FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires December 31, 2005

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Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: BUILDING OWNER'S NAME Policy Number CATHERINE GARVIE BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 231 BAY CIRCLE DRIVE CITY STATE ZIP CODE SANTA ROSA BEACH 32459 PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 15, BLOCK 1, SANTA ROSA BEACH ESTATES, PLAT BOOK 3, PAGE 32, WALTON COUNTY, FLORIDA BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL LATITUDE/LONGITUDE (OPTIONAL) SOURCE: GPS (Type):____ HORIZONTAL DATUM: ##° - ##' - ##.##" or ##.####") □ NAD 1983 USGS Quad Map ■ NAD 1927 Other. SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME B3. STATE** 120317 WALTON COUNTY WALTON FL **B4. MAP AND PANEL B7. FIRM PANEL** B9. BASE FLOOD ELEVATION(S) NUMBER **B5. SUFFIX B6. FIRM INDEX DATE** EFFECTIVE/REVISED DATE B8. FLOOD ZONE(S) (Zone AO, use depth of flooding) 12131C0543-F 03-07-2000 03-07-2000 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. Community Determined FIS Profile Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: X NGVD 1929 NAVD 1988 Other (Describe): B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?

Yes
No Designation Date 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. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) C3. Elevations - Zones 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 C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion. Datum NGVD 29 Conversion/Comments Elevation reference mark used LOCAL Does the elevation reference mark used appear on the FIRM? | Yes | No o a) Top of bottom floor (including basement or enclosure) 7. 25 ft (m) o b) Top of next higher floor NA. NAft(m) o c) Bottom of lowest horizontal structural member (V zones only) <u>NA . NA</u> ft.(m) o d) Attached garage (top of slab) 5. 62 ft (m) o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 5. 47 ft.(m) o f) Lowest adjacent (finished) grade (LAG) 4.8ft(m) o g) Highest adjacent (finished) grade (HAG) 5. 7 ft.(m) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade NA o i) Total area of all permanent openings (flood vents) in C3.h NA sq. in. (sq. cm) 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 in Sections A, B, and C on this certificate represents my best efforts to interpret the data available. understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. LICENSE NUMBER 1592 CERTIFIER'S NAME FRANK G DANIEL TITLE REGISTERED LAND SURVEYOR COMPANY NAME GULF COAST SURVEYORS, LLC **ADDRESS** CITY STATE ZIP CODE 36008 EMERALD COAST PKWY, SUITE A101 DESTIN 32541 SIGNATURE DATE TELEPHONE 5-18-2006 850-654-4607 FEMA Form \$1-31, January 2003 See reverse side for continuation. Replaces all previous editions