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 Nu 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 | A4. Building Use (e.g., Residential, Non-Residential, Addition, 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 | | | | | | | | | |
| 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, c | FOR INSURANCE COMPANY USE | | |
|------------------------------------|---------------------------|----------|---------------------|
| Building Street Address (including | 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

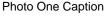




Photo Two Caption

Photo Two

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

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, | | |
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BUILDING PHOTOGRAPHS

Replaces all previous editions.