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

-													
Con	1 all pages	of thic E	lovation	Cortificato an	1 oll o	ttachmonte	for (1)	community	official	(2) incurance	agont/company	and (2	 building owner.
COP	all pages			Certinicate an	ı alı a	llaunnenis		COMMUNIC	unicial,	(2) insurance	ayeni/company	, anu to) building owner.

SEC	FION A – PROPERTY INF								
A1. Building Owner's Name		Policy Number:							
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Nur Box No.									
City State ZIP Code									
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)									
A4. Building Use (e.g., Residen	tial, Non-Residential, Addit	ion, Accessory, etc.)							
A5. Latitude/Longitude: Lat.	Long	g	Horizontal Datum:	NAD 1927	7 🗌 NAD 1983				
A6. Attach at least 2 photograp	hs of the building if the Cer	tificate is being used to	o obtain flood insuran	ce.					
A7. Building Diagram Number									
A8. For a building with a crawls	pace or enclosure(s):								
a) Square footage of crawls		sq ft							
b) Number of permanent flo		·	ithin 1.0 foot above a	diacent grade					
c) Total net area of flood op				ajacont grado					
		sq in							
d) Engineered flood openin	gs? 🗌 Yes 🗌 No								
A9. For a building with an attach	ned garage:								
a) Square footage of attach	ned garage	sq ft							
b) Number of permanent flo			ot above adiacent gra	ade					
c) Total net area of flood op									
		34 m							
d) Engineered flood openin	igs? 🔄 Yes 🔄 No								
SE	SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Community Name & C	B1. NFIP Community Name & Community Number B2. County Name B3. State								
B4. Map/Panel B5. Suffix Number	B6. FIRM Index B7 Date B7	7. FIRM Panel Effective/ Revised Date	B8. Flood Zone(s)	B9. Base F (Zone A Flood D	Flood Elevation(s) AO, use Base Depth)				
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:									
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:									
_			or Otherwise Protect	ted Area (OPA	A)? 📋 Yes 📋 No				
Designation Date:		S 🗌 OPA							

ELEVATION CERTIFICATE	OMB No. 1660-0008 Expiration Date: November 30, 2018			
IMPORTANT: In these spaces, copy the corres	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suit	Policy Number:			
City	State Z	IP Code	Company NAIC Number	
SECTION C – BUILD	DING ELEVATION INFORM	ATION (SURVEY R	EQUIRED)	
 C1. Building elevations are based on: Ca *A new Elevation Certificate will be required C2. Elevations – Zones A1–A30, AE, AH, A (wi Complete Items C2.a–h below according to Benchmark Utilized:	onstruction Drawings* d when construction of the bu ith BFE), VE, V1–V30, V (with o the building diagram specific Vertical Datu ations in items a) through h) b Other/Source: the same as that used for th t, crawlspace, or enclosure flo	Building Under Constr ilding is complete. In BFE), AR, AR/A, AR ed in Item A7. In Puer um: elow. le BFE. por)	uction* Finished Construction t/AE, AR/A1–A30, AR/AH, AR/AO. to Rico only, enter meters.	
d) Attached garage (top of slab)e) Lowest elevation of machinery or equip	ment servicing the building	·		
(Describe type of equipment and location	on in Comments)			
 f) Lowest adjacent (finished) grade next to 	• • •			
 g) Highest adjacent (finished) grade next t h) Lowest adjacent grade at lowest elevati structural support 	U ()		feet meters	
	VEYOR, ENGINEER, OR A		FICATION	
This certification is to be signed and sealed by a I certify that the information on this Certificate re statement may be punishable by fine or impriso	a land surveyor, engineer, or epresents my best efforts to in nment under 18 U.S. Code, S	architect authorized b nterpret the data avail Section 1001.	y law to certify elevation information.	
Were latitude and longitude in Section A provide				
Certifier's Name	License Number		#5544 OR #4839	
Company Name				
Address				
City	State	ZIP Code		
Signature	Date	Telephone	.	
Copy all pages of this Elevation Certificate and all	attachments for (1) communit	y official, (2) insurance	agent/company, and (3) building owner.	
Comments (including type of equipment and loc	ation, per C2(e), if applicable)		

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., L	Policy Number:		
City	State	ZIP Code	Company NAIC Number

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 Caption

Photo One

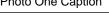




Photo Two Caption

Photo Two

Replaces all previous editions.

ELEVATION CERTIFICATE	BUILDING PH Continuat		OMB No. 1660-0008 Expiration Date: November 30, 2018 FOR INSURANCE COMPANY USE		
IMPORTANT: In these spaces, copy the co	orresponding information	on from Section A.			
Building Street Address (including Apt., Unit	, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	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					
Photo Two Conting	Photo	Тwo			
Photo Two Caption					

BUILDING PHOTOGRAPHS

Replaces all previous editions.