

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-8.

OMB No. 1660-0008
Expires February 28, 2009

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name Dennis Wallace		For Insurance Company Use: Policy Number	
A2. Building Street Address (Including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 254 North 15th St.		Company NAIC Number	
City Griffin	State GA	ZIP Code 30223-	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Block 2, Lot 17, 010 02 017			
A4. Building Use (e.g., Residential, Non-residential, Addition, Accessory, etc.) Residential			
A5. Latitude/Longitude: Lat. _____ Long. _____ Horizontal Datum: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD1983			
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.			
A7. Building Diagram Number 1			
A8. For a building with a crawl space or enclosure(s), provide:		A9. For a building with an attached garage, provide:	
a) Square footage of crawl space or enclosure(s) _____ sq ft	b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____	a) Square footage of attached garage _____ sq ft	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq in		c) Total net area of flood openings in A9.b _____ sq in	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number 130165 City of Griffin		B2. County Name Spalding		B3. State GA	
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) 918.71
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input checked="" type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate the elevation datum used for BFE in B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
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					

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. Elevations - Zone 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 C2.a-g below according to the building diagram specified in Item A7.

Benchmark Utilized _____ Vertical Datum NAVD88

Conversion/Comments _____

Check the measurement used.

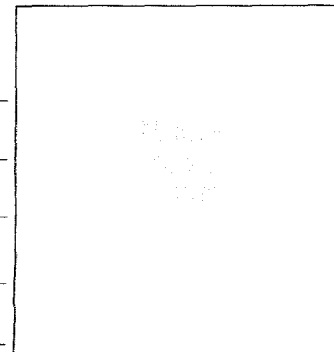
a) Top of bottom floor (including basement, crawl space, or enclosure floor)	_____ 921.71	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of next higher floor	_____	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attach garage (top of slab)	_____	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	_____	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	_____	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	_____	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)

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.

Check here if comments are provided on back of form.

Certifier's Name Kenneth E. Presley		License Number LS001327	
Title Registered Land Surveyor	Company Name Bernhard, Harper, & Associates, Inc.		
Address 120 East Bank St.	City Griffin	State GA	ZIP Code 30224-
Signature	Date	Telephone (770) 227-0818	



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.

254 North 15th St.

City State ZIP Code
Griffin GA 30223

For Insurance Company Use:

Policy Number

Company NAIC Number

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

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

Comments

Signature

Date

Check here if attachments

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

For Zones AO and Zone 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, crawl space, or enclosure) is _____ feet meters above or below the HAG.

b) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the LAG.

E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.

E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.

E4. The top of the platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.

E5. 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 Section A, B, and E for Zone A (without FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, 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. Check the measurement used in Items G8. and G9.

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 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
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G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters (PR) Datum: _____

G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum: _____

Local Official's Name Title

Community Name Telephone

Signature Date

Comments

Check here if attachments