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 INSUR	ANCE COMPANY USE	
A1. Building Owner's Name Hilltop Pointe LP						Policy Numb	oer:	
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4514 Hilltop Lane 					Company N	AIC Number:		
City		State				ZIP Code	,	
Panama City	y				32405			
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax Parcel No. 11518-000-000. Clubhouse							
A4. Building Use (e.g., Residen	tial, Non-Residential,	Addition,	Accessory, e	etc.) A	ccessory E	Building	
A5. Latitude/Longi	tude: Lat. 30	13' 50.2"	Long. 85	5 36' 54.4"	i	Horizontai D	Datum: NAD 1	927 🗵 NAD 1983
A6. Attach at least	2 photograpi	hs of the building if the	e Certific	ate is being u	sed to ol	otain flood i	nsurance.	
A7. Building Diagra	am Number	` 1B						
A8. For a building	with a crawls	pace or enclosure(s):						
a) Square foo	tage of crawls	space or enclosure(s)			0.00	sq ft		•
b) Number of	permanent flo	od openings in the cra	awispace	e or enclosure	e(s) within	n 1.0 foot a	bove adjacent gra	ide: 0
c) Total net ar	ea of flood op	enings in A8.b		0.00 sq in				
d) Engineered	l flood openin	gs? Yes 🗵 N	10					
A9. For a building v	with an attach	ed garage:						
a) Square foot	tage of attach	ed garage		0.00 sq ft				
b) Number of	permanent flo	ood openings in the at	tached g	arage within	1.0 foot a	ibove adjad	ent grade 0	
,	c) Total net area of flood openings in A9.b 0.00 sq in							
d) Engineered	d) Engineered flood openings?							
ATTION TO BE AND INCOME. THE MAD FIRM INCOMMATION								
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name B3. State						B3. State		
B1. NFIP Community Name & Community Number City of Lynn Haven 120009				Bay				Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/	B8. Flo Zone(s		B9. Base Flood E (Zone AO, us	levation(s) e Base Flood Depth)
12005C0351	н	06-02-2009	06-02-2		x		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:								
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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FOR INSURANCE COMPANY USE 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. **Policy Number:** 4514 Hilltop Lane Company NAIC Number ZIP Code State City Florida 32405 Panama City SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) ☐ Building Under Construction* | Finished Construction Construction Drawings* C1. Building elevations are based on: *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 Rico only, enter meters. Benchmark Utilized: FDOT 46-87-A37 ~ EL. = 15.68 Vertical Datum: NAVD 88 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. Check the measurement used. 40.3 □ meters a) Top of bottom floor (including basement, crawlspace, or enclosure floor) N/A ☐ feet meters b) Top of the next higher floor N/A ☐ feet meters c) Bottom of the lowest horizontal structural member (V Zones only) N/A ☐ meters ☐ feet d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building 40.2 meters (Describe type of equipment and location in Comments) 39.6 ☐ meters f) Lowest adjacent (finished) grade next to building (LAG) 40.2 |X| feet meters g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs, including meters N/A ☐ feet structural support 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? Check here if attachments. No. 4958

*
No. 4958 License Number Certifier's Name 4958 W. Todd Tindell Title Land Surveyor Company Name Buchanan & Harper, Inc. Address 735 W. 11th Street ZIP Code State City Florida 32401 Panama City Telephone Date Signature (850) 763-7427 01-10-2022 Digitally signed by William T Tinder Date: 2022.01.10 10:25:02 -06'00' white 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) ***THE SEAL APPEARING ON THIS DOCUMENT WAS AUTHORIZED BY W. TODD TINDELL PSM NO. 4958 ON DATE OF DIGITAL SIGNATURE*** C2e is the top elevation of an HVAC pad. B&H Job No. 12151; FB 1084, Page 43

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IMPORTANT: In these spaces, copy the correspondin	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/o	Policy Number:				
,		IP Code	Company NAIC Number		
- Linding Oily		2405			
	AO AND ZONE A (V	VITHOUT 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, 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 	·	_	rs 🔲 above or 🔲 below the LAG.		
E2. For Building Diagrams 6–9 with permanent flood op	enings provided in Se	ction 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			rs 🔲 above or 🔲 below the HAG.		
E5. Zone AO only: If no flood depth number is available floodplain management ordinance?	, is the top of the botto No Unknown.	om floor elevated in ac The local official must	cordance with the community's certify this information in Section G.		
SECTION F - PROPERTY OWN	ER (OR OWNER'S R	EPRESENTATIVE) CI	ERTIFICATION		
The preparity supports of outports sutherized representative	who completes Sect	ions A. B. and F for Zo	one A (without a FEMA-issued or		
community-issued BFE) or Zone AO must sign here. The	statements in Section	ons A, B, and E are cor	rrect to the best of my knowledge.		
Property Owner or Owner's Authorized Representative's	Name				
Address	City	St	ate ZIP Code		
Signature	Date	Te	elephone		
Comments					
		•			
	,				
			☐ Check here if attachments.		

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IMPORTANT: in these spaces, copy the corre	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, St 4514 Hilltop Lane	No. Policy Number:				
City Panama City	State Florida	ZIP Code 32405	Company NAIC Number		
SECTIO	N G – COMMUN	TY INFORMATION (OPTIC	NAL)		
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 Section or Zone AO.	on E for a building	located in Zone A (without	a FEMA-issued or community-issued BFE)		
G3. The following information (Items G4-	G10) is provided t	for community floodplain ma	nagement purposes.		
G4. Permit Number	G5. Date Permi	t Issued	G6. Date Certificate of Compliance/Occupancy Issued		
G7. This permit has been issued for:	New Construction	on Substantial Improvem	ent		
G8. Elevation of as-built lowest floor (including of the building:) basement)		feet meters Datum		
G9. BFE or (in Zone AO) depth of flooding at t	he 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 location, per C2(e), if applicable)					
			Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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IMPORTANT: In these spaces, c	FOR INSURANCE COMPANY USE Policy Number:		
Building Street Address (including 4514 Hilltop Lane			
City	State	ZIP Code	Company NAIC Number
Panama City	Florida	32405	

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 - West Side of Building

Clear Photo One



Photo Two

Photo Two Caption Left Side View - North Side of Building

Clear Photo Two

BUILDING PHOTOGRAPHS

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Continuation Page

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			•
IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., L 4514 Hilltop Lane	Init, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
Panama City	Florida	32405	

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 - South Side of Building

Clear Photo Three



Photo Four

Photo Four Caption Rear View - East Side of Building

Clear Photo Four