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) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION					FOR INSUF	RANCE COMPANY USE	
A1. Building Owner's Name Deanna & Charles Johnson Policy Number:						ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1198 SW Baron Glen					Company N	AIC Number:	
City Fort White					ZIP Code 32038		
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 23 Southern Meadows Phase 3						
A4. Building Use (e.g., Reside	ntial, Non-Residential,	Addition	, Accessory, e	etc.) Residentia	al .	
A5. Latitude/Longi	tude: Lat. 3	0.0070*	Long8	32.6918*	Horizonta	Datum: NAD 1	927 × NAD 1983
		hs of the building if the					and the state of t
A7. Building Diagra	am Number	5					
A8. For a building	with a crawls	space or enclosure(s):					
a) Square foo	tage of craw	Ispace or enclosure(s)	12		sq ft		
b) Number of p	permanent fle	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	de
c) Total net are	ea of flood o	penings in A8.b		sq in			
d) Engineered	flood openir	ngs? Yes N	10				
A9. For a building v	vith an attach	ned garage:					
a) Square footage of attached garage sq ft							
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade							
c) Total net area of flood openings in A9.b sq in d) Engineered flood openings?							
d) Engineered flood openings?							
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Communi Columbia 120070	ty Name & C	Community Number		B2. County Columbia	Name		B3. State Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	M Panel	B8. Flood Zone(s)	B9. Base Flood El (Zone AO, use	evation(s) Base Flood Depth)
12023C0390C	D	02-04-2009	02-04-2	vised Date 2009	x	85	
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: Southern Meadows Phase 3							
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 Otherwise Protected Area (OPA)? Yes No							
Designation Date: CBRS OPA							

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Building Street Address (including Apt., Unit, Suite, and/o 1198 SW Baron Glen	r Bldg. No.) or P.O. Ro	ute and Box No.	Policy Number:			
City State ZIP Code Fort White Florida 32038			Company NAIC Number			
SECTION C – BUILDING EL	EVATION INFORMA	TION (SURVEY RI	EQUIRED)			
C1. Building elevations are based on: Constructing the Normal Report of the Property of the Pr	construction of the build VE, V1–V30, V (with Eding diagram specified Vertical Datum tems a) through h) belo Source: NAVD 88	FE), AR, AR/A, AR/ in Item A7. In Puert NAVD 88	/AE, AR/A1–A30, AR/AH, AR/AO.			
Datum used for building elevations must be the sam	ne as that used for the l	BFE.	Check the measurement used.			
a) Top of bottom floor (including basement, crawls	pace, or enclosure floor)	88.0 X feet meters			
b) Top of the next higher floor			N/A feet meters			
c) Bottom of the lowest horizontal structural member	er (V Zones only)	40-	N/A feet meters			
d) Attached garage (top of slab)						
 e) Lowest elevation of machinery or equipment ser (Describe type of equipment and location in Con 	e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)					
f) Lowest adjacent (finished) grade next to building	f) Lowest adjacent (finished) grade next to building (LAG)					
g) Highest adjacent (finished) grade next to building	g (HAG)		84.4 X feet meters			
 h) Lowest adjacent grade at lowest elevation of dec structural support 	ck or stairs, including	-	N/A feet meters			
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 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.						
Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments.						
Certifier's Name L. Scott Britt	License Number LS 5757	3	ANTHIO PARTY			
Title	7 200					
Owner	Place					
Company Name Britt Surveying and Mapping, LLC	Seal					
Address 1438 SW Main Boulevard	Here					
City Lake City	State Florida	ZIP Code 32025				
Signature AMA MA	Date 06-27-2023	Telephone (386) 752-7163	Ext.			
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.						
Comments (including type of equipment and location, per C2(e), if applicable) L-29638						
B10 - The plat of record for Southern Meadows Phase 3, has a M.F.E. of 85 feet for Lot 23 (plat book 9, pages 110 & 111) C2 - There was a nail & disk set in a 42" Oak Tree on Lot 23 with an elevation of 85.13 feet C2 e - Air Conditioner						

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IMPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSURANCE COMPANY USE
	ding Street Address (including Apt., Unit, Suite, and 8 SW Baron Glen	/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City		State Florida	ZIP Code 32038	Company NAIC Number
	SECTION E – BUILDING ELI FOR ZONE		RMATION (SURVEY NOT IE A (WITHOUT BFE)	REQUIRED)
com	Zones AO and A (without BFE), complete Items E1- plete Sections A, B,and C. For Items E1–E4, use no per meters.	–E5. If the Certif atural grade, if a	icate is intended to support vailable. Check the measure	a LOMA or LOMR-F request, ement used. In Puerto Rico only,
	Provide elevation information for the following and the highest adjacent grade (HAG) and the lowest a a) Top of bottom floor (including basement,	check the appro djacent grade (L	.AG).	
	 crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is 			
	For Building Diagrams 6–9 with permanent flood of the next higher floor (elevation C2.b in the diagrams) of the building is	penings provided	d in Section A Items 8 and/o	
	Attached garage (top of slab) is		feet mete	The state of the s
	Top of platform of machinery and/or equipment servicing the building is	0	feet _ mete	
	Zone AO only: If no flood depth number is available floodplain management ordinance? Yes			ccordance with the community's certify this information in Section G.
	SECTION F - PROPERTY OWN	IER (OR OWNE	R'S REPRESENTATIVE) C	ERTIFICATION
com	property owner or owner's authorized representative munity-issued BFE) or Zone AO must sign here. The control of the control o	e statements in	s Sections A, B, and E for Z Sections A, B, and E are co	one A (without a FEMA-issued or rect to the best of my knowledge.
Prop	erty Owner or Owner's Authorized Representative's	s Name		
Addr	ess	(City	tate ZIP Code
Sign	ature		Date To	elephone
Com	ments			
				Check here if attachments.

ELEVATION CERTIFICATE

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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 Bo 1198 SW Baron Glen	x No. Policy Number:
City State ZIP Code Fort White Florida 32038	Company NAIC Number
SECTION G - COMMUNITY INFORMATION (OPT	IONAL)
The local official who is authorized by law or ordinance to administer the community's flood Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) used in Items G8–G10. In Puerto Rico only, enter meters.	and sign below. Check the measurement
G1. The information in Section C was taken from other documentation that has been engineer, or architect who is authorized by law to certify elevation information. (In data in the Comments area below.)	dicate the source and date of the elevation
G2. A community official completed Section E for a building located in Zone A (without or Zone AO.	
G3. The following information (Items G4–G10) is provided for community floodplain m	nanagement 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 Improve	ment
G8. Elevation of as-built lowest floor (including basement) of the building:	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 Date	
Comments (including type of equipment and location, per C2(e), if applicable)	
	-
	☐ Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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				State	ZIP Code	Company NAIC Number
				Florida	32038	
	Apt., Unit, Suite, and/or Bldg. No.) State	Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. State ZIP Code				

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

Photo One Caption Front View

Clear Photo One



Photo Two

Photo Two Caption Rear View

Clear Photo Two

BUILDING PHOTOGRAPHS

Continuation Page

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		Expiration Date. November 00, 2022	
IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1198 SW Baron Glen			
Florida	32038		
	Unit, Suite, and/or Bldg. No.) State	Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. State ZIP Code	

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.

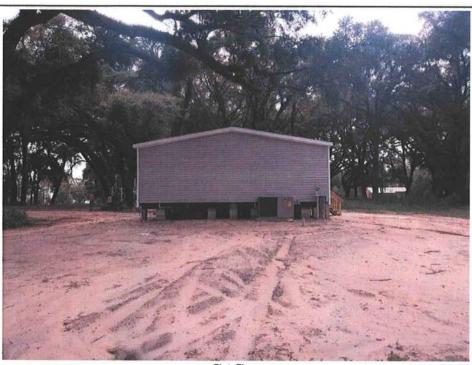


Photo Three

Photo Three Caption Right Side View

ELEVATION CERTIFICATE

Clear Photo Three

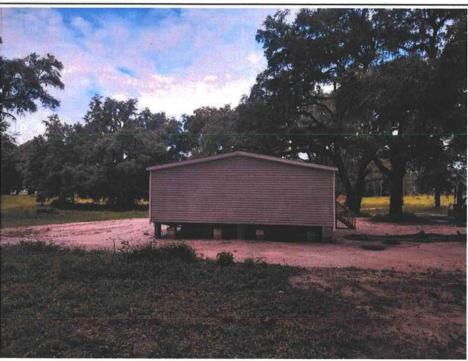


Photo Four

Photo Four Caption Left Side View

Clear Photo Four