance with the community's certify this information in Section G.		
SECTION F - PROPERTY OW	NER (OR OWNER'S RE	PRESENTATIVE) CE	RTIFICATION		
The property owner or owner's authorized representat community-issued BFE) or Zone AO must sign here. T	ve who completes Section	ons A, B, and E for Zo	ne A (without a FEMA-issued or		
Property Owner or Owner's Authorized Representative	's Name				
Address	City	Sta	ate ZIP Code		
Signature	Date	Те	lephone		
Comments					
			☐ Check here if attachments.		

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, St						
315 CAROLINA AVE						
City	State	ZIP Code	Company NAIC Number			
LYNN HAVEN	Florida	32444				
SECTIO	ON G - COMMUNIT	TY INFORMATION (OPTIO	NAL)			
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Comple					
	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation					
G2. A community official completed Section Zone AO.	on E for a building	located in Zone A (without a	a FEMA-issued or community-issued BFE)			
G3. The following information (Items G4-	G10) is provided fo	or community floodplain mai	nagement purposes.			
G4. Permit Number	G5. Date Permit.	Issued	G6. Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for:	New Construction	n Substantial Improvement	ent			
G8. Elevation of as-built lowest floor (including of the building:	g basement) -	[feet meters			
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	eation ner C2(e) if	annlicable)				
Continents (including type of equipment and loc	auon, per Oz(e), ii	аррисавіе				
			Check here if attachments.			

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Building Street Address (including A	Policy Number:		
315 CAROLINA AVE			
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 (06/08/2023)



Photo Two

Photo Two Caption RIGHT (06/08/2023)

FEMA Form 086-0-33 (12/19)

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

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IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including A	Policy Number:		
315 CAROLINA AVE			
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 REAR (06/08/2023)



Photo Four

Photo Four Caption LEFT (06/08/2023)