U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28. 2009

M.N. 3.0 ... I.B. 3. A.N. 4077.4

National Flood Insurance Program Important: Read the instructions on pages 1-8. McNeil Carroll Project No: 4277-1 SECTION A - PROPERTY INFORMATION For Insurance Company Use: Building Owner's Name Jeremiah P. Whidden Policy Number Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Company NAIC Number 803 E. 24th Street City Lynn Haven State FL ZIP Code 32444 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 2, Brookwood; Tax Parcel # 11544-100-002 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat. N 30° 13' 16.7" Long. W 85° 38' 24.0" Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 1 A8. For a building with a crawl space or enclosure(s), provide A9. For a building with an attached garage, provide: N/A Square footage of crawl space or enclosure(s) a) Square footage of attached garage sq ft sq ft b) No. of permanent flood openings in the crawl space or b) No. of permanent flood openings in the attached garage N/A enclosure(s) walls within 1.0 foot above adjacent grade walls within 1.0 foot above adjacent grade 0 c) Total net area of flood openings in A8.b N/A sq in c) Total net area of flood openings in A9.b sq in 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 County** FL B4. Map/Panel Number **B7. FIRM Panel** B5. Suffix **B6. FIRM Index** B8. Flood B9. Base Flood Elevation(s) (Zone Date Effective/Revised Date Zone(s) AO, use base flood depth) 12005C0332 H 6/2/2009 6/2/2009 A 28 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. ☐ FIS Profile ☐ FIRM M Community Determined Other (Describe) B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 □ NAVD 1988 Other (Describe) Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes No Designation Date N/A □ CBRS ☐ OPA 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-g below according to the building diagram specified in Item A7. Benchmark Utilized FDOT BM: 46-02-A24V, Published Elevation 17.696 Vertical Datum NAVD'88 Conversion/Comments NGVD'29 Elevation: 18.17 (Converted using CORPSCON version 6.0) Check the measurement used. 30.16 a) Top of bottom floor (including basement, crawl space, or enclosure floor) N/A. b) Top of the next higher floor ☐ feet ☐ meters (Puerto Rico only) C) Bottom of the lowest horizontal structural member (V Zones only) N/A. ☐ feet ☐ meters (Puerto Rico only) 29.61 d) Attached garage (top of slab) Lowest elevation of machinery or equipment servicing the building 29.5 e) (Describe type of equipment in Comments) 29.3 f) Lowest adjacent (finished) grade (LAG) 29.7 g) Highest adjacent (finished) grade (HAG) 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. Check here if comments are provided on back of form. tifier's Name John K. Carr License Number LS 5195 Vice President Company Name McNeil Carroll Surveying, Inc. LB 7546 Address 475 Harrison Avenue # 200 City Panama City State FL **ZIP Code 32401** Date 6/25/2009 Telephone (850) 763-5755 Signature 24

IMPORTANT: In these space	es, copy the corresponding inform	ation from Section A.	For Insurance Company Use:
Building Street Address (including	Apt., Unit, Suite, and/or Bldg. No.) or P.O.		Policy Number
803 E. 24 th Street City Lynn Haven State FL Z	IP Code 32444		Company NAIC Number
SECT	ION D - SURVEYOR, ENGINEER, O	D ADCUITECT CEDTIEICA	TION (CONTINUED)
Comments	Certificate for (1) community official, (2) in	surance agenizompany, and (3) building owner.
1) The Base Flood Elevation liste	ed in Section B., Item B9, was provided b C, Item C2(e) is at the bottom of the air		
Signature /	1	Date 6/25/2009	
and an		a special cody \$600 a figure.	☐ Check here if attachments
SECTION E - BUILDING E	ELEVATION INFORMATION (SURVE	Y NOT REQUIRED) FOR 2	ONE AO AND ZONE A (WITHOUT BFE)
 E1. Provide elevation information grade (HAG) and the lowest a) Top of bottom floor (include b) Top of bottom floor (include clear floor). E2. For Building Diagrams 6-8 w (elevation C2.b in the diagrams). E3. Attached garage (top of slab). E4. Top of platform of machinery. E5. Zone AO only: If no flood designed. 	adjacent grade (LAG). ling basement, crawl space, or enclosure) ling basement, crawl space, or enclosure) ith permanent flood openings provided in ms) of the building is f) is feet meters and/or equipment servicing the building i	is feet is feet Section A Items 8 and/or 9 (see eet meters above or above or below the H/ s feet meters feet meters above or cottom floor elevated in accorda	meters above or below the highest adjacent meters above or below the HAG. meters above or below the LAG. page 8 of Instructions), the next higher floor below the HAG. AG. eters above or below the HAG. nce with the community's floodplain management
SECT	ION F - PROPERTY OWNER (OR O	WNED'S DEDDESENTATIV	/E) CEDTIFICATION
CONTRACTOR OF THE PERSON NAMED IN CONTRA		The second secon	without a FEMA-issued or community-issued BFE)
or Zone AO must sign here. The s	statements in Sections A, B, and E are co	rect to the best of my knowledg	Mithout a FEMA-issued or community-issued BFE)
Property Owner's or Owner's Auth	orized Representative's Name		
Address		City	State ZIP Code
Signature	The second secon	Date	Telephone
The state of the s			and the second of the second o
Comments	9,700 3800 300	A	
			☐ Check here if attachment
	SECTION G - COMMUNIT	Y INFORMATION (OPTION	
The local official who is authorized band G of this Elevation Certificate.		munity's floodplain managemen	t ordinance can complete Sections A. B. C (or E)
G1. The information in Section is authorized by law to cereating the section of	n C was taken from other documentation trifig elevation information. (Indicate the se	hat has been signed and sealed ource and date of the elevation	by a licensed surveyor, engineer, or architect who data in the Comments area below.)
	oleted Section E for a building located in Z		
G3. The following information	(Items G4G9.) is provided for community	/ floodplain management purpo	ses.
G4. Permit Number	G5. Date Permit Issued	G6. Date Certific	cate Of Compliance/Occupancy Issued
G7. This permit has been issued for G8. Elevation of as-built lowest floor	: New Construction Su (including basement) of the building:	bstantial Improvement	(PR) Datum
G9. BFE or (in Zone AO) depth of flo	pooding at the building site:	feet	And the state of t
Local Official's Name	The second secon	Title	
Community Name	•	Telephone	
Signature		Date	
Comments			
The second second			
			Check here if attachments

Building Photographs

See Instructions for Item A6.

	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 803 E. 24 th Street	Policy Number
City Lynn Haven State FL ZIP Code 32444	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page, following.



Front View Date: 6/25/2009



Rear View Date: 6/25/2009

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Federal Emergency Management Agency National Flood Insurance Program

Important: Read the instructions on pages 1-8.

McNeil Carroll Project No: 4277-1

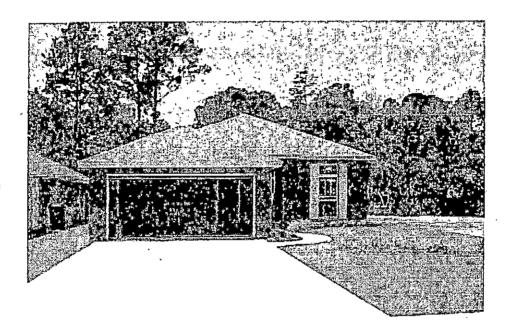
					
	SECTION A - PROPE	RTY INFORMATION	For Insurance Company Use:		
A1. Building Owner's Name Jeremiah P. Whi	Policy Number				
A2. Building Street Address (including Apt., Unit, S 803 E. 24 th Street	Company NAIC Number				
City Lynn Haven State FL ZIP Code	•				
A3. Property Description (Lot and Block Numbers, Lot 2, Brookwood; Tax Parcel # 11544-1	Tax Parcel Number, Legal Descr 00-002	ption, etc.)			
A4. Building Use (e.g., Residential, Non-Residential A5. Latitude/Longitude: Lat. N 30° 13' 16.7" Lc A6. Attach at least 2 photographs of the building if the second secon	ong. W 85° 38' 24.0"	Horizonta! [Datum: ☐ NAD 1927 ☑ NAD 1983		
A7. Building Diagram Number 1 A8. For a building with a crawl space or enclosure(s	N menulala	LAO Established and a second			
Square footage of crawl space or enclosures		A9. For a building with an atta a) Square footage of atta			
b) No. of permanent flood openings in the crav			sq ft dependings in the attached garage		
enclosure(s) walls within 1.0 foot above adj	acent grade <u>N/A</u>		pove adjacent grade <u>0</u>		
c) Total net area of flood openings in A8.b	N/A sq in	c) Total net area of flood	<u> </u>		
		E MAP (FIRM) INFORMATIO			
B1. NFIP Community Name & Community Number City of Lynn Haven - 120009	B2. County Name Bay County		B3. State FL		
B4. Map/Panel Number B5. Suffix B6. I	IRM Index B7. FIRM	Panel B8. Flood	B9. Base Flood Elevation(s) (Zone		
	Date Effective/Rev 2/2009 6/2/20	rised Date Zone(s)	AO, use base flood depth)		
310. Indicate the source of the Base Flood Elevation	(BFE) data or base flood depth of	entered in Item B9.			
☐ FIS Profile ☐ FIRM · · ☑ Com	munity Determined 🔲 O	her (Describe)			
311. Indicate elevation datum used for BFE in Item B9: ☑ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe) 312. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☑ No Designation Date <u>N/A</u> ☐ CBRS ☐ OPA					
SECTION C - B	UILDING ELEVATION INFO	RMATION (SURVEY REQUIR	RED)		
 Building elevations are based on:					
a) Top of bottom floor (including basement, craw	i space, or enclosure floor) 30.		e de la companya del companya de la companya del companya de la co		
b) Top of the next higher floor	N/A		• •		
c) Bottom of the lowest horizontal structural me	mber (V Zones only) N/A	feet meters (Puer	to Rico only)		
d) Attached garage (top of slab)	<u>29.</u> (51 ⊠ feet ☐ meters (Puer	to Rico only)		
 e) Lowest elevation of machinery or equipment (Describe type of equipment in Comments) 	servicing the building 29.	5	io Rico only)		
f) Lowest adjacent (finished) grade (LAG)	<u>29.</u>	3_ ≟ ☑ feet 🔲 meters (Pueri	o Rico only)		
g) Highest adjacent (finished) grade (HAG)	<u>29</u> .	7 🛮 feet 🗌 meters (Puerl	to Rico only)		
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION					
This certification is to be signed and sealed by a land information. I certify that the information on this Certif understand that any false statement may be punished. Check here if comments are provided on back of	ficale represents my best efforts able by fine or imprisonment und	to interpret the data available.	on .		
Certifier's Name John K. Carr	licer	se Number LS 5195	:		
Title Vice President Co	mpany Name McNeil Carroll S	urveying, Inc. LB 7546			
	mpany Name McNeil Carroll S y Panama City State		 , , , , , , , , , , , , , , , , , , ,		

	copy the corresponding informat			or Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 803 E. 24 th Street				Policy Number
City Lynn Haven State FL ZIP C	ode 32444		[Company NAIC Number
SECTION	D - SURVEYOR, ENGINEER, OR	ARCHITECT CERTIFICAT	ION (CONTI	NUED)
	ficate for (1) community official, (2) insur	rance agent/company, and (3) I	building owner	
	Section B., Item B9, was provided by I tem C2(e) is at the bottom of the air co			City of Lynn Haven, FL.
Signature Man		Date 6/25/2009		☐ Check here if attachments
SECTION E - BUILDING ELE	VATION INFORMATION (SURVEY	NOT REQUIRED) FOR ZO	NE AO AND	ZONE A (WITHOUT BFE)
 and C. For items E1-E4, use natural generation for grade (HAG) and the lowest adjate a) Top of bottom floor (including b) Top of bottom floor (including b) Top of bottom floor (including b) For Building Diagrams 6-8 with perfect (elevation C2.b) in the diagrams). E3. Attached garage (top of slab) is E4. Top of platform of machinery and E5. Zone AO only: If no flood depth 	basement, crawl space, or enclosure) is basement, crawl space, or enclosure) is ermanent flood openings provided in Se of the building is ☐ fee	tent used. In Puerto Rico only, boxes to show whether the election of tent in the feet in	enter meters. evation is above neters	e or below the highest adjacent we or below the HAG. we or below the LAG. uctions), the next higher floor G. or below the HAG.
SECTION	F - PROPERTY OWNER (OR OW	NER'S REPRESENTATIVE) CERTIFIC	ATION
	zed representative who completes Secti ments in Sections A, B, and E are corre			issued or community-issued BFE)
Property Owner's or Owner's Authorize	ed Representative's Name			
Address		City	State	ZIP Code
Signature		Date	Telephone	
Comments		•		· •
		MICORAL TION (OPTION)		Check here if attachments
The local official who is authorized by la	SECTION G - COMMUNITY		•	complete Sections A. R. C. (or E)
and G of this Elevation Certificate. Com				
	vas taken from other documentation that elevation information. (Indicate the sour			
	d Section E for a building located in Zon	` .	-	sued BFE) or Zone AO.
G3. The following information (Iten	ns G4G9.) is provided for community fl	oodplain management purpose	s.	•
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificat	e Of Compliar	ice/Occupancy Issued
G7. This permit has been issued for:	☐ New Construction ☐ Subst	antial Improvement	· · · · · ·	
38. Elevation of as-built lowest floor (inc	luding basement) of the building:		R) Datum	
G9. BFE or (in Zone AO) depth of flooding	ng at the building site:	feet	R) Datum	- .
Local Official's Name		Title	•	
Community Name		Telephone		·
Signature		Date		
Comments				
·				· ·
				Check here if attachments

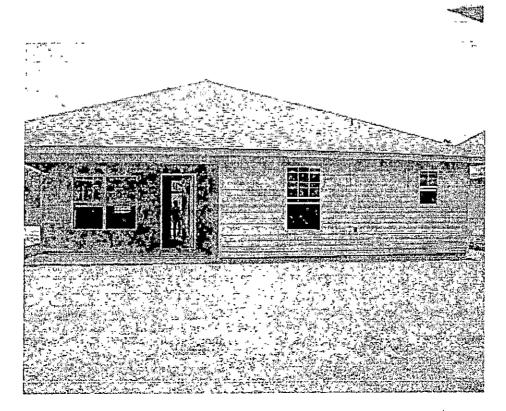
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