

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

OMB Control No. 1660-0008  
Expiration Date: 06/30/2026

**ELEVATION CERTIFICATE**

**IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11**

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

FOR INSURANCE COMPANY USE	
A1. Building Owner's Name: <u>555 LLC</u>	Policy Number: _____
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>126 Lucinda Lane</u>	Company NAIC Number: _____
City: <u>Fayetteville</u> State: <u>GA</u> ZIP Code: <u>30214</u>	
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: <u>Deed Book 5827, Page 187, Tax Parcel 0709012</u>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): <u>Residential</u>	
A5. Latitude/Longitude: Lat. <u>33.514922°N</u> Long. <u>-084.537690°W</u> Horiz. Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983 <input type="checkbox"/> WGS 84	
A6. Attach at least two and when possible four clear color photographs (one for each side) of the building (see Form pages 7 and 8).	
A7. Building Diagram Number: <u>8</u>	
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s): <u>1220 +/-</u> sq. ft.	
b) Is there at least one permanent flood opening on two different sides of each enclosed area? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>0</u> Engineered flood openings: <u>0</u>	
d) Total net open area of non-engineered flood openings in A8.c: <u>N/A</u> sq. in.	
e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructions): <u>N/A</u> sq. ft.	
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): <u>N/A</u> sq. ft.	
A9. For a building with an attached garage:	
a) Square footage of attached garage: <u>N/A</u> sq. ft.	
b) Is there at least one permanent flood opening on two different sides of the attached garage? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>0</u> Engineered flood openings: <u>0</u>	
d) Total net open area of non-engineered flood openings in A9.c: <u>N/A</u> sq. in.	
e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructions): <u>N/A</u> sq. ft.	
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): <u>N/A</u> sq. ft.	
B1.a. NFIP Community Name: <u>Fayette County</u> B1.b. NFIP Community Identification Number: <u>130432</u>	
B2. County Name: <u>Fayette</u> B3. State: <u>GA</u> B4. Map/Panel No.: <u>13113C0018E</u> B5. Suffix: <u>E</u>	
B6. FIRM Index Date: <u>09/26/2008</u> B7. FIRM Panel Effective/Revised Date: <u>09/26/2008</u>	
B8. Flood Zone(s): <u>X unshaded</u> B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): <u>916.4see comm.</u>	
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: <input type="checkbox"/> FIS <input type="checkbox"/> FIRM <input checked="" type="checkbox"/> Community Determined <input type="checkbox"/> Other: <u>Flood Hazard Cert provided by Fayette County Attached</u>	
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA	
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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FOR INSURANCE COMPANY USE
Policy Number:
Company NAIC Number:

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: [ ] Construction Drawings\* [ ] Building Under Construction\* [X] Finished Construction
\*A new Elevation Certificate will be required when construction of the building is complete.
C2. Elevations - Zones A1-A30, AE, AH, AO, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO, A99. Complete Items C2.a-h below according to the Building Diagram specified in Item A7. In Puerto Rico only, enter meters.
Benchmark Utilized: EGPS Real Time Network Vertical Datum: NAVD 1988

Indicate elevation datum used for the elevations in items a) through h) below.

[ ] NGVD 1929 [X] NAVD 1988 [ ] Other:

Datum used for building elevations must be the same as that used for the BFE. Conversion factor used? [ ] Yes [X] No

If Yes, describe the source of the conversion factor in the Section D Comments area.

Check the measurement used:

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor): 925.6 [X] feet [ ] meters
b) Top of the next higher floor (see Instructions): 929.5 [X] feet [ ] meters
c) Bottom of the lowest horizontal structural member (see Instructions): N/A [ ] feet [ ] meters
d) Attached garage (top of slab): N/A [ ] feet [ ] meters
e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area): 924.8 [X] feet [ ] meters
f) Lowest Adjacent Grade (LAG) next to building: [ ] Natural [X] Finished 924.5 [X] feet [ ] meters
g) Highest Adjacent Grade (HAG) next to building: [ ] Natural [X] Finished 926.9 [X] feet [ ] meters
h) Finished LAG at lowest elevation of attached deck or stairs, including structural support: 926.1 [X] 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 state 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? [X] Yes [ ] No

[X] Check here if attachments and describe in the Comments area.

Certifier's Name: Warren Gray License Number: 2984

Title: Ga. Registered Land Surveyor

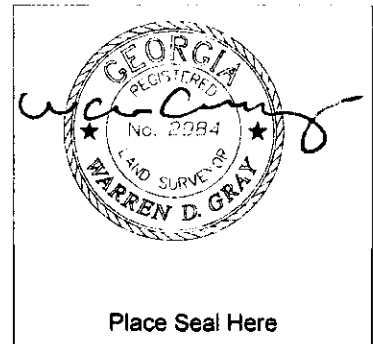
Company Name: W.D. Gray and Associates, Inc.

Address: 160-B Greencastle Road

City: Tyrone State: GA ZIP Code: 30290

Telephone: (770) 486-7552 Ext.: Email: wdgraywarren@gmail.com

Signature: [Signature] Date: 05/08/2026



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

Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and description of any attachments): The latitude and longitude were taken from Google Earth. The machinery in C2e is an outside HVAC unit. Per the referenced FIRM, this house is in a Zone X unshaded area. Fayette county is requiring this Flood Certificate based off the elevation of the center of the road on Lucinda Lane at a pipe crossing approximately 100 feet East of this property. Elevation at the center of the road is 916.4 and house requires a minimum finished floor elevation of 3 feet above that. This surveyor did not participate in the establishment of this minimum finished floor elevation.



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	Company NAIC Number: _____

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Section A, B, C, E, G, or H of this Elevation Certificate. Complete the applicable item(s) and sign below when:

- G1.  The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by state law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.a.  A local official completed Section E for a building located in Zone A (without a BFE), Zone AO, or Zone AR/AO, or when item E5 is completed for a building located in Zone AO.
- G2.b.  A local official completed Section H for insurance purposes.
- G3.  In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E and H.
- G4.  The following information (Items G5–G11) is provided for community floodplain management purposes.
- G5. Permit Number: \_\_\_\_\_ G6. Date Permit Issued: \_\_\_\_\_
- G7. Date Certificate of Compliance/Occupancy Issued: \_\_\_\_\_
- G8. This permit has been issued for:  New Construction  Substantial Improvement
- G9.a. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_  feet  meters Datum: \_\_\_\_\_
- G9.b. Elevation of bottom of as-built lowest horizontal structural member: \_\_\_\_\_  feet  meters Datum: \_\_\_\_\_
- G10.a. BFE (or depth in Zone AO) of flooding at the building site: \_\_\_\_\_  feet  meters Datum: \_\_\_\_\_
- G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member: \_\_\_\_\_  feet  meters Datum: \_\_\_\_\_
- G11. Variance issued?  Yes  No If yes, attach documentation and describe in the Comments area.

The local official who provides information in Section G must sign here. *I have completed the information in Section G and certify that it is correct to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.*

Local Official's Name: \_\_\_\_\_ Title: \_\_\_\_\_

NFIP Community Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Ext.: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information in Sections A, B, D, E, or H):

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City: Fayetteville State: GA ZIP Code: 30214	Policy Number: _____ Company NAIC Number: _____



The property owner, owner's authorized representative, or local floodplain management official may complete Section H for all flood zones to determine the building's first floor height for insurance purposes. Sections A, B, and I must also be completed. Enter heights to the nearest tenth of a foot (nearest tenth of a meter in Puerto Rico). **Reference the Foundation Type Diagrams (at the end of Section H Instructions) and the appropriate Building Diagrams (at the end of Section I Instructions) to complete this section.**

H1. Provide the height of the top of the floor (as indicated in Foundation Type Diagrams) above the Lowest Adjacent Grade (LAG):

a) For Building Diagrams 1A, 1B, 3, and 5-8. Top of bottom \_\_\_\_\_  feet  meters  above the LAG floor (include above-grade floors only for buildings with crawlspaces or enclosure floors) is:

b) For Building Diagrams 2A, 2B, 4, and 6-9. Top of next \_\_\_\_\_  feet  meters  above the LAG higher floor (i.e., the floor above basement, crawlspace, or enclosure floor) is:

H2. Is all Machinery and Equipment servicing the building (as listed in Item H2 instructions) elevated to or above the floor indicated by the H2 arrow (shown in the Foundation Type Diagrams at end of Section H instructions) for the appropriate Building Diagram?

Yes  No



The property owner or owner's authorized representative who completes Sections A, B, and H must sign here. *The statements in Sections A, B, and H are correct to the best of my knowledge.* Note: If the local floodplain management official completed Section H, they should indicate in Item G2.b and sign Section G.

Check here if attachments are provided (including required photos) and describe each attachment in the Comments area.

Property Owner or Owner's Authorized Representative Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Ext.: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

**ELEVATION CERTIFICATE**  
**IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11**  
**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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 126 Lucinda Lane

City: Fayetteville State: GA ZIP Code: 30214

**FOR INSURANCE COMPANY USE**

Policy Number: \_\_\_\_\_

Company NAIC Number: \_\_\_\_\_

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Photo One

Photo One Caption: Front 05/05/2026

Clear Photo One



Photo Two

Photo Two Caption: Left 05/05/2026

Clear Photo Two

**ELEVATION CERTIFICATE**  
**IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11**  
**BUILDING PHOTOGRAPHS**

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:  
126 Lucinda Lane

**FOR INSURANCE COMPANY USE**

Policy Number: \_\_\_\_\_

City: Fayetteville State: GA ZIP Code: 30214

Company NAIC Number: \_\_\_\_\_

Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Photo Three

Photo Three Caption: Rear 05/05/2026

Clear Photo Three



Photo Four

Photo Four Caption: Right 05/05/2026

Clear Photo Four



Environmental Management Department

# Flood Hazard Certificate

Permit No.: FHAZ-05-2025-075526

Parcel No: 0709 012

Permit Status: **Issued**

140 Stonewall Avenue West Suite 203  
Fayetteville, GA 30214  
Phone: (770) 305-5410

Permit Note :

Permit Issued Date: 5/16/2025

<b>Subdivision:</b>	N/A	<b>Lot #:</b>	N/A
<b>Address:</b>	126 LUCINDA LN, Fayetteville, GA 30214	<b>100 Yr. Flood Plain Elevation</b>	N/A
<b>FIRM Panel #:</b>	13113C0018E	<b>Date:</b>	09/26/2008
<b>Creek Name:</b>		<b>Watercourse Type:</b>	Unnamed Stream
<b>Total Acreage:</b>		<b>Disturbed Acreage:</b>	
<b>Owner:</b>	TinaFurgala	<b>Phone Number:</b>	6786332324
<b>Builder:</b>	TinaFurgala	<b>Phone Number:</b>	6786332324
<b>Natural Buffer:</b>	25	<b>Impervious Setback:</b>	0
<b>Base Flood Elevation</b>		<b>MFFE:</b>	

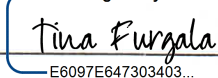
NOTE: SEE ATTACHED PLAT FOR EXACT STRUCTURE(S) LOCATION AND SETBACKS. PROPERTY CORNERS MUST BE ADEQUATELY STAKED.

### APPLICANT'S COVENANT

As the applicant for a Certification of Stormwater Compliance for the property hereon described, I do hereby covenant that the information supplied with this application is true and correct and I do hereby agree to comply with the ordinances of Fayette County pertaining to floodplain, watershed protection, and erosion & sediment control. It is understood and agreed by the applicant that any error, misstatement, or misrepresentation of fact, either with or without intention on his part, such as might if known, cause a refusal of this application or any alteration or change in plans made without approval of the Stormwater Compliance, shall constitute sufficient grounds for revocation of said Certificate of Stormwater and any Building Permit resulting therefrom.

APPLICANT

DocuSigned by:

  
E6097E647303403...

DATE

5/10/2026 | 6:05 PM EDT



**Comments: Manmade flood hazard on adjacent property.3 feet over 100 year flood elevation or top of road.**