FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

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

SECTION: Assign the instructions on pages 1 + 7.				
BUILDING OWNER'S NAME	For Insurance Company Use:			
CHARLES & ROSIN HATTO	Policy Number			
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bidg. No.) OR P.O. ROUTE AND BOX NO.	Company NAIC Number			
CITY				
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Percel Number, Legal Description, etc.)	ZIP CODE 2 4986			
BUILDING USE (e.g., Residential, Non-residential Addition Accessors etc.) In C.				
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATIM				
(##"-##"-####" or ##.#####") NAD 1927 NAD 1983 SOURCE: GPS (Type): ##. 37-59-03 N 080-27-26 W USGS Qued Map	LOther			
	[maj Outes			
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME				
The state of the s	3. STATE			
D. HADANE SHEET	wv			
NUMBER BATE SEESTIVE BANEL BS. FLOOD	B9. BASE FLOOD ELEVATION(S)			
9-/8.9/	(Zone AO, use depth of flooding)			
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9	/87/			
- COMMUNICATION INC.				
The state of the s				
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area Designation Date:	(OPA)? Yes No			
	*			
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRE	D)			
of building digyations are based on: IXConstruction Description				
"A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number. S. (Select the building discomplete.)				
C2. Building Diagram Number (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 - Zonge 41.430 AE ALI A Control of the building provide a sketch or photograph.)				
C3: Elevations - Zones A1-A30, AE, AH, A (with BEE) VE V1-1/20, V (vite BEE) AF (A) A (B)				
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				
- Provided of this continuents align of Section G an emproprieta to decrease the				
The state of the s				
Elevation reference mark used Does the elevation reference mark used appear on the FIRM? Yes X No				
a) Top of bottom floor (including basement or enclosure) [
C) Rottom of lowest heisenstales				
b) Top of next higher floor c) Bottom of lowest horizontal structural member (V zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery end/or equipment				
□ d) Attached garage (top of slab) □ e) Lowest elevation of machinery and/or equipment □ d) Attached garage (top of slab) □ e) Lowest elevation of machinery and/or equipment				
servicing the building (Describe in a Comments area.)				
1) Lowest adjacent (finished) grade (I AC)				
O g) Highest adjacent (finished) grade (HAG) STATE OF (Em) 200 (HAG)				
- 11 140. Of particularity openings (1100d vents) within 1 ff phove affectations of the first tender of te	VIRGINITY VIRGINITY			
i) Total area of all permanent openings (flood vents) in C3.h sq. in. (sq. cm)	STATE OF VIRGINIA SURVEY OF STATE OF VIRGINIA SURVEY OF STATE OF S			
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION				
This certification is to be signed and sealed by a land support and the signed and sealed by a land support and the signed and sealed by a land support and the signed and sealed by a land support and the signed and sealed by a land support and the signed and sealed by a land support and the signed and sealed by a land support and the signed and sealed by a land support and the signed and sealed by a land support and the signed and sealed by a land support and the signed and the sig				
CERTIFIER'S NAME				
CNAFLES W SMITH UCENSE NUMBER				
PROPERSIONAL SURVEYOR COMPANY NAME				
ADDRESS	ZIP CODE			
SIGNATURE CONTROL OF C	24901			
10-9.03 304	-645-6040			
FEMA Form 81-31, January 2003 See reverse side for continuation.	Replaces all previous editions			

BUILDING STREET ADDRESS / Incharing And	Components		
BUILDING STREET ADDRESS (Including Apl.,	Unit Suite and/or files No. Co. D.C.	n Section A	For Insurance Company Use:
CITY	The biog. No., OR P.O.	KODIE AND BOX NO.	Policy Number
RENICK	STATE	ZIF CODE 24966	Company NAIC Number
SECTION D - SUI	RVEYOR, ENGINEER, OR ARCHI		TIMUED
Copy both sides of this Elevation Certificate	e for (1) community official, (2) insu	vance agen/company, and (3)	hullding over
- MAIL IN	D WALANDS R 15	774 99 /1000 -	r soliding owner.
TRMAZ NAIL IN	ROOT OF 8"WALNU	1103 (1976 /-	2000 ELEV.)
,		1008.77	
SECTION E - BUILDING ELEVATION For Zone AO and Zone A (without BFE), cor	INFORMATION (SURVEY NOT B	FALSED TO THE	Check here if attachments
E1. Building Diagram Number (Select see pages 6 and 7. If no diagram accurrence in the page of the bottom floor (including batch (check one) the highest adjacent grade. E3. For Building Diagrams 6-8 with openings and the page of the platform of machinery and (check one) the highest adjacent grade. E4. The top of the platform of machinery and (check one) the highest adjacent grade. E5. For Zone AO only: If no flood depth num floodplain management ordinance? SECTION F - PRO The property owner or owner's authorized of (without a FEMA-issued or community-issue) the best of my knowledge.	to c must be completed. It the building diagram most similar rately represents the building, proving the province of the building (Use natural grade, if available.) Is (see page 7), the next higher flooring the building (Use natural grade. Complete d/or equipment servicing the building (Use natural grade, if available.) Independent of the property of the bound of the province of	to the building for which this or de a sketch or photograph.) g is ft. (m) fn. (or elevated floor (elevation b) litems C3.h and C3.i on front or g is ft. (m) fn. (ottom floor elevated in accorda e local official must certify this	ad for use as supporting ertificate is being completed — cm) above or below of the building is f form. cm) above or below ance with the community's information in Section G.
PROPERTY OWNER'S OR OWNER'S AUTHOR ADDRESS	NZED REPRESENTATIVE'S NAME		
	CITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPHO	NE .
COMMENTS			1 No.
OF.		•	Check here if attachments
	CTION G - COMMUNITY INFORM		
engineer, or architect who is authorize elevation data in the Comments area elevation data in the Comments area C2. A community official completed Section Zone AO. G3. The following information (Items G4-C3-C4. PERMIT NUMBER. G5. DAT G6. DAT G6. Elevation of as-built lowest floor (including G8.	ten from other documentation that it zed by state or local law to certify ear below.) on E for a building located in Zone G9) is provided for community floor E PERMIT-ISSUED	has been signed and embosse evation information. (Indicate A (without a FEMA-Issued or opposes.) GB. DATE CERTIFICATE OF COURSE IN THE CERTIFICATE OF COURSE IN	d by a licensed surveyor, the source and date of the community-issued BFE) or
(iii zate AO) deput at licoding at t	the building site is:		ft. (m) Datum: ft. (m) Datum:
LOCAL OFFICIAL'S NAME	TITL	E	
COMMUNITY NAME	TEL	PHONE	
SIGNATURE	DAT	F	
COMMENTS			
i.			
EMA Form 81-31, January 2003			Check here if attachments
			Penlaces all annuts and the