NATIONAL FLOOD INSURANCE PROGRAM

# **ELEVATION CERTIFICATE**

### AND

### **INSTRUCTIONS**

**2015 EDITION** 

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

National Flood Insurance Program

#### ELEVATION CERTIFICATE AND INSTRUCTIONS

#### **Paperwork Reduction Act Notice**

Public reporting burden for this data collection is estimated to average 3.75 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 1800 South Bell Street, Arlington, VA 20598-3005, Paperwork Reduction Project (1660-0008). **NOTE: Do not send your completed form to this address.** 

#### **Privacy Act Statement**

Authority: Title 44 CFR § 61.7 and 61.8.

**Principal Purpose(s):** This information is being collected for the primary purpose of estimating the risk premium rates necessary to provide flood insurance for new or substantially improved structures in designated Special Flood Hazard Areas.

**Routine Use(s):** The information on this form may be disclosed as generally permitted under 5 U.S.C. § 552a(b) of the Privacy Act of 1974, as amended. This includes using this information as necessary and authorized by the routine uses published in DHS/ FEMA-003 – National Flood Insurance Program Files System or Records Notice 73 Fed. Reg. 77747 (December 19, 2008); DHS/ FEMA/NFIP/LOMA-1 – National Flood Insurance Program (NFIP) Letter of Map Amendment (LOMA) System of Records Notice 71 Fed. Reg. 7990 (February 15, 2006); and upon written request, written consent, by agreement, or as required by law.

**Disclosure:** The disclosure of information on this form is voluntary; however, failure to provide the information requested may result in the inability to obtain flood insurance through the National Flood Insurance Program or the applicant may be subject to higher premium rates for flood insurance. Information will only be released as permitted by law.

#### **Purpose of the Elevation Certificate**

The Elevation Certificate is an important administrative tool of the National Flood Insurance Program (NFIP). It is to be used to provide elevation information necessary to ensure compliance with community floodplain management ordinances, to determine the proper insurance premium rate, and to support a request for a Letter of Map Amendment (LOMA) or Letter of Map Revision based on fill (LOMR-F).

The Elevation Certificate is required in order to properly rate Post-FIRM buildings, which are buildings constructed after publication of the Flood Insurance Rate Map (FIRM), located in flood insurance Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, and AR/AO. The Elevation Certificate is not required for Pre-FIRM buildings unless the building is being rated under the optional Post-FIRM flood insurance rules.

As part of the agreement for making flood insurance available in a community, the NFIP requires the community to adopt floodplain management regulations that specify minimum requirements for reducing flood losses. One such requirement is for the community to obtain the elevation of the lowest floor (including basement) of all new and substantially improved buildings, and maintain a record of such information. The Elevation Certificate provides a way for a community to document compliance with the community's floodplain management ordinance.

Use of this certificate does not provide a waiver of the flood insurance purchase requirement. Only a LOMA or LOMR-F from the Federal Emergency Management Agency (FEMA) can amend the FIRM and remove the Federal mandate for a lending institution to require the purchase of flood insurance. However, the lending institution has the option of requiring flood insurance even if a LOMA/LOMR-F has been issued by FEMA. The Elevation Certificate may be used to support a LOMA or LOMR-F request. Lowest floor and lowest adjacent grade elevations certified by a surveyor or engineer will be required if the certificate is used to support a LOMA or LOMR-F request. A LOMA or LOMR-F request must be submitted with either a completed FEMA MT-EZ or MT-1 package, whichever is appropriate.

This certificate is used only to certify building elevations. A separate certificate is required for floodproofing. Under the NFIP, nonresidential buildings can be floodproofed up to or above the Base Flood Elevation (BFE). A floodproofed building is a building that has been designed and constructed to be watertight (substantially impermeable to floodwaters) below the BFE. Floodproofing of residential buildings is not permitted under the NFIP unless FEMA has granted the community an exception for residential floodproofed basements. The community must adopt standards for design and construction of floodproofed basements before FEMA will grant a basement exception. For both floodproofed non-residential buildings and residential floodproofed basements in communities that have been granted an exception by FEMA, a floodproofing certificate is required.

Additional guidance can be found in FEMA Publication 467-1, Floodplain Management Bulletin: Elevation Certificate, available on FEMA's website at <u>https://www.fema.gov/media-library/assets/documents/3539?id=1727</u>.

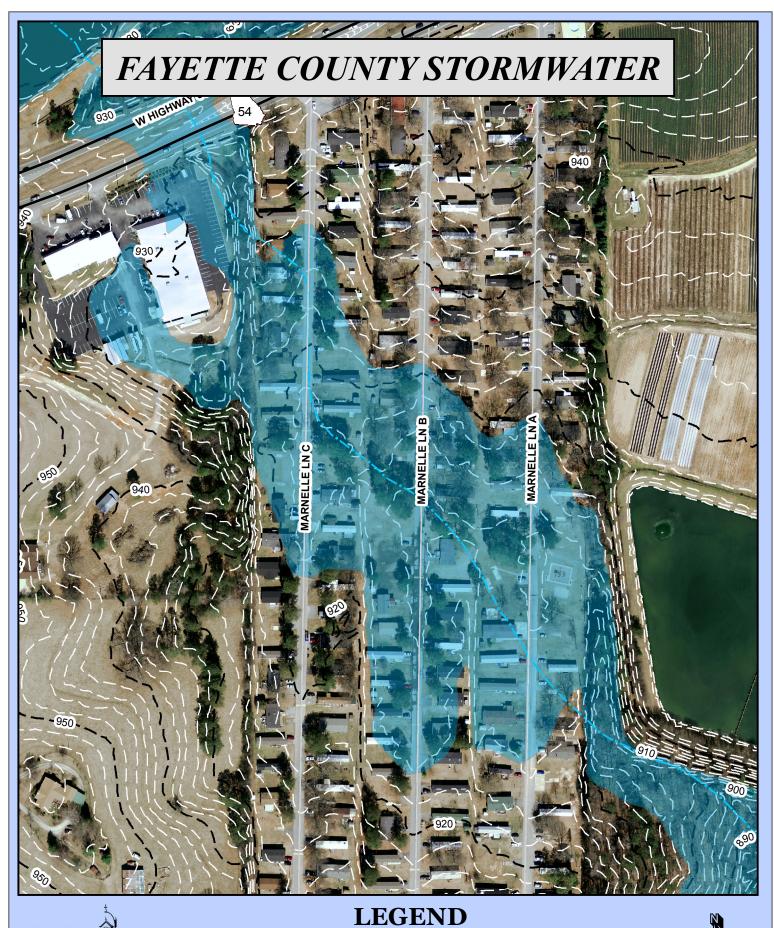
## **ELEVATION CERTIFICATE** Important: Follow the instructions on pages 1–9.

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Con	/ all nadoc	of this Elovation	Cortificate and all	attachmonte for (	1) community	(2) in	nsurance agent/company	and (2) building owner
COD	all payes		Certificate and an			/ UIIICIAI, (Z) II	isurance agent/company	and (3) building owner.

A1. Building Owner's Name       Policy Number:         A2. Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No.       Company NAIC Number:         City       State       ZIP Code         A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)       A.         A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)	SECTION A – PROPERTY INFORMATION FOR INSURANCE COMPANY USE														
A2. Building Street Address (including Apt., Unit. Suite, and/or Bidg. No.) or P.O. Route and Box No.       Company NAIC Number:         City       State       ZIP Code         A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)       A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)       A5. Latitude/Longitude:       Latitude/Longitude:       Latitude/Longitude:       Latitude/Longitude:       Latitude/Longitude:       NAD 1927       NAD 1983         A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.       NAT       NAD 1983         A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.       NAD 1983         A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.       NAT         A7. Building With a crawlspace or enclosure(s):       a) Square footage of rawlspace or enclosure(s)       sq ft         b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	A1. Building Own														
Box No.       Company NANC Number:       Company NANC Number:         City       State       ZIP Code         A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)								,							
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)         A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)         A5. Latitude/Longitude:       Lat         Lat       Long.         Horizontal Datum:       NAD 1927         NAD 1983         A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.         A7. Building Diagram Number	Box No.														
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)         A5. Latitude/Longitude:       Lat.       Long.       Horizontal Datum:       NAD 1927       NAD 1983         A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.       NAT       Building Diagram Number         A7. Building Diagram Number	City				State		ZIP	Code							
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)         A5. Latitude/Longitude:       Lat.       Long.       Horizontal Datum:       NAD 1927       NAD 1983         A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.       NAT       Building Diagram Number         A7. Building Diagram Number															
A5. Latitude/Longitude:       LatLongHorizontal Datum:       NAD 1927       NAD 1983         A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.       NAD 1927       NAD 1983         A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.       NAD 1927       NAD 1983         A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.       NAT       Building Diagram Number         A7. Building Diagram Number	A3. Property Desc	cription (Lot ar	nd Block Numbers, Ta	ax Parcel	Number, Le	gal Description, e	etc.)								
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.         A7. Building Diagram Number	A4. Building Use	(e.g., Residen	tial, Non-Residential,	Addition	, Accessory,	etc.)									
A7. Building Diagram Number	A5. Latitude/Long														
A8. For a building with a crawlspace or enclosure(s):       a) Square footage of crawlspace or enclosure(s)	A6. Attach at leas	t 2 photograpl	ns of the building if th	e Certific	ate is being i	used to obtain flo	od insurance	<u>}</u> .							
a) Square footage of crawlspace or enclosure(s)	A7. Building Diagr	am Number													
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade         c) Total net area of flood openings in A8.b	A8. For a building	with a crawls	pace or enclosure(s):												
c) Total net area of flood openings in A8.b	a) Square for	otage of crawls	space or enclosure(s)	)		sq ft									
d) Engineered flood openings?       Yes       No         A9. For a building with an attached 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	b) Number of	permanent flo	od openings in the cr	awlspace	e or enclosur	e(s) within 1.0 fo	ot above adja	acent grade							
d) Engineered flood openings?       Yes       No         A9. For a building with an attached 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 a	rea of flood op	enings in A8.b		sq ii	ı									
a) Square footage of attached garagesq 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.bsq in d) Engineered flood openings? Yes No <u>SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION</u> B1. NFIP Community Name & Community Number B2. County Name B3. State B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date B8. Flood Zone(s) B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 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 NAVD 1988 Other/Source: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No	d) Engineeree	d flood openin	gs? 🗌 Yes 🗌 I	No											
a) Square footage of attached garagesq 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.bsq in d) Engineered flood openings? Yes No <u>SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION</u> B1. NFIP Community Name & Community Number B2. County Name B3. State B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date B8. Flood Zone(s) B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 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 NAVD 1988 Other/Source: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No	A9. For a building	with an attach	ed garage:												
b) Number of permanent flood openings in A9.b      sq in         c) Total net area of flood openings in A9.b      sq in         d) Engineered flood openings?       Yes       No         SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION         B1. NFIP Community Name & Community Number       B2. County Name       B3. State         B4. Map/Panel       B5. Suffix       B6. FIRM Index Date       B7. FIRM Panel Effective/ Revised Date       B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)         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:	_				sq f	t									
c) Total net area of flood openings in A9.b      sq in         d) Engineered flood openings?       Yes       No         SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION         B1. NFIP Community Name & Community Number       B2. County Name       B3. State         B4. Map/Panel Number       B5. Suffix       B6. FIRM Index Date       B7. FIRM Panel Effective/ Revised Date       B8. Flood Zone(s)       B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)         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       NAVD 1988       Other/Source:         B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?       Yes       No						1.0 foot above a	djacent grade	Э							
d) Engineered flood openings?       Yes       No         SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION         B1. NFIP Community Name & Community Number       B2. County Name       B3. State         B4. Map/Panel Number       B5. Suffix       B6. FIRM Index Date       B7. FIRM Panel Effective/ Revised Date       B8. Flood Zone(s)       B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)         B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:       FIRM       Community Determined       Other/Source:         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		-		U	-				-						
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION         B1. NFIP Community Name & Community Number       B2. County Name       B3. State         B4. Map/Panel Number       B5. Suffix       B6. FIRM Index Date       B7. FIRM Panel Effective/ Revised Date       B8. Flood Zone(s)       B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)         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       NAVD 1988       Other/Source:       B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?       Yes       No				No											
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B4. Map/Panel Number       B5. Suffix       B6. FIRM Index Date       B7. FIRM Panel Effective/ Revised Date       B8. Flood Zone(s)       B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)         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: MRVD 1929         B11. Indicate elevation datum used for BFE in Item B9:       NGVD 1929       NAVD 1988       Other/Source: MRVD 1988         B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?       Yes       No		SE	CTION B – FLOOD	INSURA	NCE RATE	MAP (FIRM) IN	IFORMATIC	N							
Number       Date       Effective/ Revised Date       Zone(s)       (Zone AO, use Base Flóod Depth)         B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:       Image: Source in the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:       Image: Source in the s	B1. NFIP Commur	nity Name & C	ommunity Number		B2. County	Name		B3. Sta	ite						
Number       Date       Effective/ Revised Date       Zone(s)       (Zone AO, use Base Flood Depth)         B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:       Image: Source in the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:       Image: Source in the s															
FIS Profile       FIRM       Community Determined       Other/Source:         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		Number   Date Effective/ Zone(s) (Zone AO, use Base Flood Depth)													
FIS Profile       FIRM       Community Determined       Other/Source:         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															
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															
	B11. Indicate elev	ation datum u	sed for BFE in Item E	39: 🗌 N	GVD 1929	NAVD 1988	Other/	Source:							
Designation Date: CBRS OPA	B12. Is the buildir	ig located in a	Coastal Barrier Reso	ources Sy	/stem (CBRS	6) area or Otherw	vise Protecte	d Area (OPA)? 🗌	] Yes 🗌 No						
	Designation	Date:		CBRS											

ELEVATION CERTIFICATE			OMB No. 1660-0008 Expiration Date: November 30, 2018
IMPORTANT: In these spaces, copy the	corresponding information	from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Ur	nit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
1512 Highway 54 W Unit B123	_		
City	State	ZIP Code	Company NAIC Number
Fayetteville	Georgia	30215	
SECTION C -	BUILDING ELEVATION IN	FORMATION (SURVEY I	REQUIRED)
C1. Building elevations are based on: *A new Elevation Certificate will be r			ruction*   Finished Construction
C2. Elevations – Zones A1–A30, AE, AF Complete Items C2.a–h below acco	rding to the building diagram s	specified in Item A7. In Pue	
Benchmark Utilized:		al Datum:	
Indicate elevation datum used for the	, .	h h) below.	
□ NGVD 1929 □ NAVD 1			
Datum used for building elevations r	nust be the same as that used	tor the BFE.	Check the measurement used.
a) Top of bottom floor (including ba	sement, crawlspace, or enclos	sure floor)	feet 🗌 meters
b) Top of the next higher floor		· · · · ·	feet meters
c) Bottom of the lowest horizontal s	tructural member (V Zones on	lv)	feet meters
d) Attached garage (top of slab)			feet meters
<ul> <li>e) Lowest elevation of machinery of (Describe type of equipment and</li> </ul>	r equipment servicing the build location in Comments)		feet 🗌 meters
f) Lowest adjacent (finished) grade			feet meters
g) Highest adjacent (finished) grade	• • •		feet meters
h) Lowest adjacent grade at lowest		cluding	
structural support			feet meters
SECTION D	- SURVEYOR, ENGINEER,	OR ARCHITECT CERTI	FICATION
This certification is to be signed and seal I certify that the information on this Certif statement may be punishable by fine or i	ficate represents my best effor	ts to interpret the data ava	by law to certify elevation information. ilable. I understand that any false
Were latitude and longitude in Section A	provided by a licensed land si	urveyor? 🗌 Yes 🗌 No	Check here if attachments.
Certifier's Name	License Nu	mber	
Title			
Company Name			
Address			
City	State	ZIP Code	
Signature	Date	Telephone	Ext.
Copy all pages of this Elevation Certificate	and all attachments for (1) com	nmunity official, (2) insuranc	e agent/company, and (3) building owner.
Comments (including type of equipment a	and location, per C2(e), if appl	licable)	

ELEVATION CERTIFICATE	OMB No. 1660-0008 Expiration Date: November 30, 2018					
IMPORTANT: In these spaces, copy the cor	responding information from Se	ection A.	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, S 1512 Highway 54 W Unit B123	Suite, and/or Bldg. No.) or P.O. Ro	oute and Box No.	Policy Number:			
City	State ZI	P Code	Company NAIC Number			
Fayetteville	Georgia 30	0215				
SECTION C - BU	ILDING ELEVATION INFORMA	TION (SURVEY R	EQUIRED)			
C1. Building elevations are based on: A new Elevation Certificate will be requ	•	ilding Under Constr ling is complete.	ruction* 🛛 Finished Construction			
C2. Elevations – Zones A1–A30, AE, AH, A Complete Items C2.a–h below according	(with BFE), VE, V1–V30, V (with I g to the building diagram specified	BFE), AR, AR/A, AR I in Item A7. In Puer	VAE, AR/A1–A30, AR/AH, AR/AO. to Rico only, enter meters.			
Benchmark Utilized: Lieca SmartNet	Vertical Datum	NAVD1988				
Indicate elevation datum used for the ele	evations in items a) through h) bel	ow.				
□ NGVD 1929 × NAVD 1988						
Datum used for building elevations must	be the same as that used for the	BFE.	Check the measurement used.			
a) Top of bottom floor (including basem	ent, crawlspace, or enclosure floo	r)	923.84 X feet meters			
b) Top of the next higher floor		.,	N/A feet meters			
c) Bottom of the lowest horizontal struct	ural member (V Zones only)		N/A feet meters			
d) Attached garage (top of slab)			N/A feet meters			
<ul> <li>e) Lowest elevation of machinery or equ (Describe type of equipment and local</li> </ul>	upment servicing the building		923.84 X feet meters			
f) Lowest adjacent (finished) grade nex	· · · · · · · · · · · · · · · · · · ·		919.0 feet meters			
g) Highest adjacent (finished) grade nex			921.2			
h) Lowest adjacent grade at lowest elev	• • • •					
structural support			N/A feet meters			
SECTION D - SU	JRVEYOR, ENGINEER, OR AR	CHITECT CERTIF	ICATION			
This certification is to be signed and sealed b I certify that the information on this Certificate statement may be punishable by fine or impri	e represents my best efforts to inte	rnret the data availa	y law to certify elevation information. able. I understand that any false			
Were latitude and longitude in Section A prov			Check here if attachments.			
Certifier's Name	License Number					
Swinson A. Gaskins, Sr.	1620		EOR			
Title Georgia Registered Land Surveyor			GEGISTER			
Company Name			Place F			
S.A. Gaskins & Associates, LLC.			PROFERSION			
Address			- SE ENAL T			
550 Poplar Drive			TOD SURVEY S			
City	State	ZIP Code	A. GASKINS			
Brooks	Georgia	30205				
Signature	Date 06-07-2019	Telephone 678-571-3054	Ext.			
Copy all pages of this Elevation Certificate and a	all attachments for (1) community o	fficial, (2) insurance	agent/company. and (3) building owner			
Comments (including type of equipment and lo						
See attached supporting documents for Base						
C2(e) is an air conditioner unit.						





Streams 50

500 Year Storm 100 Year Storm Zone A

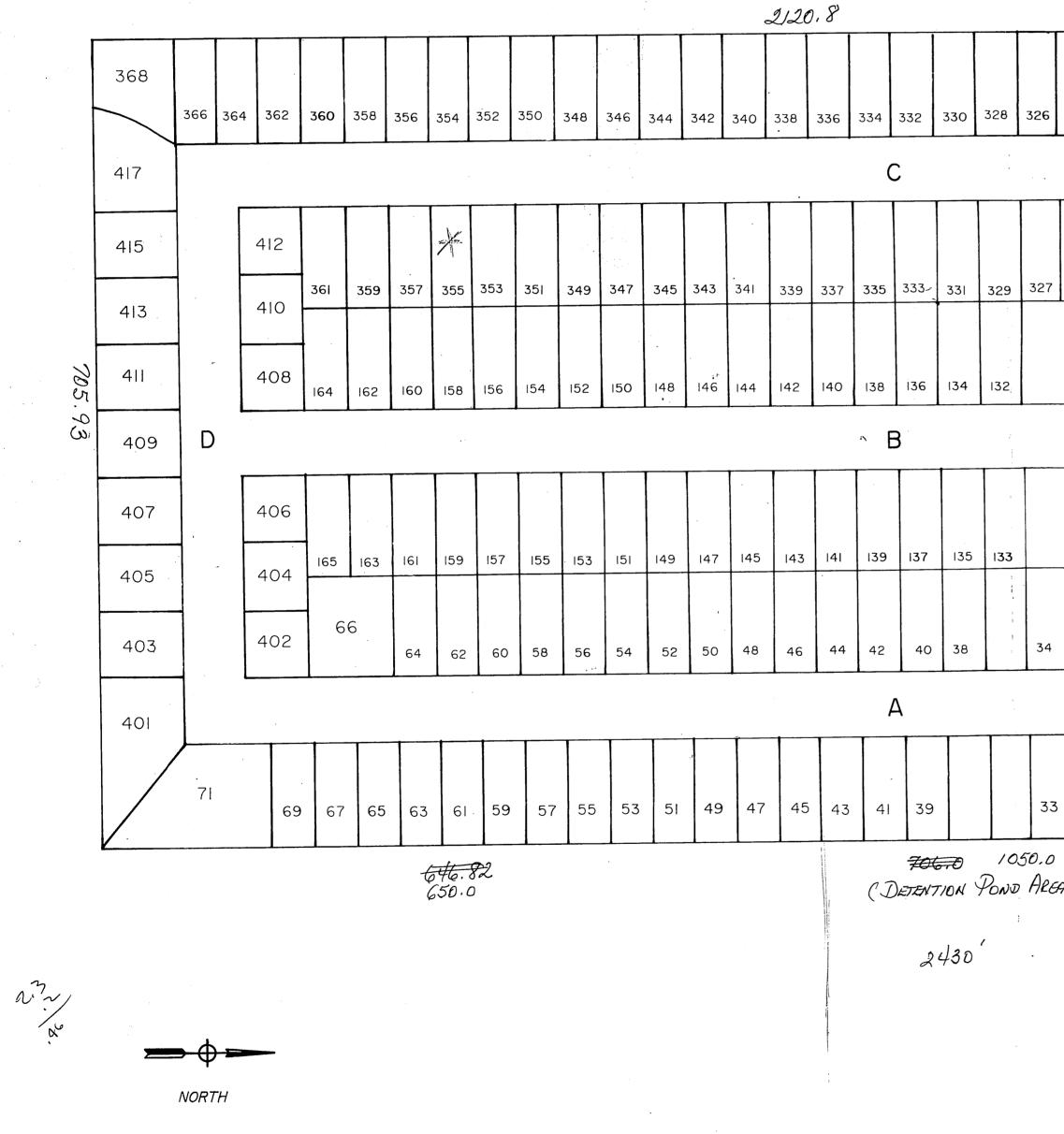
100 Year Storm Zone AE

100 Year Storm Zone AE (Floodway)



	rnelle N oodpla				k				vette
P. L. Fr				E					
· HHH	Existing 100	) year Flood	1 Plain		©113 0 (C115 0 (C115				
	Future 100 y	year Flood	Plain	C316	<u>G317</u>	B120	A A A	1	A all a
Wi	thin Floodpla	ain		<b>C318</b>	1	THE SE	A DECEMBER	1 HE	Contraction and the
c	No No				(C319	B122	3128		
-	Yes			C320		TAL SAL		A28	
				C322	C321	B124	B125	A30	A29
Unit G A28	IS Elevation 918.48	Unit B140	GIS Elevation 915.68	6320			9		- C
A29	917.97	B141	915.87	•	<b>C325</b>		B129		A31
A30 A31	917.19 916.83	B142 B143	915.79 916.03	<b>G326</b>				IN INT	
A32	915.66	B143	916.00	•				AS4	ABB
A33	914.83	B145	915.65			<u>B132</u>			1111
A34 1 A35	914.19 913.11	B146 B147	916.52 916.76	O	(329	119111	B133		A35
A38	913.05	B148	918.11	(330)		B134			
A39 A40	912.69 913.22	B149 C308	917.81 926.82			80	DIOT	A38	
A40	913.06	C309	925.76	<b>G332</b>	0		0		
A42	912.91	C310	926.32			BIB 6	R127		
A43 A44	913.35 913.54	C311 C312	924.43 924.37	C204	The second of	BIR	0	E TUD	
A45	913.65	C313	923.63	0		0	DI DI DI	0	A39
A46	913.84	C314	922.93			-B140	O O	A42	
A47 A48	914.53 914.33	C315 C316	921.51 921.78				B141	0	
A50	915.06	C317	920.06			B142	0	A44	
B120 B122	920.98 918.77	C318 C319	921.31 918.68		ALL REPART		B143	. O	A43 -
B122 B123	918.42	C320	918.08	(Real )		<b>B1</b> 44	10		
B124	916.88	C321	917.58				B145	0	A45
B125 B126	917.56 915.92	C322 C323	919.43 917.26			B146		MR	
B120 B127	915.92	C323	917.26 919.71	(mig-		0	B1/47	r olf	A47
B129	914.84	C325	917.94		A March 1	B1/48	10.1	A50	
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