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

OMB No. 1660-0008 Expiration Date: November 30, 2018

# **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 INFORMATI	ON FOR	R INSURANCE COMPANY USE		
A1. Building Owner's Name		cy Number:		
RON BURNS AND SHARON				
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg Box No.	. No.) or P.O. Route and Con	npany NAIC Number:		
1910 SMITHTON ROAD				
City	State ZIP	Code		
A3. Property Description (Lot and Block Numbers, Tax Parcel Num	bor Logal Description etc.)	45%		
WEST UNION DISTRICT, TAX MA		24		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Acce				
A5. Latitude/Longitude: Lat. 39º17'56.34" Long. 80°2	4'45.16" Horizontal Datum:	NAD 1927 ANAD 1983		
A6. Attach at least 2 photographs of the building if the Certificate is	being used to obtain flood insurance.			
A7. Building Diagram Number				
A8. For a building with a crawlspace or enclosure(s):				
a) Square footage of crawlspace or enclosure(s) 938	sq ft			
b) Number of permanent flood openings in the crawlspace or e	nclosure(s) within 1.0 foot above adja	acent grade / /		
c) Total net area of flood openings in A8.b 1, 441 sq in				
d) Engineered flood openings?				
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 area of flood openings in A9.b sq in				
d) Engineered flood openings?				
-,g				
SECTION B - FLOOD INSURANCE	RATE MAP (FIRM) INFORMATION	N		
B1. NFIP Community Name & Community Number B2.	County Name	B3. State		
DODDRIDGE GUNTY 540024	DODDRIDGE	121		
		122 0		
B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F	anel B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use Base		
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised	anel B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)		
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised S40024/0146 C OCT 4, 2011 OCT 4	B8. Flood Zone(s)  Date  A	B9. Base Flood Elevation(s) (Zone AO, use Base		
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM F Effective Revised B4. Map/Panel B6. FIRM F Effective Revised B4. Map/Panel B6. Map/Panel B6. Map/Panel B6. FIRM F Effective Revised B4. Map/Panel B6. Map	B8. Flood Zone(s) I Date  A base flood depth entered in Item B9:	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)		
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised S40024/0146 C OCT 4, 2011 OCT 4	B8. Flood Zone(s) I Date  A base flood depth entered in Item B9:	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)		
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM Index Date B7. FIRM F Effective Revised B4. Map/Panel B6. FIRM F Effective Revised B4. Map/Panel B6. FIRM F Effective Revised B4. Map/Panel B6. Map/Panel B6. Map/Panel B6. FIRM F Effective Revised B4. Map/Panel B6. Map	B8. Flood Zone(s)  Date  A  base flood depth entered in Item B9:  er/Source:	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)  785: 40		
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised S40024 0126 C 0074, 2011 00ct 1	B8. Flood Zone(s)    Date   A	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)  785: 40		
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised Service B10. Indicate the source of the Base Flood Elevation (BFE) data or FIS Profile FIRM Community Determined Off B11. Indicate elevation datum used for BFE in Item B9: NGVD	B8. Flood Zone(s)  Date  L, 2011  Dase flood depth entered in Item B9:  Der/Source:  Der/Source:	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)  785: 40		
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM F Effective Revised Service Country Country Country Revised B10. Indicate the source of the Base Flood Elevation (BFE) data or FIS Profile FIRM Community Determined Oth B11. Indicate elevation datum used for BFE in Item B9: NGVD B12. Is the building located in a Coastal Barrier Resources System	B8. Flood Zone(s)  Date  L, 2011  Dase flood depth entered in Item B9:  Der/Source:  Der/Source:	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)  785: 40		

# **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., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.		Policy Number:			
1910	SMITHTON	ROAD			
City	UNION	State	ZIP C		Company NAIC Number
WEST		1210		456	
	SECTION C - BUILDIN	IG ELEVATION INF	ORMATI	ON (SURVEY RI	
C1. Building elevation  *A new Elevation	ons are based on:	struction Drawings* when construction of t		ling Under Constru a is complete.	ction* Finished Construction
				-	AE, AR/A1-A30, AR/AH, AR/AO.
Complete Items	S C2.a-h below according to the ized: LLV COPRS NE	e building diagram s	pecified in	item A7. In Puert	o Rico only, enter meters.
	on datum used for the elevation		_	1.	
	D 1929 NAVD 1988				HEFDORK
	building elevations must be th			E.	Observations
a) Top of botto	m floor (including basement, c	ravilenaca or ancios	ure floor)	786.68	Check the measurement used.
	ext higher floor	rawispace, or criticos	ure noor,	789 3	
	e lowest horizontal structural n	nember (// Zones onl	(w)		
	rage (top of slab)	ichiber (v Zories on	iy)		
e) Lowest elev	ation of machinery or equipme pe of equipment and location is	nt servicing the build	ling	786.18	
	pe or equipment and location is cent (finished) grade next to be	•		784.7	7 Ffeet meters
g) Highest adja	acent (finished) grade next to b	uilding (HAG)		786. 6	5   feet   meters
	cent grade at lowest elevation		luding	786. 11	D If feet I meters
on dotal or ou	SECTION D - SURVE	VOD ENGINEED	OP APC	UITECT CEDTIEI	CATION
This certification is to				THE PROPERTY OF THE PERSON OF THE PERSON	law to certify elevation information.
I certify that the info	mation on this Certificate representation on this Certificate representation on the contract of the contract o	esents my best effort	ts to interp	ret the data availa	ble. I understand that any false
Were latitude and lo	ngitude in Section A provided	by a licensed land su	irveyor?	Yes No	Check here if attachments.
Certifier's Name		License Nun	nber		- TOTAL STATE OF THE STATE OF T
	STRICKLING	715	5		STRICK
Title	1-14:	7.5.			
Company Name	IONAL SUF	NEYOR			Places 4
	KLING SU	RIFYING			Place 5
Address			-		Here
130 E	ENGLINDS F I UNION, W	PUN ROA	D		Marian Co
City		State 4	56	ZIP Code	
12/45	T union, w	V 10/22/	49	32483-1	72
Signature Date Telephone 10/22/19 304 873-1592					
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	on, per C2(e), if applie	cable)		
SEE	ATTACHED I	DRAWING	^ ₹		
					*

# **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., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.		Policy Number:		
1910 SMITHTON ROAT				
City State	ZIP Code		Company NAIC Number	
MEST UNION WV	26456			
SECTION E – BUILDING ELEVATI FOR ZONE AO	ON INFORMATION (SUF IND ZONE A (WITHOUT		REQUIRED)	
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	fee	t meter	s above or below the HAG.	
b) Top of bottom floor (including basement, crawlspace, or enclosure) is		t meter	s above or below the LAG.	
E2. For Building Diagrams 6-9 with permanent flood opening	s provided in Section A Iter	ns 8 and/or	9 (see pages 1-2 of Instructions),	
the next higher floor (elevation C2.b in the diagrams) of the building is	[] fee	t meter	s above or below the HAG.	
E3. Attached garage (top of slab) is	[fee	t meter	s above or below the HAG.	
E4. Top of platform of machinery and/or equipment servicing the building is	[] fee	meter	s above or below the HAG.	
E5. Zone AO only: If no flood depth number is available, is th floodplain management ordinance?   Yes  No	e top of the bottom floor ele	vated in ac ficial must	cordance with the community's certify this information in Section G.	
SECTION F - PROPERTY OWNER (C	R OWNER'S REPRESENT	TATIVE) CE	RTIFICATION	
The property owner or owner's authorized representative who community-issued BFE) or Zone AO must sign here. The state	completes Sections A, B, a	nd E for Zo d E are cor	ne A (without a FEMA-issued or rect to the best of my knowledge.	
Property Owner or Owner's Authorized Representative's Nam	9			
Address	City	St	afe ZIP Code	
Signature	Date	Te	lephone	
Comments				
•				
•				
•				
•				
•				

## **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., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.		x No.	Policy Number:		
1910 SMITHTON	ROAD				
City	State ZIP Code		Company NAIC Number		
ILLEST UNION	14V 25456				
	ON G - COMMUNITY INFORMATION (OPTI	ONAL)			
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–G10. In Puerto Rico only, enter meters.					
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 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 or Zone AO.	on E for a building located in Zone A (withou	it a FEMA-	issued or community-issued BFE)		
G3. The following information (Items G4-	G10) is provided for community floodplain m	anagemer	nt purposes.		
G4. Permit Number	G5. Date Permit Issued		ate Certificate of empliance/Occupancy Issued		
G7. This permit has been issued for:	New Construction  Substantial Improver	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 t	he 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 loc	ration, per C2(e), if applicable)				
3,	called per on (e), it approaches				
			Check here if attachments.		

#### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

See Instructions for Item A6.

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., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. | Policy Number: | 1910 | SMITHTON ROAD | ZIP Code | Company NAIC Number | LIEST UNION | LIV | 26456

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.

FRONT VIEW 10/21/19

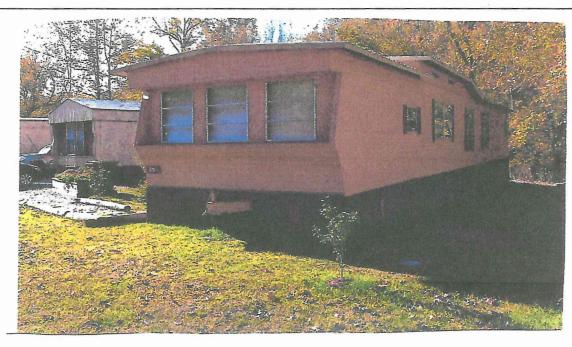


Photo One

Photo One Caption

EFT SIDE VIEW 10/21/19



= RONT

Photo Two

Photo Two Caption

### **BUILDING PHOTOGRAPHS**

## **ELEVATION CERTIFICATE**

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

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.

1910 SMITHTON ROAD

City State ZIP Code Company NAIC Number

1⊔EST UNION 12√ 26456

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 One

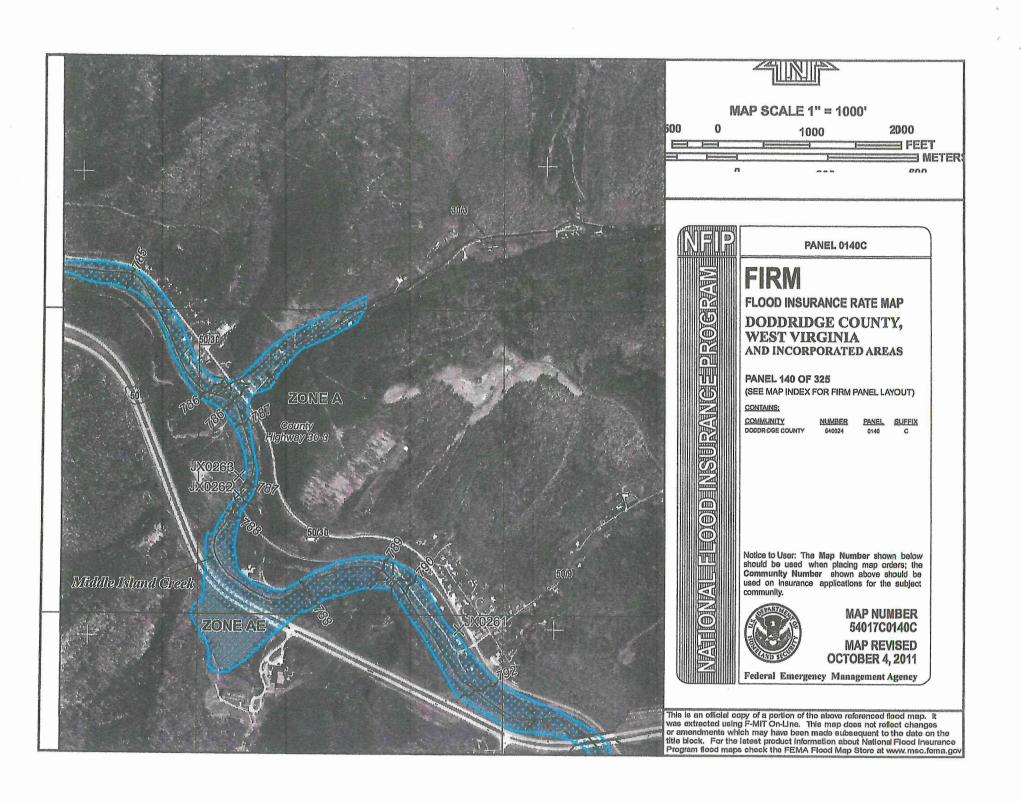
Photo One Caption

/EMT 10/21/19

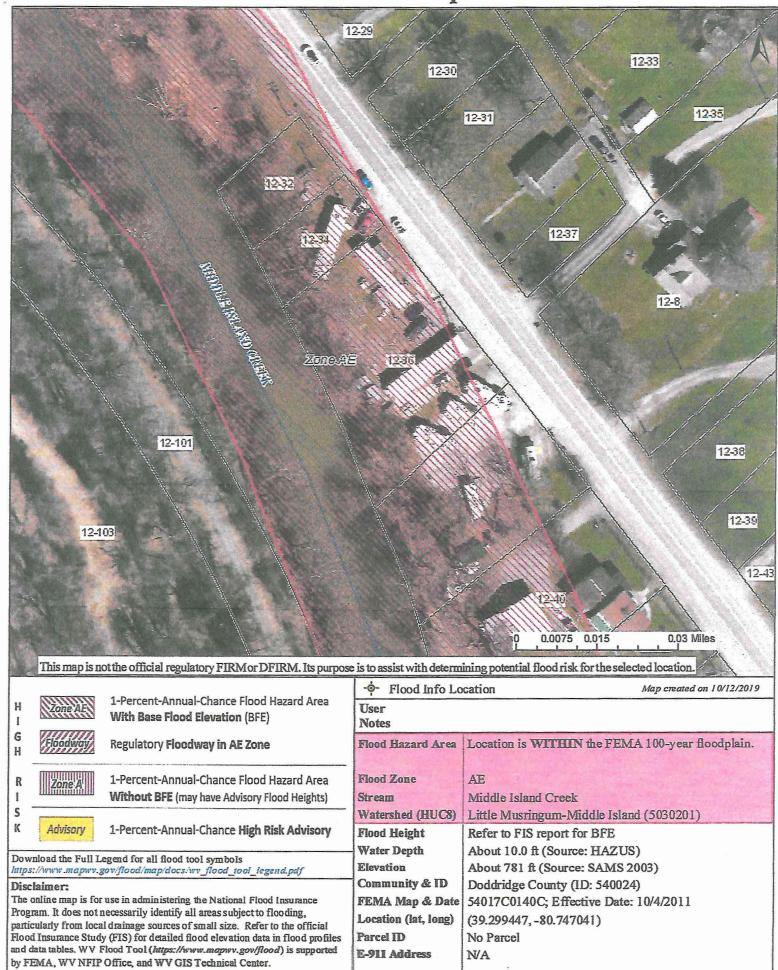


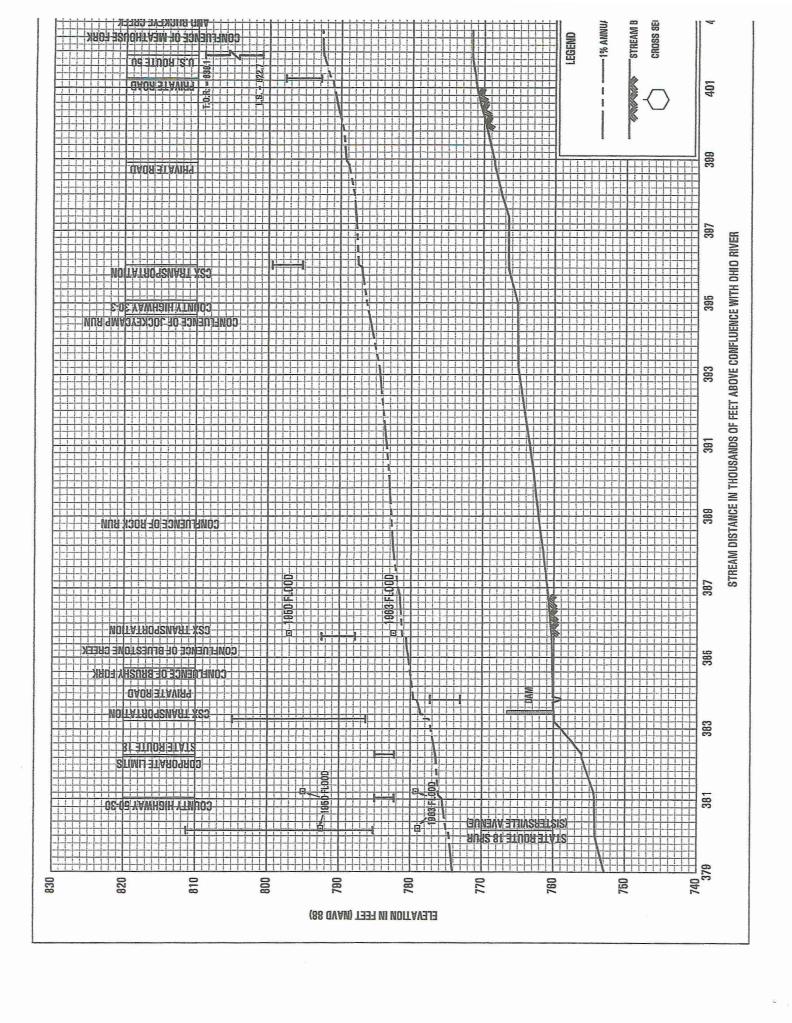
Photo Two

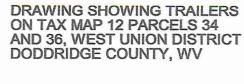
Photo Two Caption

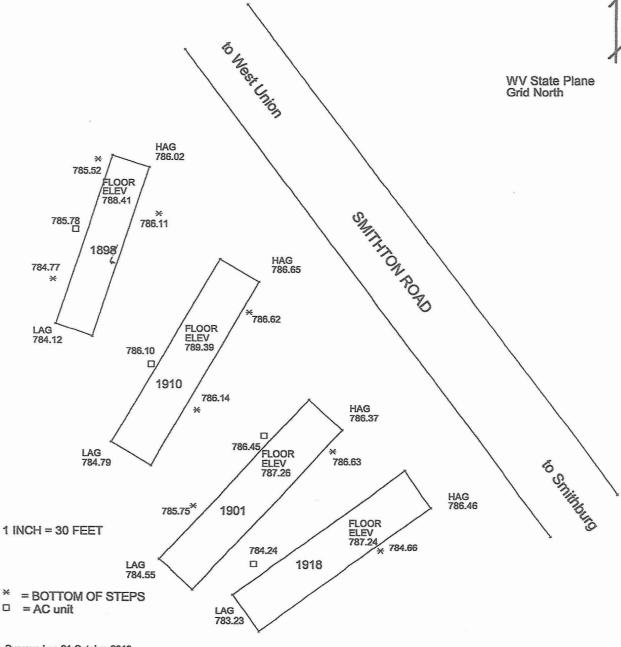


# WV Flood Map









Surveyed on 21 October 2019 by John Strickling, PS 715, of West Union, WV.

telong to B. Island. And the state of t w 3 ع 35 36 AVONDALE Creek BOOK 75. MOOR :