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 INSUI	RANCE COMPANY USE	
A1. Building Owner's Name Jeff Lindsey Communities Policy Number:					ber:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: 109 Windsail Way						IAIC Number:	
City Fayetteville	City State ZIP Code						
		nd Block Numbers, Ta Subdivision, Tax Parc			gal Description, et	cc.)	
A4. Building Use (e.g., Resider	ntial, Non-Residential,	Addition	, Accessory,	etc.) Residenti	al	
A5. Latitude/Longi	tude: Lat. 3	3.437596	Long8	34.523348	Horizonta	ıl Datum: NAD	1927 × NAD 1983
A6. Attach at least	_ 2 photograp	hs of the building if the	e Certific	ate is being ι	 sed to obtain floo	d insurance.	
A7. Building Diagra	am Number	7					
A8. For a building	with a crawls	space or enclosure(s):					
a) Square foo	tage of craw	lspace or enclosure(s)			0.00 sq ft		
b) Number of	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foo	t above adjacent gr	ade 0
c) Total net ar	ea of flood o	penings in A8.b		0.00 sq in	1		
d) Engineered	l flood openir	ngs? Yes 🗵 N	No				
A9. For a building v	vith an attach	ned garage:					
a) Square footage of attached garage 500.00 sq ft							
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0							
c) Total net area of flood openings in A9.b 0.00 sq in							
d) Engineered flood openings? Yes No							
, ,	a) Engineered nood openings:						
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Community Name & Community Number Fayette 130432 B2. County Name Fayette B3. State Georgia							
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood B (Zone AO, us	Elevation(s) le Base Flood Depth)
13113C0084	E	09-26-2008	09-26-2		A & X	872.18	
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							
Designation Date: CBRS OPA							

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IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or 109 Windsail Way	Policy Number:					
City State Fayetteville Geo		Code 15	Company NAIC Number			
SECTION C – BUILDING ELE	VATION INFORMA	TION (SURVEY RE	EQUIRED)			
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on:						
 h) Lowest adjacent grade at lowest elevation of decl structural support 	k or stairs, including		888.2 X feet meters			
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION						
This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment und Were latitude and longitude in Section A provided by a lice	veyor, engineer, or army best efforts to inte der 18 U.S. Code, Se ensed land surveyor?	chitect authorized by rpret the data availation 1001.	law to certify elevation information.			
Certifier's Name Randy McLain	License Number 2703					
Title Registered Land surveyor Company Name McLain Surveying, Inc. Address 6 Madison Street City Newnan	State Georgia	ZIP Code 30263	No. 2703			
Signature Randy McLain Date: 2021.08.03 10:58:56-04100	Date 08-03-2021	Telephone (770) 251-8523	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 A portion of this lot lies in a 100 year flood plain as per Fa been established for this lot. Type of Equipment per C2(e) - A/C Unit		udy. A minimum finis	shed floor elevation of 875.18 has			

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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. 109 Windsail Way					
ZIP Code gia 30215	Company NAIC Number				
TION INFORMATION (SURVEY NO) AND ZONE A (WITHOUT BFE)	T REQUIRED)				
FOR ZONE AO AND ZONE A (WITHOUT BFE) 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. 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). a) Top of bottom floor (including basement, crawlspace, or enclosure) is					
me					
- J	State ZIP Code Georgia 30276				
	Telephone (404) 353-2119				
	ZIP Code gia 30215 TION INFORMATION (SURVEY NO AND ZONE A (WITHOUT BFE) If the Certificate is intended to supporal grade, if available. Check the measures to show whether the appropriate boxes to show whether the grade (LAG).				

ELEVATION CERTIFICATE

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MPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, St 109 Windsail Way	Policy Number:			
City Fayetteville	State Georgia	ZIP Code 30215		Company NAIC Number
SECTIO	N G – COMMUNI	TY INFORMATION (OPTI	ONAL)	
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	Certificate. Comp	ster the community's flood lete the applicable item(s)	plain mar and sign	nagement ordinance can complete below. Check the measurement
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)				
G2. A community official completed Section or Zone AO.	on E for a building	located in Zone A (withou	ıt a FEM <i>A</i>	N-issued or community-issued BFE)
G3. The following information (Items G4–	G10) is provided fo	or community floodplain m	anageme	ent purposes.
G4. Permit Number	G5. Date Permit	slssued		Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	New Constructio	n	ment	
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		Date		
Comments (including type of equipment and loo	cation, per C2(e), i	f applicable)		
				Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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IMPORTANT: In these spaces, c	FOR INSURANCE COMPANY USE		
Building Street Address (including 109 Windsail Way	Policy Number:		
City Fayetteville	State Georgia	ZIP Code 30215	Company NAIC Number

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.

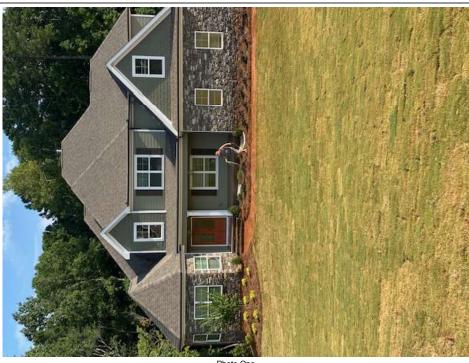


Photo One

Photo One Caption Front View

Clear Photo One



Photo Two

Photo Two Caption Rear View

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 109 Windsail Way			Policy Number:
City	State	ZIP Code	Company NAIC Number
Fayetteville	Georgia	30215	

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.

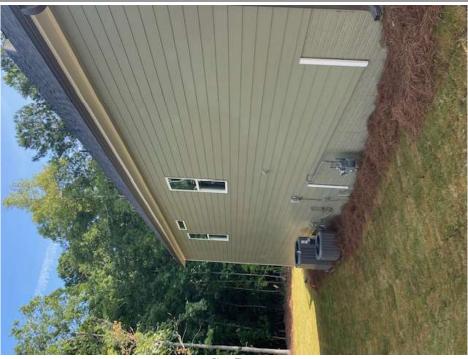


Photo Three

Photo Three Caption Left Side View

Clear Photo Three



Photo Four Caption Right Side View

Clear Photo Four
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