

DATE 12/06/2004

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000022561

APPLICANT JENNY E. THOMAS PHONE 386.697.1588
ADDRESS 228 SE VALERIE COURT LAKE CITY FL 32025
OWNER RONALD & JENNY THOMAS PHONE 386.697.1588
ADDRESS _____ FL _____
CONTRACTOR TERRY THRIFT PHONE _____
LOCATION OF PROPERTY SR 100 TO C-245 TO SE SHARON LANE,TR,TO BONNIE WAY,TL
BENNIE LANE,TL, TR ON VALERIE CRT.
TYPE DEVELOPMENT M/H & UTILITY ESTIMATED COST OF CONSTRUCTION .00
HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT .00 STORIES _____
FOUNDATION _____ WALLS _____ ROOF PITCH _____ FLOOR _____
LAND USE & ZONING RR MAX. HEIGHT _____
Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00
NO. EX.D.U. 0 FLOOD ZONE xpp DEVELOPMENT PERMIT NO. _____

PARCEL ID 15-4S-17-08355-517 SUBDIVISION EAGLES RIDGE
LOT 17 BLOCK _____ PHASE 2 UNIT _____ TOTAL ACRES 1.00

IH0000036
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING 04-1083 BLK HD N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: 1 FOOT ABOVE ROAD
PLAT REQUIRES 1ST.FLOOR ELEVATION TO BE 126.00 FT.ELEVATION
CETIFICATION REQUIRED. Check # or Cash 2923

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power _____ Foundation _____ Monolithic _____
date/app. by date/app. by date/app. by
Under slab rough-in plumbing _____ Slab _____ Sheathing/Nailing _____
date/app. by date/app. by date/app. by
Framing _____ Rough-in plumbing above slab and below wood floor _____
date/app. by date/app. by
Electrical rough-in _____ Heat & Air Duct _____ Peri. beam (Lintel) _____
date/app. by date/app. by date/app. by
Permanent power _____ C.O. Final _____ Culvert _____
date/app. by date/app. by date/app. by
M/H tie downs, blocking, electricity and plumbing _____ Pool _____
date/app. by date/app. by
Reconnection _____ Pump pole _____ Utility Pole _____
date/app. by date/app. by date/app. by
M/H Pole _____ Travel Trailer _____ Re-roof _____
date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00
MISC. FEES \$ 200.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 56.70 WASTE FEE \$ 122.50
FLOOD ZONE DEVELOPMENT FEE \$ _____ CULVERT FEE \$ _____ TOTAL FEE 429.20
INSPECTORS OFFICE _____ CLERKS OFFICE _____

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only		Zoning Official <u>BLK 02.12.04</u>	Building Official <u>ND 12-6-04</u>
AP# <u>0411-92</u>	Date Received <u>11-22-04</u>	By <u>LH</u>	Permit # <u>22561</u>
Flood Zone <u>X Applicable</u>	Development Permit <u>N/A</u>	Zoning <u>RR</u>	Land Use Plan Map Category <u>Res U.L. Dev.</u>
Comments <u>Plot Requires 1st Floor Elevation to be 126.00 feet. Elevation Certification Required</u>			
FEMA Map # _____	Elevation _____	Finished Floor _____	River _____ In Floodway _____
<input checked="" type="checkbox"/> Site Plan with Setbacks shown	<input checked="" type="checkbox"/> Environmental Health Signed Site Plan	<input type="checkbox"/> Env. Health Release	
<input type="checkbox"/> Well letter provided	<input checked="" type="checkbox"/> Existing Well <u>Water System</u>	Revised 9-23-04	

- Property ID 15-45-17-08355-517 Must have a copy of the property deed
- New Mobile Home yes Used Mobile Home _____ Year _____
- Subdivision Information Eagles Ridge Phase 2 Lot 17
→ They called and have the letter of Authorization
- Applicant Ronald L. Thomas Phone # 386 697-1588
- Address 228 SE Valerie Ct. Lake City, FL 32025
- Name of Property Owner Ronald L + Jenny E. Thomas Phone # 386-997-1588
- 911 Address 228 SE Valerie Ct, Lake City, FL 32025
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progressive Energy
- Name of Owner of Mobile Home Ronald L & Jenny E Thomas Phone # 386-697-1588
- Address _____
- Relationship to Property Owner Same
- Current Number of Dwellings on Property none
- Lot Size 1 acre Total Acreage 1 acre
- Do you : Have an Existing Drive or need a Culvert Permit or a Culvert Waiver Permit
- Driving Directions Turn right of H.W 100 E on HW 245 go 2 miles south turn right on Sharon lane, take 1st left on Bonnie way, left on Bennie Lane. Its on Valerie Ct.
- Is this Mobile Home Replacing an Existing Mobile Home No
- Name of Licensed Dealer/Installer Terry L. Thrift Phone # (386) 623-0115
- Installers Address 448 NW Nye - Hunter Dr Lake City Fla 32055
- License Number TH-0000036 Installation Decal # 225948

Left a message on 12-6-04
@ 2:20pm

PERMIT NUMBER

Installer Terry L Thiede License # 14-0000036

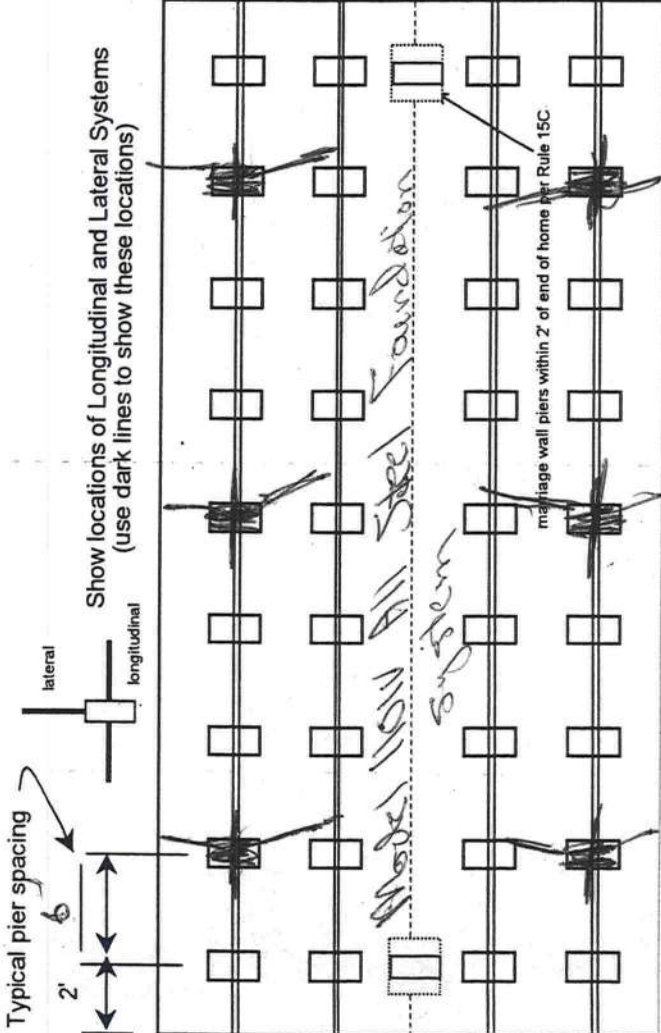
Address of home being installed _____

Manufacturer Merit Length x width 36' x 28'

NOTE: If home is a single wide fill out one half of the blocking plan if home is a triple or quad wide sketch in remainder of home

I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's initials TLT



New Home ☒ Used Home ☐
Home installed to the Manufacturer's Installation Manual ☒
Home is installed in accordance with Rule 15-C ☐
Single wide ☐ Wind Zone II ☒ Wind Zone III ☐
Double wide ☐ Installation Decal # 225948
Triple/Quad ☐ Serial # _____

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	16" x 16" (256)	18 1/2" x 18 1/2" (342)	20" x 20" (400)	22" x 22" (484)*	24" X 24" (576)*	26" x 26" (676)
1000 psf	3'		4'	5'	6'	7'	8'
1500 psf	4' 6"		6'	7'	8'	8'	8'
2000 psf	6'		8'	8'	8'	8'	8'
2500 psf	7' 6"		8'	8'	8'	8'	8'
3000 psf	8'		8'	8'	8'	8'	8'
3500 psf	8'		8'	8'	8'	8'	8'

* interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

l-beam pier pad size	Pad Size	Sq In
Perimeter pier pad size	16 x 16	256
	16 x 18	288
	18.5 x 18.5	342
Other pier pad sizes (required by the mfg.)	16 x 22.5	360
	17 x 22	374
	13 1/4 x 26 1/4	348
	20 x 20	400
	17 3/16 x 25 3/16	441
	17 1/2 x 25 1/2	446
	24 x 24	576
	26 x 26	676

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

ANCHORS

Opening 12' Pier pad size 18" x 22"
4 ft 1 5 ft 1

FRAME TIES

within 2' of end of home spaced at 5' 4" oc

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer _____

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer Over

OTHER TIES

Number

Sidewall

Longitudinal

Marriage wall

Shearwall

23

4

2

PERMIT NUMBER

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 2000 psf or check here to declare 1000 lb. soil without testing.

X 2000 290 X 2000 290 X 2000 290

POCKET PENETROMETER TESTING METHOD

- 1. Test the perimeter of the home at 6 locations.
- 2. Take the reading at the depth of the footer.
- 3. Using 500 lb. increments, take the lowest reading and round down to that increment.

X 2000 290 X 2000 290 X 2000 290

TORQUE PROBE TEST

The results of the torque probe test is 290 inch pounds or check here if you are declaring 5' anchors without testing. A test showing 275 inch pounds or less will require 4 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg.

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg.

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg.

Site Preparation

Debris and organic material removed
Water drainage: Natural Swale Pad Other

Fastening multi wide units

Floor: Type Fastener: Length: 6 1/2" Spacing: 24" or 32" or
Walls: Type Fastener: Length: 10" Spacing: 32" or
Roof: Type Fastener: Length: 10" Spacing: 32" or
For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, mildew and buckled marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Installer's initials

Installed:

Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Type gasket Torken Tape

Weatherproofing

The bottomboard will be repaired and/or taped. Yes
Siding on units is installed to manufacturer's specifications. Yes
Fireplace chimney installed so as not to allow intrusion of rain water. Yes

Miscellaneous

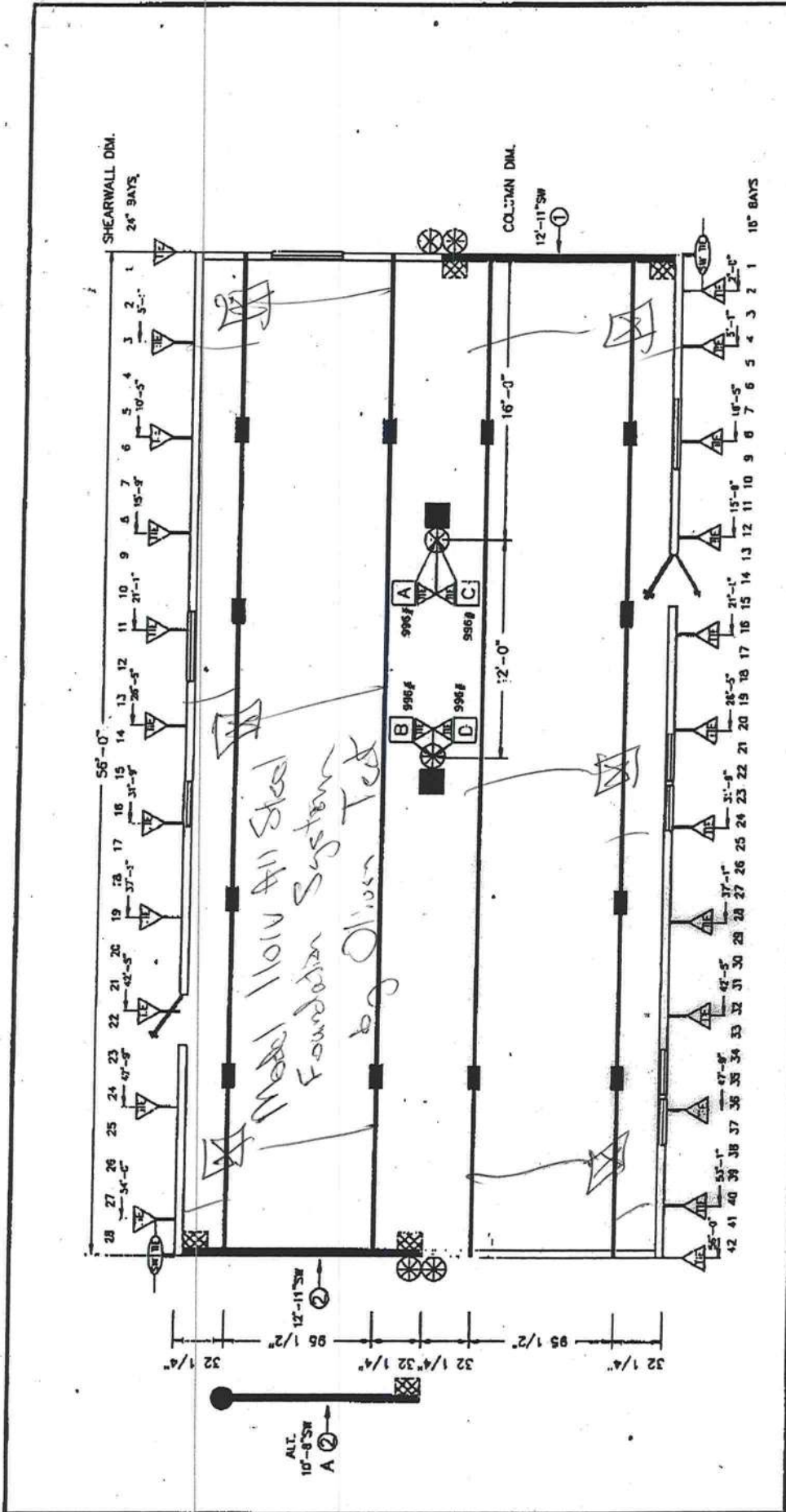
Skirting to be installed. Yes No
Dryer vent installed outside of skirting. Yes N/A
Range downflow vent installed outside of skirting. Yes N/A
Drain lines supported at 4 foot intervals. Yes
Electrical crossovers protected. Yes
Other:

Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and/or Rule 15C-1 & 2

Installer Signature

Date

(Thomas) 28' x 36' Box
 Post 2000 on 17"x22" pads at 6' o.c.
 Torque-290 with 3/50 4ft anchors at 5'4" o.c.
 Perimeter B/R on 16"x16" pads at 8' o.c.

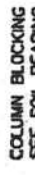


BLOCKING LEGEND:

FLORIDA



1-BEAM BLOCKING
SEE SOIL BEARING CAPACITY CHARTS FOR SPACING



COLUMN BLOCKING
SEE SOIL BEARING CAPACITY CHARTS FOR PAD SIZE



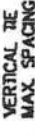
SHEARWALL BLOCKING



SHEARWALL FRAME TIE



CENTER LINE TIES

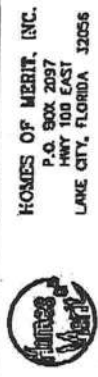


VERTICAL TIE
MAX. SPACING 5'-4" CENTER TO CENTER



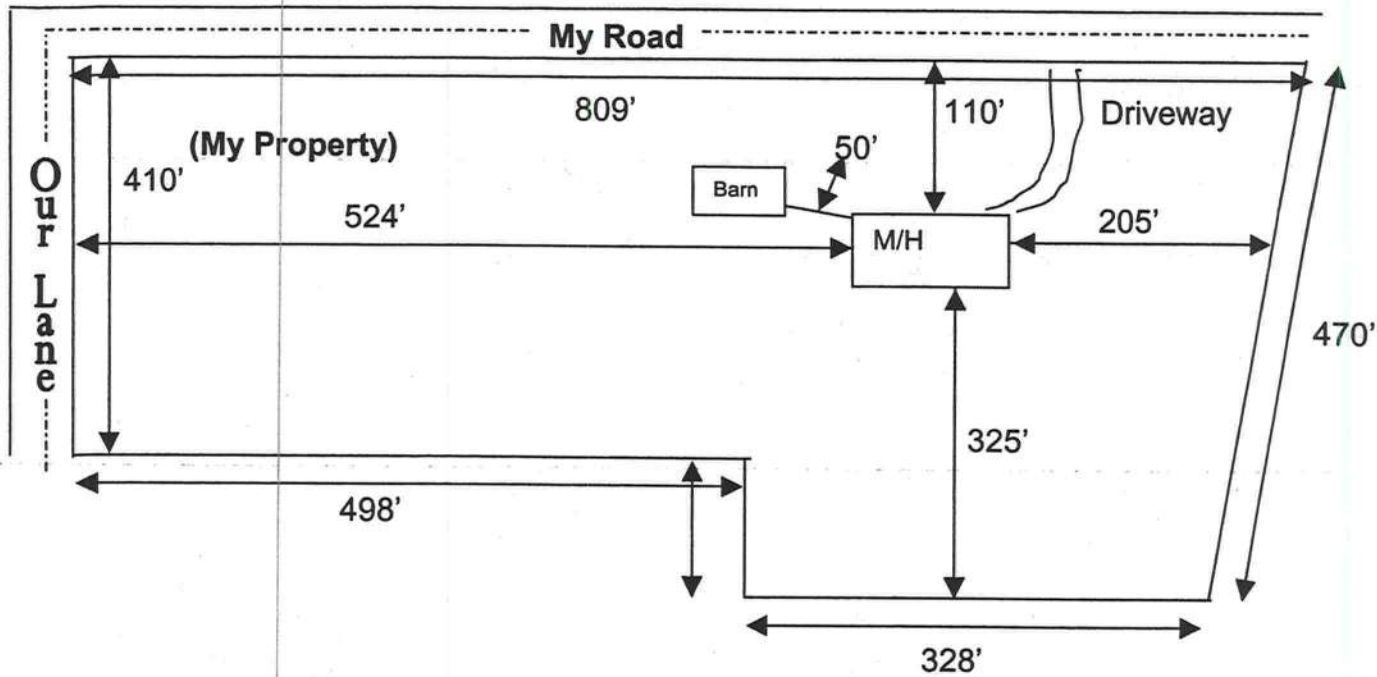
LONGITUDINAL TIES

- 1) ALL EXTERIOR DOORS, BAY WINDOWS, RECESSED SIDEWALLS AND EXTERIOR WALL OPENINGS 48" OR GREATER WILL REQUIRE BLOCKING ON EACH SIDE.
- 2) 32" WIDE HOMES REQUIRED TO BE BLOCKED MIN 8'-0" ON CENTER BETWEEN COLUMNS.

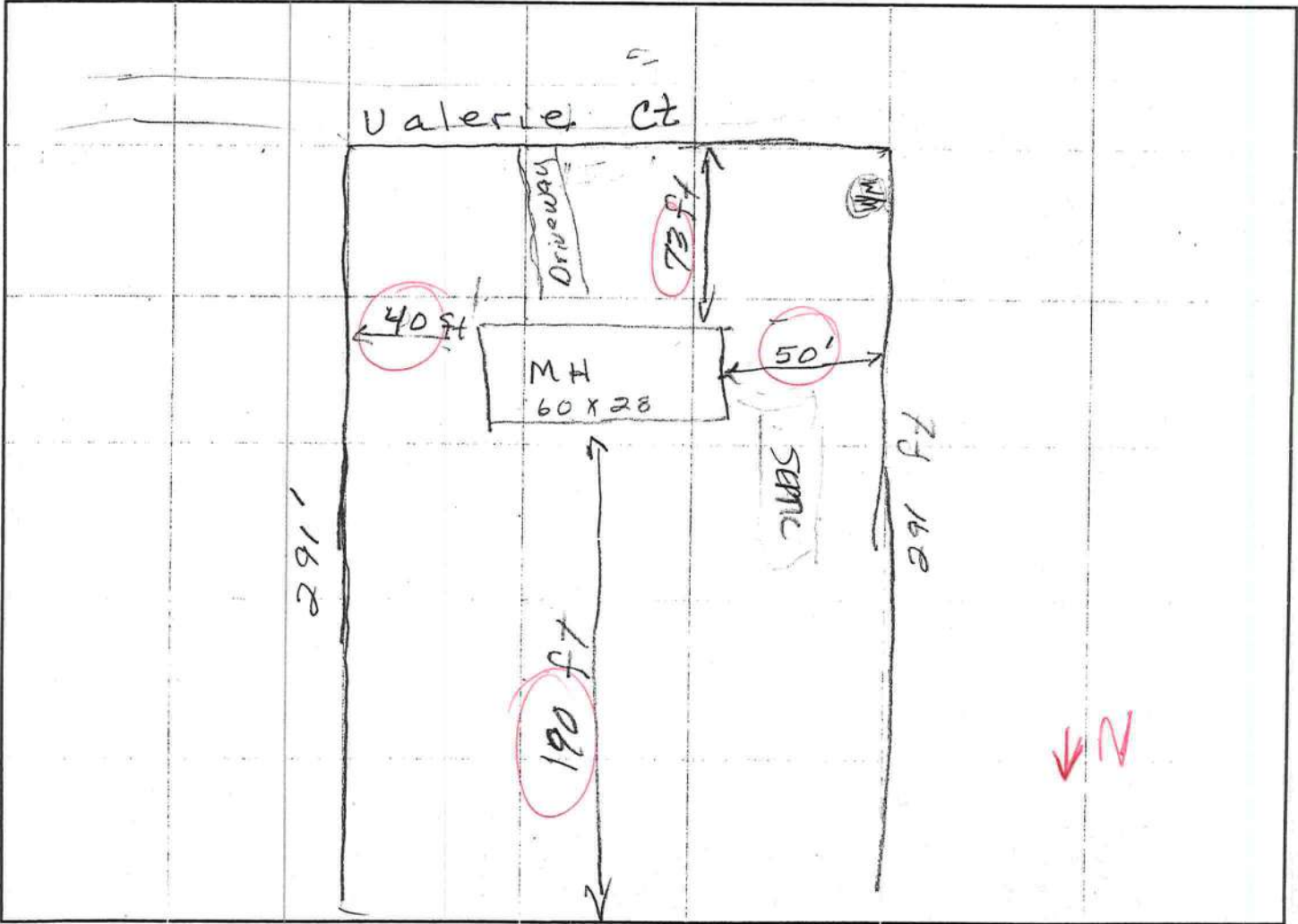


Drawn: B-23-00	Revisions:	Code: 1637A
Date: STAFF		
Parent: 1110		
Code: F (01)		
Zone: 2	Model: FOREST MANOR 2849-1637	Print: FLORIDA BLOCKING
	60x28 SBR 28 FR	

SITE PLAN EXAMPLE / WORKSHEET



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them. Also show where the road or roads are around your property.



WARRANTY DEED

This Warranty Deed made and executed the 25th day of October A.D. 2004, by SUBRANDY LIMITED PARTNERSHIP, hereinafter called the grantor, to RONALD L. THOMAS AND JENNY E. THOMAS, his wife, Whose post office address is 334 S.E. Tim Street, Lake City, FL 32025, hereinafter called the grantee:

(Wherever used herein the terms "Grantor" and "Grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporation)

Witnesseth: That the grantor, for the consideration of the sum of \$ 10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in Columbia County, Florida, viz:

LOT 17, EAGLES RIDGE PHASE 2, a subdivision as recorded in Plat Book 7, Pages 172-173, Columbia County, Florida, subject to Restrictions recorded in O.R. Book 1016, Pages 1096-1099, Columbia County, Florida, and subject to Power Line Easement. INCLUDES 200 AMP. POWER POLE AND SEPTIC TANK SIZED FOR 3 BEDROOM RESIDENCE.

THIS LOT LIES WITHIN THE 100-YEAR FLOOD ZONE AND CONTAINS JURISDICTIONAL WETLANDS WITH MONUMENTED BUFFERS, PLEASE REFER TO THE DEED RESTRICTIONS REGARDING LIMITATIONS IN THESE AREAS.


Together with all the tenements, hereditaments and appurtenances thereto belong or in any-wise appertaining.


To Have and to Hold, the same in fee simple forever.


And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple: that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2003.

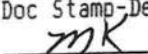
In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:


Signature of witness
Nanci Nettles


Bradley N. Dicks, General Partner
Subrandy Limited Partnership


Signature of witness
Suzanne Davis

Inst:2004024402 Date:11/01/2004 Time:13:03
Doc Stamp-Deed : 126.00
 DC, P. DeWitt Cason, Columbia County B:1029 P:1289

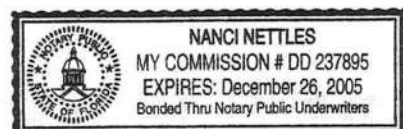
State of Florida
County of Columbia

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared Bradley N. Dicks, who is personally known to me to be the person described in and who executed the foregoing instrument, who was not required to furnish identification, and he acknowledged before me that he executed the same and who did not take an oath.

WITNESS my hand and official seal in the County and State last aforesaid this 25th day of October, A.D. 2004


Notary Public, State of Florida

This instrument prepared by: Bradley N. Dicks
Address: P.O. Box 513 Lake City, FL 32056



Permit Application Number 04-1083[illegible]

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LIMITED POWER OF ATTORNEY

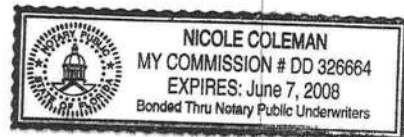
I, TERRY L. THRIFT, LICENSE # IH-0000036 EXPIRING 9-30-200~~7~~⁵ DO HEREBY
AUTHORIZE Jerry Thomas TO BE MY REPRESENTATIVE AND
ACT ON MY BEHALF IN ALL ASPECTS OF APPLYING FOR A MOBILE HOME MOVE
ON PERMIT TO BE INSTALLED IN Columbia COUNTY, FLORIDA.


TERRY L. THRIFT

11/23/04
DATE

SWORN TO AND SUBSCRIBED BEFORE ME THIS 23 DAY OF November,
20004.


NOTARY PUBLIC



PERSONALLY KNOWN: X
PRODUCED ID: _____

YR 2005 MAKE homes OF Merit SN# 28481
PROPERTY ID/LOCATION _____

2923

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:	
BUILDING OWNER'S NAME Jenny Thomas			Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 228 SE Valerie Ct.			Company NAIC Number	
CITY Lake City	STATE FL	ZIP CODE 32025		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 17 Eagle Ridge Phase 2				
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential				
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-##" or #####°)		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983		SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Columbia 120070		B2. COUNTY NAME Columbia		B3. STATE FL	
B4. MAP AND PANEL NUMBER 120070 0200	B5. SUFFIX B	B6. FIRM INDEX DATE 6 Jan 1988	B7. FIRM PANEL EFFECTIVE/REVISED DATE 6 Jan 1988	B8. FLOOD ZONE(S) A	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 125.00

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.

☐ FIS Profile ☐ FIRM ☐ Community Determined ☒ Other (Describe): Curtis Keen P.E. 23836B11. Indicate the elevation datum used for the BFE in B9: ☒ NGVD 1929☐ NAVD 1988 ☐ Other (Describe): _____B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No Designation Date _____

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 5 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO

Complete Items C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum 29 Conversion/Comments N/AElevation reference mark used N/A Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No

- o a) Top of bottom floor (including basement or enclosure) 132. 81 ft.(m)
- o b) Top of next higher floor N. A ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) N. A ft.(m)
- o d) Attached garage (top of slab) N. A ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) N. A ft.(m)
- o f) Lowest adjacent (finished) grade (LAG) 129. 7 ft.(m)
- o g) Highest adjacent (finished) grade (HAG) 130. 2 ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade N/A
- o i) Total area of all permanent openings (flood vents) in C3.h N/A sq. in. (sq. cm)

License Number, Embossed Seal,
Signature, and Date

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.

I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.

I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME L. Scott Britt

LICENSE NUMBER PLS #5757

TITLE Chief Surveyor

COMPANY NAME Britt Surveying

ADDRESS
830 W. Duval St.CITY
Lake CitySTATE
FLZIP CODE
32055

SIGNATURE

DATE
12/22/04TELEPHONE
386-752-7163

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. 228 SE Valerie Ct.			Policy Number
CITY Lake City	STATE FL	ZIP CODE 32025	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

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

COMMENTS

L-15643 ☐ Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

- For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.
- E1. Building Diagram Number (Select the building diagram most similar to the building for which this certificate is being completed – see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is __ ft.(m) __ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is __ ft.(m) __ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is __ ft.(m) __ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?
☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. *The statements in Sections A, B, C, and E are correct to the best of my knowledge.*

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPHONE	
COMMENTS			

☐ Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

- The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.
- G1. ☐ The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
-------------------	------------------------	---

- G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m) Datum: _____
- G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____

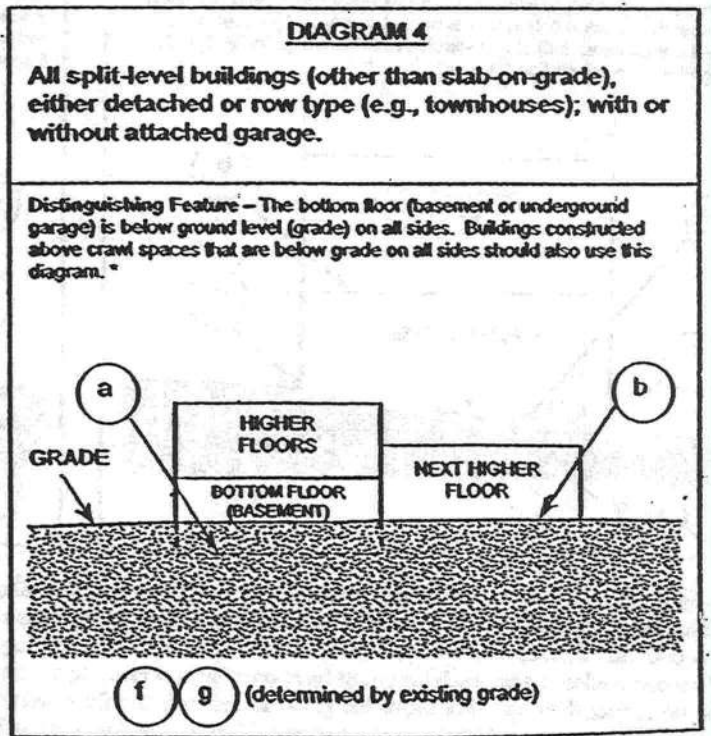
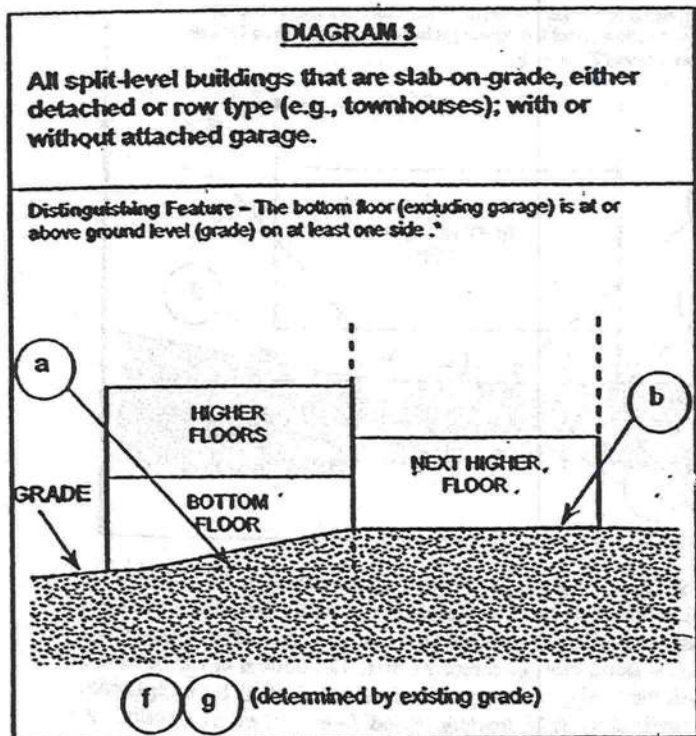
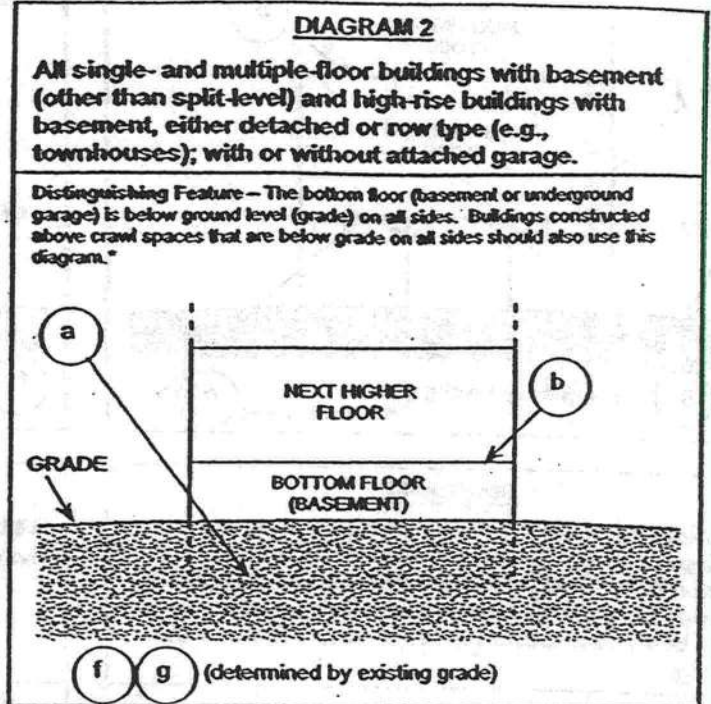
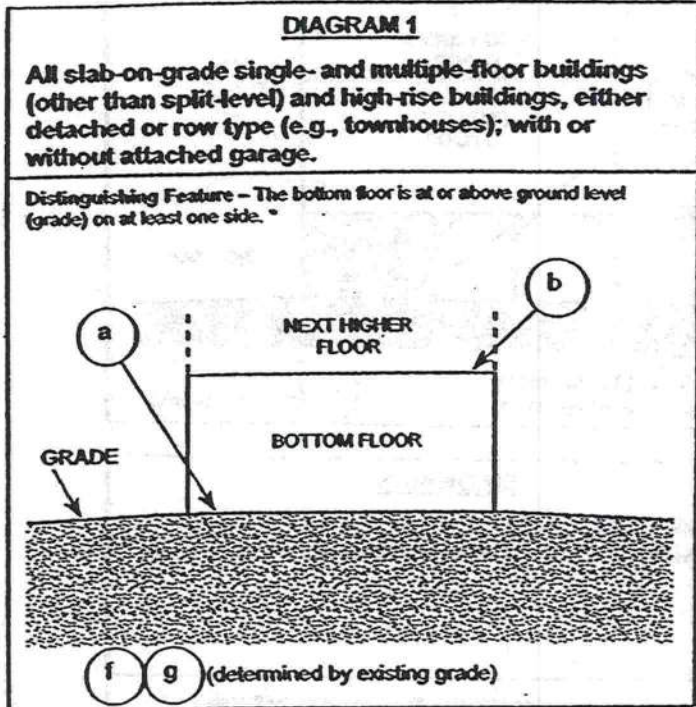
LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
SIGNATURE	DATE
COMMENTS	

☐ Check here if attachments

BUILDING DIAGRAMS

The following eight diagrams illustrate various types of buildings. Compare the features of the building being certified with the features shown in the diagrams and select the diagram most applicable. Enter the diagram number in Item C2 and the elevations in Items C3a-C3g.

In A zones, the floor elevation is taken at the top finished surface of the floor indicated; in V zones, the floor elevation is taken at the bottom of the lowest horizontal structural member (see drawing in instructions for Section C).



* A floor that is below ground level (grade) on all sides is considered a basement even if the floor is used for living purposes, or as an office, garage, workshop, etc.