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 INSURANCE COMPANY USE							
A1. Building Owner's Name Arbor Landing@ Mill Bayou, LLC					Policy Num		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4201 Highway 390					Company N	IAIC Number:	
City State ZIP Code Panama City Florida 32404							
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax Parcel Number 11344-000-010 Building No. 10, Units 1001-1024						
A4. Building Use (e	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential						
A5. Latitude/Longitude/Longitude/	ude: Lat. 3	0° 14' 03.587"	Long. 8	5° 35' 27.833	" Horizonta	I Datum: NAD 1	1927 × NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being u	used to obtain floo	d insurance.	
A7. Building Diagra	m Number	1B					
A8. For a building v	vith a crawls	pace or enclosure(s):					I I
a) Square foots	age of crawl	space or enclosure(s)			0.00 sq ft		
b) Number of p	ermanent flo	ood openings in the cr	awlspac	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ade 0
c) Total net are	a of flood o	penings in A8.b		0.00 sq ir	Ĭ		-
d) Engineered	flood openir	ngs? Yes X	No				
A9. For a building w	ith an attach	ed garage:					
a) Square foots	ige of attach	ed garage		0.00 sq ft			
b) Number of p	ermanent flo	ood openings in the at	tached q	arage within	1.0 foot above adi	acent grade 0	
	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0 c) Total net area of flood openings in A9.b 0.00 sq in						
d) Engineered flood openings? Yes No							
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Community Name & Community Number B2. County Name B3. State							
City of Lynn Haven	120009			Bay			Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
12005C0352	Н	06-02-2009	06-02-2	vised Date 2009	×	N/A	
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: LOMR Case No. 15-04-6857P, April 4, 2016							
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

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IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or 4201 Highway 390	Policy Number:			
City Stat Panama City Flor		IP Code 2404	Company NAIC Number	
SECTION C - BUILDING ELI	EVATION INFORM	ATION (SURVEY R	EQUIRED)	
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–h below according to the building diagram specified in Item A7. In Puerto Ricc only, enter meters. Benchmark Utilized: NGS K 290 ~ EL. = 26.696				
a) Top of bottom floor (including basement, crawlsp	ace, or enclosure flo	or)	33.6 X feet meters	
b) Top of the next higher floor			44.5 🔀 feet 🗌 meters	
c) Bottom of the lowest horizontal structural membe	r (V Zones only)	-	N/A ☐ feet ☐ meters N/A ☐ feet ☐ meters	
d) Attached garage (top of slab)			1474 E lect E lineters	
e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Com	ments)		33.5 x feet meters	
f) Lowest adjacent (finished) grade next to building	(LAG)		32.5 X feet meters	
g) Highest adjacent (finished) grade next to building	(HAG)		33.0 X feet meters	
 h) Lowest adjacent grade at lowest elevation of decistructural support 	k or stairs, including		N/A feet meters	
SECTION D - SURVEYOR,	ENGINEER, OR A	RCHITECT 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 surveyor?				
Certifier's Name	License Number		Manifest Manifesters	
W. Todd Tindell	4958		ODD TINO	
Title Land Surveyor			- Commercial	
Company Name Buchanan & Harper, Inc. Address 735 W. 11th Street			No. 4958 * ORIO. ORIO.	
City Panama City	State Florida	ZIP Code 32401	ED LAND SHITT	
Signature Digitally signed by Wilson T Tindel Dean: 2022,10.05 07.02.49 - 05.00	Date 09-26-2022	Telephone (850) 763-7427	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) C2e is the top elevation of an HVAC pad. ***THE SEAL APPEARING ON THIS DOCUMENT WAS AUTHORIZED BY W. TODD TINDELL PSM NO. 4958 ON DATE OF DIGITAL SIGNATURE*** B&H Job No. 12233; FB 1138, Page 73				

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/o	Policy Number:				
•		ZIP Code	Company NAIC Number		
	orida	32404			
SECTION E – BUILDING ELE FOR ZONE	VATION INFORMA AO AND ZONE A		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 		leet lmeter	rs 🔲 above or 🔲 below the HAG.		
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 	 		rs 🔲 above or 🔲 below the LAG.		
E2. For Building Diagrams 6-9 with permanent flood op-	enings provided in S	ection 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		leet meter	rs above or below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is			rs		
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes		tom floor elevated in ac	cordance with the community's		
SECTION F - PROPERTY OWN	ER (OR OWNER'S F	REPRESENTATIVE) CI	ERTIFICATION		
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The					
Property Owner or Owner's Authorized Representative's	Name				
Address	City	St	ate ZIP Code		
Addicas					
Signature	Date	Te	elephone		
		Тє			
Signature		Te			
Signature		Te			
Signature		Te			
Signature		Τε 			
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ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, St 4201 Highway 390	Policy Number:				
City Panama City	State ZIP C Florida 3240		Company NAIC Number		
SECTIO	ON G - COMMUNITY INFORMATIO	N (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 Secti or Zone AO.	on E for a building located in Zone A	\ (without a FEM/	1-issued or community-issued BFE)		
G3. The following information (Items G4-	G10) is provided for community floo	dplain manageme	ent purposes.		
G4. Permit Number	G5. Date Permit Issued		Date Certificate of compliance/Occupancy Issued		
G7. This permit has been issued for:] New Construction ☐ Substantial	Improvement			
G8. Elevation of as-built lowest floor (including of the building:	j basement)	feet	meters Datum		
G9. BFE or (in Zoné AO) depth of flooding at t	the building site:		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, per C2(e), if applicable)					
			Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, c	FOR INSURANCE COMPANY USE Policy Number:		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4201 Highway 390			
City	State	ZIP Code	Company NAIC Number
Panama City	Florida	32404	**************************************

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 View

Clear Photo One



Photo Two

Photo Two Caption Left Side View

Clear Photo Two
Form Page 5 of 6

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, c	FOR INSURANCE COMPANY USE		
Building Street Address (including 4201 Highway 390	Apt., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
Panama City	Florida	32404	

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 Right Side View

Clear Photo Three



Photo Four

Photo Four Caption Rear View

Clear Photo Four Form Page 6 of 6