# U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

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

1805.2770EC

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

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION						FOR INSUF	RANCE COMPANY USE	
A1. Building Owner	A1. Building Owner's Name					Policy Numl	oer:	
KURT NIEMA								
A2. Building Street Box No.	A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number:						AIC Number:	
38001 CRYSTAL	LANE		<del> </del>				O THE PARTY OF THE	
City				State		ZIP Code	:	
UMATILLA  A3 Property Descri	intion (Lot an	d Block Numbers, Tax	Parcel	FLORIDA	ecription etc.)	32784		
	•		i aicei	indiliber, Legal De	scription, etc.)			
	PARCEL ID - 241826030000001500  A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL							
A5. Latitude/Longit				81°39'48.3"		n: 🗍 NAD 1	927 X NAD 1983	
		s of the building if the					62. K. 14.12 1000	
A7. Building Diagra	m Number 1	A		_				
	_	ace or enclosure(s):						
J	•	pace or enclosure(s)	NI/A	sq ft				
		od openings in the cra			ithin 1 0 fact char	a adia a ant au	a da	
· ·		enings in A8.b <sub>N/A</sub>			ILIIII 1.0 IOOL ADOV	e adjacent gr	aue N/A	
				q in				
d) Engineered			•					
A9. For a building v	vith an attach	ed garage:						
a) Square foot	age of attach	ed garage N/A		sq ft				
b) Number of I	permanent flo	od openings in the atta	ached g	garage within 1.0 fo	ot above adjacent	grade N/A		
c) Total net are	ea of flood op	enings in A9.b <sub>N/A</sub>		sq in				
d) Engineered			)	•				
a, 21.9.1100100	noou opermi	,o. [] 100 [] [	•					
	SE	CTION B - FLOOD IN	SURA	NCE RATE MAP	(FIRM) INFORM	ATION		
			B2. County Name	B2. County Name				
LAKE COUNTY 120421			LAKE			FLORIDA		
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. F	IRM Panel ffective/	B8. Flood Zone(s	s) B9. Ba: (Zo	se Flood Elevation(s) ne AO, use Base	
			R	evised Date		) Flo	od Depth)	
12069C - 0220	Е	12/18/2012		12/18/12	A	70		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:								
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other/Source:								
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:								
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🕱 No								
Designation [	•		`	, OPA			,	
200.9114110111	<u>N/A</u>	<u></u>	, DI (()					

# **ELEVATION CERTIFICATE**

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IMPORTANT: I	n these spaces, copy the corresponding	FOR INSURANCE COMPANY USE				
	Address (including Apt., Unit, Suite, and/or	Policy Number:				
38001 CRYSTAL	LANE					
City	Sta	te	ZIP Code	Company NAIC Number		
UMATILLA	FLO	RIDA	32784			
	SECTION C – BUILDING EL	EVATION INFORI	MATION (SURVEY F	(EQUIRED)		
C1 Building	elevations are based on: Construction	on Drawings*	Building Under Constr	ruction* X Finished Construction		
	Elevation Certificate will be required when co		0	Ed a mener concuration		
C2. Elevation	ns – Zones A1–A30, AE, AH, A (with BFE),	VE, V1-V30, V (with	h BFE), AR, AR/A, AF	R/AE, AR/A1–A30, AR/AH, AR/AO.		
	e Items C2.a-h below according to the build			rto Rico only, enter meters.		
	ark Utilized: GPS IN FLORIDA PERMANENT REFERENCE NETW					
	elevation datum used for the elevations in it	, , ,	pelow.			
	NGVD 1929 X NAVD 1988 Other/S		DEE			
Dalum u	sed for building elevations must be the sam	ie as that used for t	ne BrE.	Check the measurement used.		
а) Тор о	of bottom floor (including basement, crawlsp	oace, or enclosure f	oor) <u>74</u> . <u>90</u>	X feet  meters		
b) Top (	of the next higher floor		N/A	X feet  meters		
c) Botto	m of the lowest horizontal structural member	er (V Zones only)	N/A.	X feet  meters		
d) Attac	hed garage (top of slab)	(	N/A			
	est elevation of machinery or equipment ser	vicina the buildina	N/A.			
	cribe type of equipment and location in Com			<u>K</u> 1961		
f) Lowe	est adjacent (finished) grade next to building	g (LAG)	<u>74</u> . <u>01</u>	X feet  meters		
g) High	est adjacent (finished) grade next to building	g (HAG)	<u>74</u> . <u>50</u>	X feet meters		
	est adjacent grade at lowest elevation of dec tural support	ck or stairs, includin	gN/A	X feet  meters		
	SECTION D - SURVEYOR	, ENGINEER, OR	ARCHITECT CERTI	FICATION		
I certify that t	ion is to be signed and sealed by a land su he information on this Certificate represents by be punishable by fine or imprisonment ur	s my best efforts to	interpret the data avai	by law to certify elevation information.  Salable. I understand that any false		
	and longitude in Section A provided by a li			Check here if attachments.		
Certifier's Na	me	License Number		OLEY B. W.		
WESLEY B. HA	48	3708		WESLEY B. HAAD		
Title				7700		
	L SURVEYOR AND MAPPER			3708		
Company Na	me					
EXACTA LAND Address	SURVEYORS, INC		MINES SEE SEE SEE SEE SEE SEE SEE SEE SEE	- Ind Market Market Market		
				STATE OF FLORIDA  6/12/2018		
City	/ LAKES DRIVE SUITE 1	State	ZIP Code	FLORIDA PLORIDA		
'				ONAL SUBVEYOR &		
FT. MYERS Signature	W.D.	FL Date	33913 Telephone	6/12/2018		
Th.	ely Haw	6/12/2018	P: (866)735-1916	CENTERLINE ROAD ELEVATION: 73.40		
Copy all page	s of this Elevation Certificate and all attachme	ents for (1) commun		e agent/company, and (3) building owner.		
Comments (including type of equipment and location, per C2(e), if applicable)						
NOTE: C2.E = AC UNIT PAD. NOTE: THIS ELEVATION CERTIFICATE IS ONLY VALID FOR THE PERSON OR PERSONS NAMED ON THIS CERTIFICATE. THIS CERTIFICATE IS FOR FLOOD INSURANCE PURPOSES ONLY. THE INFORMATION ON THIS CERTIFICATE SHOULD NOT BE USED FOR						
CONSTRUCTION OR PLANNING.						
1						

# **ELEVATION CERTIFICATE**

1805.2770EC

MPORTANT: In these spaces, copy the cor	FOR INSURANCE COMPANY	USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number:					
38001 CRYSTAL LANE					
City	State	ZIP Code	Company NAIC Number		
UMATILLA	FLORIDA	32784			
		ORMATION (SURVEY ONE A (WITHOUT BFE)	NOT REQUIRED)		
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B,and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.					
<ul><li>E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).</li><li>a) Top of bottom floor (including basement,</li></ul>					
crawlspace, or enclosure) is	N/A	X feet	meters 🔲 above or 🔲 below the H	IAG.	
<ul> <li>b) Top of bottom floor (including baseme crawlspace, or enclosure) is</li> </ul>		X feet	meters	AG.	
E2. For Building Diagrams 6-9 with permane	ent flood openings provid	ed in Section A Items 8 a	nd/or 9 (see pages 1-2 of Instructions	o),	
the next higher floor (elevation C2.b in the diagrams) of the building is		🗓 🗓	` . •	<i>'</i> '	
E3. Attached garage (top of slab) is	N/A .	X feet	meters 🔲 above or 🔲 below the H	IAG.	
E4. Top of platform of machinery and/or equi servicing the building is	ipment N/A .				
E5. Zone AO only: If no flood depth number i floodplain management ordinance?	is available, is the top of Yes ☐ No ☐ Unk	the bottom floor elevated	in accordance with the community's		
SECTION F - PROPE	RTY OWNER (OR OWN	IER'S REPRESENTATIV	E) CERTIFICATION		
The property owner or owner's authorized rep		Annual Colored Control of the Colored Control	<u> </u>		
community-issued BFE) or Zone AO must sig	n here. The statements	in Sections A, B, and E a	e correct to the best of my knowledge	).	
Property Owner or Owner's Authorized Representative's Name					
Address		City	State ZIP Code	*	
Signature		Date	Telephone		
Comments					
			Check here if attachme	nts.	

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Building Street Address (including Apt., Unit, St	. Policy Number:		
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City	State	ZIP Code	Company NAIC Number
UMATILLA	FLORIDA	32784	
SECTIO	N G - COMMUNITY	INFORMATION (OPTION)	AL)
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en G1.   The information in Section C was tak engineer, or architect who is authorized the comments area below.)	Certificate. Complete ter meters.  en from other docume	e the applicable item(s) and entation that has been sign	
G2. A community official completed Section Zone AO.	on E for a building loo	cated in Zone A (without a F	FEMA-issued or community-issued BFE)
G3. The following information (Items G4-	G10) is provided for o	community floodplain mana	gement purposes.
G4. Permit Number	G5. Date Permit Is:	sued	G6. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	New Construction [	Substantial Improvemen	ıt ·
G8. Elevation of as-built lowest floor (including of the building:	g basement) ——		feet meters Datum
G9. BFE or (in Zone AO) depth of flooding at	the building site:		feet  meters Datum
G10. Community's design flood elevation:	,		feet meters Datum
Local Official's Name		Title	
Community Name		Telephone	
Signature	AN	Date	,
Comments (including type of equipment and lo	cation, per C2(e), if a	pplicable)	
			☐ Check here if attachments.

### **BUILDING PHOTOGRAPHS**

### **ELEVATION CERTIFICATE**

See Instructions for Item A6. 1805.2770EC

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

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			Policy Number:
38001 CRYSTAL LANE			
City	State	ZIP Code	Company NAIC Number
UMATILLA	FLORIDA	32784	

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.





Front View

Front View Date: 6/12/2018





Left Side View

Rear View

Right Side View

Left Side View: 6/12/2018

Rear View Date: 6/12/2018

Right Side View: 6/12/2018

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

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## **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

Continuation Page

1805.2770EC

IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite,	or P.O. Route and Box No.	Policy Number:			
38001 CRYSTAL LANE					
City	State	ZIP Code	Company NAIC Number		
UMATILLA	FLORIDA	32784			
If submitting more photographs than will fit on the preceding page, affix the additional photographs below. 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.					
			,		
	,				
Photo One			Photo Two		
Photo Three	in a second		Photo Four		