ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

-								
Con	1 all pages	of this Elovation	Cortificate and al	l attachmonte for (1) community	$\sqrt{2}$	insurance agent/company	and (2) building owner
COD			Certinicate and a		() COMMUNIC	/ Unicial, (Z) i	insulative ageni/company	, and (3) building owner.

		FION A - PROPERTY			o.a., (_)ou.aoo a	• .	RANCE COMPANY USE
A1. Building Owner's Name							ber:
-						,	
A2. Building Stre Box No.	A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.						IAIC Number:
City				State		ZIP Code	
A3. Property De	scription (Lot ar	nd Block Numbers, Ta	x Parce	l Number, Legal D	escription, etc.)		
A4 Building Use		tial, Non-Residential, <i>i</i>	Addition	Accessory etc.)			
-					-		1927 🗌 NAD 1983
					_		1927 [] NAD 1965
		hs of the building if the	e Certific	cate is being used i	to obtain flood insur	ance.	
A7. Building Dia							
		pace or enclosure(s):					
		space or enclosure(s)	-				
	•	ood openings in the cr	•		vithin 1.0 foot above	e adjacent gr	ade
c) Total net	area of flood op	penings in A8.b	5	sq in			
d) Engineer	ed flood openin	igs? 🗌 Yes 🗌 N	10				
A9. For a buildin	g with an attach	ned garage:					
	-	ned garage		sa ft			
					at above adiacont	arada	
		ood openings in the at			bot above adjacent	grade	
c) Total net	area of flood op	penings in A9.b		_ sq in			
d) Engineer	ed flood openin	ngs? 🗌 Yes 🗌 N	No				
	SE	CTION B - FLOOD I	NSUR/	NCE RATE MAP	(FIRM) INFORM		
B1. NFIP Community Name & Community Number				B2. County Name			B3. State
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E	IRM Panel ffective/ evised Date	B8. Flood Zone(s	(Zo	⊥ se Flood Elevation(s) ne AO, use Base od Depth)
		Base Flood Elevation	. ,		lepth entered in Iter	n B9:	
FIS Pro	file 🗌 FIRM	Community Deterr	mined	Other/Source:			
B11. Indicate ele	evation datum u	ised for BFE in Item B	9: 🗌 N	IGVD 1929 🗌 N	AVD 1988 🔲 O	ther/Source:	
B12. Is the build	ing located in a	Coastal Barrier Reso	urces S	ystem (CBRS) area	a or Otherwise Prot	ected Area (OPA)? 🗌 Yes 🗌 No
Designatio			CBRS				
20019110110			00110				

ELEVATION CERTIFICATE	DMB No. 1660-0008 Expiration Date: November 30, 2018		
IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt	Policy Number:		
City	State ZIP	Code	Company NAIC Number
SECTION	C – BUILDING ELEVATION INFORMAT	TION (SURVEY R	EQUIRED)
 C1. Building elevations are based of *A new Elevation Certificate will C2. Elevations – Zones A1–A30, AE Complete Items C2.a–h below a Benchmark Utilized: Indicate elevation datum used for NGVD 1929 NAV Datum used for building elevation a) Top of bottom floor (including b) Top of the next higher floor c) Bottom of the lowest horizona d) Attached garage (top of slab e) Lowest elevation of machine (Describe type of equipment 	h: Construction Drawings* Buil be required when construction of the buildi E, AH, A (with BFE), VE, V1–V30, V (with Bl according to the building diagram specified in Vertical Datum: bor the elevations in items a) through h) below D 1988 O Other/Source: bons must be the same as that used for the E g basement, crawlspace, or enclosure floor; tal structural member (V Zones only) b) ry or equipment servicing the building and location in Comments)	ding Under Constru- ng is complete. FE), AR, AR/A, AR in Item A7. In Puer w. BFE.	uction* Finished Construction //AE, AR/A1–A30, AR/AH, AR/AO. to Rico only, enter meters.
 f) Lowest adjacent (finished) gr g) Highest adjacent (finished) g h) Lowest adjacent grade at lov structural support 			
SECTION	N D – SURVEYOR, ENGINEER, OR ARC		ICATION
I certify that the information on this C statement may be punishable by fine	sealed by a land surveyor, engineer, or arc ertificate represents my best efforts to inter or imprisonment under 18 U.S. Code, Sec on A provided by a licensed land surveyor?	pret the data availation 1001.	y law to certify elevation information. able. I understand that any false
Certifier's Name	License Number		#5544 OR #4839
Title			
Company Name			
Address			
City	State	ZIP Code	
Signature	Date	Telephone	
Copy all pages of this Elevation Certific	cate and all attachments for (1) community of	ficial, (2) insurance	agent/company, and (3) building owner.
	ent and location, per C2(e), if applicable)	-	

BUILDING PHOTOGRAPHS

			OMB No. 1660-0008		
_EVATION CERTIFICATE See Instructions for Item A6.			Expiration Date: November 30, 2018		
PORTANT: In these spaces, copy the corresponding information from Section A. iilding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			FOR INSURANCE COMPANY US		
Building Street Address (including Apt., t	Jnii, Suite, and/or Bidg. No.;) of P.O. Roule and Box No.	Policy Number:		
City	State	ZIP Code	Company NAIC Number		
If using the Elevation Certificate to c instructions for Item A6. Identify all phot "Left Side View." When applicable, ph vents, as indicated in Section A8. If sub	tographs with date taken; "F otographs must show the t	ront View" and "Rear View"; a foundation with representative	nd, if required, "Right Side View" and examples of the flood openings or		
	Phot	to One			
Photo One Caption					
	Phot	to Two			
Photo Two Caption					

ELEVATION CERTIFICATE	BUILDING PHOTOGRAPHS Continuation Page		OMB No. 1660-0008 Expiration Date: November 30, 2018	
IMPORTANT: In these spaces, copy the co	orresponding information	on from Section A.	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit,			Policy Number:	
City	State	ZIP Code	Company NAIC Number	
If submitting more photographs than will f with: date taken; "Front View" and "Rea photographs must show the foundation with	ar View"; and, if require	ed, "Right Side View" and	"Left Side View." When applicable,	
	Photo	One		
Photo One Caption				
	Phote	о Тwo		
Dhata Two Contian	Photo			

BUILDING PHOTOGRAPHS

FEMA Form 086-0-33 (7/15)

Replaces all previous editions.