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 INSUI	RANCE COMPANY USE		
A1. Building Owner's Name ASHLEY H, FINCH TRUSTEE				Policy Num	ber:			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.					Company N	NAIC Number:		
516 2ND STREET	516 2ND STREET EAST							
City LYNN HAVEN						ZIP Code 32444		
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 13, BLOCK A, PLAT OF BAY PARK MANOR, PLAT BOOK 1, PAGE 15							
A4. Building Use (e.g., Resider	ntial, Non-Residential,	Addition	, Accessory,	etc.) RESIDEN	——————————————————————————————————————		
A5. Latitude/Longi	tude: Lat. <u>N</u>	N30d15'14.965"	Long. V	V85d38'34.50	03" Horizonta	Datum: NAD	1927 🗷 NAD 1983	
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being ι	used to obtain floor	d insurance.		
A7. Building Diagra	am Number	<u>1B</u>						
A8. For a building	with a crawls	space or enclosure(s):						
a) Square foo	tage of craw	Ispace or enclosure(s)	r		N/A sq ft			
b) Number of p	permanent flo	ood openings in the cr	awlspac	e or enclosur	e(s) within 1.0 foot	above adjacent gra	ade <u>N/A</u>	
c) Total net an	ea of flood o	penings in A8.b		N/A sq ir	1			
d) Engineered	flood openir	ngs? 🗌 Yes 🔲 N	No.					
A9. For a building v	A9. For a building with an attached garage:							
a) Square footage of attached garage600.00 sq ft								
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 are	c) Total net area of flood openings in A9.b N/A sq in							
d) Engineered flood openings?								
<u>-</u>	SE	ECTION B – FLOOD I	NSURA	NCE RATE	MAP (FIRM) INF	ORMATION		
					B3. State			
120009 LYNN HAVEN BAY						Florida		
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)		Base Flood Elevation(s) (Zone AO, use Base Flood Depth)	
0219	Н	06-02-2009	06-02-	2009	AE	7.0		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: [FIS Profile								
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)? Tyes 🗷 No								
Designation Date: CBRS OPA								

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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FÖR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 516 2ND STREET EAST				Policy Number:	
	• •	Code 444	Comp	any NAIC I	Number
SECTION C - BUILDING	ELEVATION INFORMA	ATION (SURVEY R	EQUIRI	ED)	
C1. Building elevations are based on: Construc	ction Drawings* 🔲 Bu	uilding Under Constru	iction*	⊠ Finisi	ned Construction
*A new Elevation Certificate will be required when		· =			·
C2, Elevations – Zones A1–A30, AE, AH, A (with BFE Complete Items C2.a–h below according to the bi Benchmark Utilized: 872 9102	E), VE, V1–V30, V (with uilding diagram specified Vertical Datun	in Item A7. In Puert	AE, AR	/A1–A30, / only, enter ———	AR/AH, AR/AO. meters.
Indicate elevation datum used for the elevations in		ow.			
☐ NGVD 1929 ☑ NAVD 1988 ☐ Othe Datum used for building elevations must be the sa		DEC			 -
*			Ch	eck the me	asurement used.
 a) Top of bottom floor (including basement, craw 	space, or enclosure floo	or):	9.50	× feet	meters
b) Top of the next higher floor	•		19.50	feet	meters
c) Bottom of the lowest horizontal structural mem	ber (V Zones only)		N/A	⊠ feet	meters
d) Attached garage (top of slab)	-	<u> </u>	6.96	× feet	meters
 e) Lowest elevation of machinery or equipment s (Describe type of equipment and location in Co 	ervicing the building omments)		9.00	⊠ feet	meters
f) Lowest adjacent (finished) grade next to buildi	ng (LAG)		5.33		meters meters
g) Highest adjacent (finished) grade next to build	ing (HAG)		6.55	× feet	meters
 h) Lowest adjacent grade at lowest elevation of d structural support 	eck or stairs, including		6.96	★ feet	☐ meters
SECTION D - SURVEYO	R, ENGINEER, OR AR	CHITECT CERTIF	ICATIO	N	
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					e if attachments.
Certifier's Name	License Number				David
DAVID JON BARTLETT P.S.M. Title	4018		<u> </u>	k	_
PROFESSIONAL SURVEYOR & MAPPER		,	1	D JON BARRIO	Bartlett
Company Name DEWBERRY ENGINEERS INC.				No. 4018	\20022507.
Address		·		STATE OF	8 06
203 ABERDEEN PARKWAY		_	A SOL	SURVEYOR	7 ire 14:53:33
City PANAMA CITY	State Florida	ZIP-Code 32405	Π.		
					-05'00'
Signature	Date 07-06-2023	Telephone (850) 522-0644	Ext.		
Copy all pages of this Elevation Certificate and all attach	ments for (1) community	official, (2) insurance	agent/co	mpany, an	d (3) building owner.
Comments (including type of equipment and location, parties item C2(g) is an air conditioner item C2 (n) is the front entrance to the garage	per C2(e), if applicable)	•		٠	
The state of the s					
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		•			

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 516 2ND STREET EAST	Policy Number:				
City	State	ZIP Code	Company NAIC Number		
LYNN HAVEN	. Florida	32444			
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–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			rs 🔲 above or 🔲 below the HAG.		
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet mete	rs		
E2. For Building Diagrams 6–9 with permanent flood	openings 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		feet _ mete	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	rs 🔲 above or 🔲 below the HAG.		
E5. Zone AO only: If no flood depth number is availabed floodplain management ordinance? Yes	ole, is the top of the bot	ttom floor elevated in ac The local official must	cordance with the community's certify this information in Section G.		
SECTION F - PROPERTY OW	NER (OR OWNER'S I	REPRESENTATIVE) CI	ERTIFICATION		
The property owner or owner's authorized representat community-issued BFE) or Zone AO must sign here. T	ive who completes Sec	ctions A, B, and E for Zo	one A (without a FEMA-issued or		
Property Owner or Owner's Authorized Representative					
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 corr		FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, S 516 2ND STREET EAST	No.	Policy Number:				
City LYNN HAVEN	1	Company NAIC Number				
SECTION	ON G - COMMUNITY INFORMATION (OPTIC	ONAL)				
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 tak engineer, or architect who is authoriz data in the Comments area below.)	ten from other documentation that has been sized by law to certify elevation information. (Inc	igned and dicate the	sealed by a licensed surveyor, source and date of the elevation			
G2. A community official completed Sect or Zone AO.	ion E for a building located in Zone A (without	t a FEMA-	issued or community-issued BFE)			
G3. The following information (Items G4-	-G10) is provided for community floodplain ma	anagemer	nt purposes.			
G4. Permit Number	G5. Date Permit Issued		ate Certificate of empliance/Occupancy Issued			
G7. This permit has been issued for:	New Construction Substantial Improven	nent				
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 lo	cation, per C2(e), if applicable)					
			☐ Check here if attachments.			

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Building Street Address (including A	Policy Number:		
516 2ND STREET EAST			
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

Clear Photo One



Photo Two

Photo Two Caption REAR

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Ap	Policy Number:		
516 2ND STREET EAST			
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 SIDE

Clear Photo Three

Photo Four

Photo Four

Photo Four Caption

Clear Photo Four

