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

OMB No. 1660-0008 Expiration Date: November 30, 2022

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

Copy all pages of this Elevation Certificate and all attachments for (1) commi	inity official, (2) insurance agent/company, and (3) building
SECTION A - PROPERTY INFORMATION	FOR INSURANCE COMPANY
A1. Building Owner's Name	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No. Box No.	
150 NW Whitney Glen	Company NAIC Number.
City	ZIP Code
Lake City Florida	32055
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, L Lot 5, Branden Estates	egal Description, etc.)
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory	etc.) Residential
A5. Latitude/Longitude: Lat. 30°12'50.38"N Long. 82°42'30.51V	/ 11-:
A6. Attach at least 2 photographs of the building if the Certificate is being	Horizontal Datum: NAD 1927 NAD 198
A7. Building Diagram Number 5	to obtain nood insurance.
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s)	N/A 00 A
72.00 J	N/A sq ft
b) Number of permanent flood openings in the crawlspace or enclosu c) Total net area of flood openings in A8.b N/A sq.	
	n
d) Engineered flood openings?	
A9. For a building with an attached garage:	
a) Square footage of attached garage N/A sq f	
b) Number of permanent flood openings in the attached garage within	1.0 frot above ediceant and to MA
c) Total net area of flood openings in A9.b N/A so	
D = 1	"
d) Engineered flood openings?	
SECTION B – FLOOD INSURANCE RATE	MAR (FIRM) INFORMATION
B1. NFIP Community Name & Community Number B2. County	Name
Columbia County 120070 Columbia	Name B3. State Florida
B4. Map/Panel B5. Suffix B6. FIRM Index B7. FIRM Panel	
Number Date Effective/	B8. Flood B9. Base Flood Elevation(s) Zone(s) (Zone AO, use Base Flood Depth)
12023C0280 D 11-02-2018 Revised Date 11-02-2018	A N/A
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flo	od depth entered in Item B9:
☐ FIS Profile ☑ FIRM ☐ Community Determined ☐ Other/Sour	ce:
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929	NAVD 1988 Other/Source:
B12. Is the building located in a Coastal Barrier Resources System (CBRS)	area or Othonuino Protestad A
Designation Date: CBRS	Orderwise Protected Area (OPA)? Yes X N
CBRS [] OPA	
-MA F	

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the correspond	ing information from S	notion A	Parent Bate: November 30, 202
building Street Foldress (including Apt., Unit Suite and	d/or Bldg. No.) or P.O. R	oute and Boy No.	FOR INSURANCE COMPANY US Policy Number:
100 1444 Willuley Gleff	,	and Box No.	Folicy Number:
City Lake City	State ZI	Code	Company NAIC Number
		055	1
SECTION C - BUILDING	ELEVATION INFORMA	TION (SURVEY R	EQUIRED)
C1. Building elevations are based on: Constru	ction Drawings*	Ilding Under Constru	
*A new Elevation Certificate will be required when	construction of the build	ding is complete	
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE Complete Items C2.a–h below according to the b Benchmark Utilized: FDOT TBM 10	E), VE, V1–V30, V (with I uilding diagram specified	BFE), AR, AR/A, AR/ in Item A7. In Puert	/AE, AR/A1-A30, AR/AH, AR/AO. to Rico only, enter meters.
1001 10W 10	Vertical Datum	1 NAVD 1988	
Indicate elevation datum used for the elevations in NGVD 1929 NAVD 1988 Othe	r/Source		
Datum used for building elevations must be the sa	me as that used for the	BFE.	
 a) Top of bottom floor (including basement, crawl 	Space or enclosure floor		Check the measurement used. 116.7 ☐ feet ☐ meters
b) Top of the next higher floor	space, or endodule floor		N/A 5
c) Bottom of the lowest horizontal structural mem	ber (V Zones only)		N/A E
d) Attached garage (top of slab)	con (* Lones only)		N/A F
 e) Lowest elevation of machinery or equipment se (Describe type of equipment and location in Co 	ervicing the building		N/A feet meters
f) Lowest adjacent (finished) grade next to buildir			
g) Highest adjacent (finished) grade next to building			1125 🗔
 h) Lowest adjacent grade at lowest elevation of de structural support 			N/A feet meters
SECTION D - SURVEYOR	R. ENGINEER OR ARC	WITECT CERTIFIC	
This certification is to be signed and sealed by a land so I certify that the information on this Certificate represent statement may be punishable by fine or imprisonment u	irveyor, engineer, or arc	hitect authorized by I	
Were latitude and longitude in Section A provided by a I			Check here if attachments.
Certifier's Name Darrell Copeland	License Number		CAMBORIES .
Title	PLS 4529		50 Mg 20 10 18 20 18
AND SURVEYOR			
Company Name			Place
DARRELL COPELAND SURVEYING, INC			Seal
Address			
910 180th Street			Here
city IcAlpin	State	ZIP Code	3//92
ignature	Florida	32062	TO THE PROPERTY OF A
N)	Date 11-25-2021	(386) 963-5118	Ext. desurveyi@aol
opy all pages of this Elevation Certificate and all attachme	nts for (1) community office	ial, (2) insurance age	ent/company, and (3) building owner
omments (including type of equipment and location, per l.(e) Elevation of A/C Pad	C2(e), if applicable)		
			-
· · · · · · · · · · · · · · · · · · ·			

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding	information to 0		7	A STATE OF THE PARTY OF THE PAR	November 30, 2022
IMPORTANT: In these spaces, copy the corresponding information from Se Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Ro			AND THE SERVICE SOUND AND		
150 NW Whitney Glen			ute and Box No. Policy Number:		
City	A 711	Code			
Lake City Flor		7 Code 055	Cor	mpany NAIC	Number
SECTION E – BUILDING ELEV			VNOT DEC	2111222	
FOR ZONE A	O AND ZONE A (W	THOUT BFE	NOTREC	QUIRED)	
For Zones AO and A (without BFE), complete Items E1–E5 complete Sections A, B,and C. For Items E1–E4, use nature enter meters.	1641 0 115			MA or LOMR used. In Pu	-F request, erto Rico only,
E1. Provide elevation information for the following and che the highest adjacent grade (HAG) and the lowest adjacent Top of bottom floor (including basement,	alatha				
crawlspace, or enclosure) is b) Top of bottom floor (including basement,	3.2	⊠ feet □	meters [above or	below the HAG.
crawlspace, or enclosure) is	3.7	⊠ feet □	meters [above or	below the LAG.
E2. For Building Diagrams 6–9 with permanent flood openi the next higher floor (elevation C2.b in the diagrams) of the building is		on A Items 8	and/or 9 (se	e pages 1-2	? of Instructions),
again, es	N/A	feet	meters [above or	below the HAG.
E3. Attached garage (top of slab) is	N/A	☐ feet ☐	meters [above or	below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is	3.0	☐ feet ☐	meters [above or	below the HAG.
E5. Zone AO only: If no flood depth number is available, is floodplain management ordinance? Yes No	the top of the bottom Unknown. The	floor elevated	l in accordar	nce with the	community de
SECTION F - PROPERTY OWNER	OR OWNER'S REP	PESENTATIV	E) CERTIE	CATION	
The property owner or owner's authorized representative wh community-issued BFE) or Zone AO must sign here. The sta					MA-issued or
Property Owner or Owner's Authorized Representative's Nar	ne	i, b, and L ar	e correct to	the pest of i	my knowledge.
Darrell Copeland					
Address	City		State		ZID Code
7910 180th Street	McAlpin		Florida		ZIP Code 32062
Signature /	Date	1	Telephon	ie .	
	11-25	-21	. 0.001.011		1
Comments	400				
					1
					ŀ
					1
				Charlete	
	1			Check here	if attachments.

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMF	PORT	ANT: In these spaces, copy the cor	responding informat	ion from C	-41 4	Expiration Bate. November 30, 202.
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Ro			ction A.	FOR INSURANCE COMPANY US		
150	WN C	Whitney Glen	and, and/or blug. No	.) oi P.O. Ro	nte and Box M	No. Policy Number:
City	5.0		State	710	Code	
Lak	ce Cit	у	Florida		055	Company NAIC Number
		SECTI	ON G - COMMUNITY			
The	e loca					
Sec	ctions ed in I	s A, B, C (or E), and G of this Elevation tems G8–G10. In Puerto Rico only, er	rdinance to administe n Certificate. Complete nter meters.	r the commu e the applica	nity's floodpla ble item(s) an	in management ordinance can complete d sign below. Check the measurement
G1.		The information in Section C was takengineer, or architect who is authorized taken in the Comments area below.)	ten from other docume ted by law to certify el	entation that evation infor	has been sigr mation. (Indica	ned and sealed by a licensed surveyor, ate the source and date of the elevation
G2.		A community official completed Section Zone AO.	ion E for a building loo	cated in Zone	A (without a	FEMA-issued or community-issued BFE)
G3.		The following information (Items G4-	-G10) is provided for o	community fl	oodplain mana	agement purposes.
G4.	Pem	nit Number	G5. Date Permit Iss	ued	To	G6. Date Certificate of
						Compliance/Occupancy Issued
G7.	This	permit has been issued for:	New Construction	☐ Substantia	I Improvemen	.+
G8.	Elev	ration of as-built lowest floor (including			· improvemen	
	of th	e building:			□	feet meters Datum
G9.	BFE	or (in Zone AO) depth of flooding at the	he building site:		□	feet meters Datum
		nmunity's design flood elevation:			0	feet meters Datum
Local	Offic	ial's Name		Title		
Comr	nunity	y Name	n			
		, realing		Telephone		
Signa	ture			Date		
Comm	nents	(including type of equipment and local	ition, per C2(e), if app	licable)		
			., , , , , , , , , , , , , , , , , , ,			
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						Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number: 150 NW Whitney Glen City State ZIP Code Company NAIC Number Lake City Florida 32055

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.

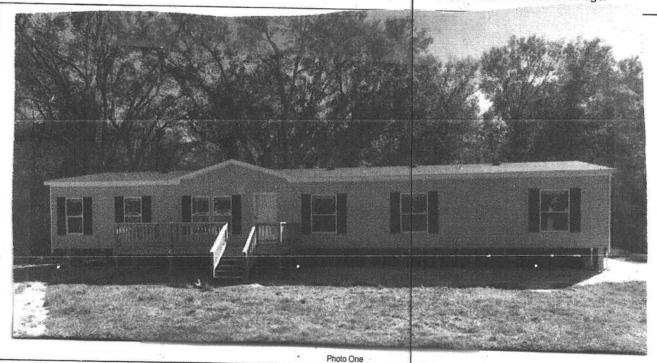


Photo One Caption

Clear Photo One



Photo Two Caption

FEMA Form 086-0-33 (12/19)

Replaces all previous editions

Clear Photo Two

Form Page 5 of 6

BUILDING PHOTOGRAPHS **ELEVATION CERTIFICATE** OMB No. 1660-0008 Continuation Page Expiration Date: November 30, 2022 IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number: 150 NW Whitney Glen City State ZIP Code Company NAIC Number Lake City Florida 32055 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 Three** Photo Three Photo Three Caption Clear Photo Three Photo Four

FEMA Form 086-0-33 (12/19)

Photo Four Caption

Replaces all previous editions

Photo Four

Clear Photo Four Form Page 6 of 6