12347 CWSI Job# 0223-0520

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: Policy Number **BUILDING OWNER'S NAME** Larry McMinnis Company NAIC Number BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 613 Missouri Avenue CITY STATE ZIP CODE 32444 FI Lynn Haven PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lots 9, 10 and 11, Block 96, Lynn Haven. BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential HORIZONTAL DATUM: SOURCE: GPS (Type): LATITUDE/LONGITUDE (OPTIONAL) USGS Quad Map Other: (##° - ##' - ##.##" or ##.####") ■ NAD 1927 ■ NAD 1983 SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B3. STATE **B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME** 120009 Bay Lynn Haven, City of **B7. FIRM PANEL** B9. BASE FLOOD ELEVATION(S) B4. MAP AND PANEL B5. SUFFIX B8. FLOOD ZONE(S) B6. FIRM INDEX DATE EFFECTIVE/REVISED DATE (Zone AO, use depth of flooding) NUMBER 9-18-02 AE 6.00 12005C0331 9-18-02 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9 Community Determined Other (Describe): ☐ FIS Profile ☑ FIRM NAVD 1988 Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) ☐ Building Under Construction* C1. Building elevations are based on: Construction Drawings* *A new Elevation Certificate will be required when construction of the building is complete. 2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) C3. 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 C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion. Datum NGVD 1929 Conversion/Comments Elevation reference mark used 335-1 Does the elevation reference mark used appear on the FIRM? Yes No # 3257 o a) Top of bottom floor (including basement or enclosure) 8. 26 ft.(m) Seal o b) Top of next higher floor N/A. ft.(m)Embossed S and Date o c) Bottom of lowest horizontal structural member (V zones only) N/A . __ft.(m) 5. 35 ft.(m) o d) Attached garage (top of slab) o e) Lowest elevation of machinery and/or equipment icense Number, servicing the building (Describe in a Comments area) **7.23 ft.(m) o f) Lowest adjacent (finished) grade (LAG) 3.9ft.(m) o g) Highest adjacent (finished) grade (HAG) 4. 7ft.(m) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade N/A 4/21/03 o i) Total area of all permanent openings (flood vents) in C3.h N/A sq. in. (sq. cm) 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 in Sections A, B, and C 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. LICENSE NUMBER 3257 CERTIFIER'S NAME Hulon E. Walsingham County Wide Surveying, Inc. LB 3929 COMPANY NAME TITLE Registered Land Surveyor ZIP CODE CITY STATE ADDRESS 32401 Panama City FL 958 Jenks Avenue **TELEPHONE** SIGNATURE DATE (850) 769-0345 4/21/03

IMPORTANT: In these spaces, copy the corresponding information from Section	on A.	For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX No.	0.	Policy Number
613 Missouri Avenue CITY STATE	ZIP CODE	Company NAIC Number
Lynn Haven FL	32444	
SECTION D - SURVEYOR, ENGINEER, OR ARCHI	AND THE SECOND STREET, SECOND STREET	:D)
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/compa	any, and (3) building owner.	
COMMENTS	itionar Pad at 7 23 fact	
** C3. e) Lowest elevation of machinery and/or equipment servicing the building is the Air Condi	MUNICI FAU AL 1.23 ICCL	
	4.2.2.	☐ Check here if attachments
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT R	REQUIRED) FOR ZONE AO AND ZO	NE A (WITHOUT BFE)
For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certifical		
Section C must be completed.		0 17 1/ 1
E1. Building Diagram Number_(Select the building diagram most similar to the building for which	this certificate is being completed – see p	ages 6 and 7. If no diagram accurately
represents the building, provide a sketch or photograph.) E2. The top of the bottom floor (including basement or enclosure) of the building isft.(m)in	(cm) 🗆 above or 🗀 below (check one	e) the highest adjacent grade. (Use
natural grade, if available).	(City) Cabove or Cabove (Shook on) alo rigitos dojustri gratar (est
E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building isft.(m)	in.(cm) above the highest adjacent
grade. Complete items C3.h and C3.i on front of form.		
E4. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated		dplain management ordinance?
☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G. SECTION F - PROPERTY OWNER (OR OWNER'S	REPRESENTATIVE) CERTIFICATI	ON
The property owner or owner's authorized representative who completes Sections A, B, C (Items		
issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct	t to the best of my knowledge.	•
PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME		
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ADDRESS	TTY STA	TE ZIP CODE
SIGNATURE	ATE TEL	EPHONE
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COMMENTS		
		☐ Check here if attachments
SECTION G - COMMUNITY INFOR	The state of the s	
The local official who is authorized by law or ordinance to administer the community's floodplain n	nanagement ordinance can complete Sec	tions A, B, C (or E), and G of this Elevatio
Certificate. Complete the applicable item(s) and sign below.	and ambanaed by a lineared aureurer on	ginger or ambitact who is authorized by
G1. The information in Section C was taken from other documentation that has been signed a state or local law to certify elevation information. (Indicate the source and date of the ele		
G2. A community official completed Section E for a building located in Zone A (without a FEN		
G3. The following information (Items G4-G9) is provided for community floodplain management		
G4. PERMIT NUMBER G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF CO	MPLIANCE/OCCUPANCY ISSUED
G7. This permit has been issued for: New Construction Substantial Improvement	8 (m)	Datum:
G8. Elevation of as-built lowest floor (including basement) of the building is: G9. BFE or (in Zone AO) depth of flooding at the building site is:	ft.(m) ft.(m)	Datum:
LOCAL OFFICIAL'S NAME	TITLE	
COMMUNITY NAME	TELEPHONE	
SIGNATURE	DATE	
COMMENTS		<u> </u>
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		Check here if attachments
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DATE: 4-22-03

TIME: 4:00 ·

PAGES 2 + Curer

TO: Debbie - Brig dept

FROM: Onta Ron Putman Const. 1233 Huntington Ridge Rd. Lynn Haven, Fl 32444 Phone 265 3376 265 8076 Fax

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permit # 12347

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FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires July 31, 2002

ELEVATION CERTIFICATE

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