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

OMB No. 1660-0008 Expiration Date: November 30, 2022

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 INFORMATION					FOR INSUR	ANCE COMPANY USE		
A1. Building Owner's Name Policy Number: Katelin Withrow					er:			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 586 Ronceverte Ave.					and	Company NA	AIC Number:	
City	State					ZIP Code		
Ronceverte				West Virg			24970	
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Dist. 14 Tax Map 9 Tax Parcel 227							
A4. Building Use (e.	g., Residen	tial, Non-Residential,	Addition,	Accessory, e	etc.) Reside	ential		
A5. Latitude/Longitu	de: Lat. 37	.746820	Long. <u>-8</u>	0.477011	Horizo	ontal Datu	m: NAD 1	927 X NAD 1983
A6. Attach at least 2	2 photograph	ns of the building if the	Certifica	ate is being u	sed to obtain	flood insu	rance.	
A7. Building Diagrar	n Number	8						
A8. For a building w	ith a crawls	pace or enclosure(s):						
a) Square foota	ige of crawls	space or enclosure(s)		1	200.00 sq ft			
b) Number of pe	ermanent flo	od openings in the cra	awlspace	e or enclosure	e(s) within 1.0	foot abov	e adjacent gra	de N/A
c) Total net area	c) Total net area of flood openings in A8.b N/A sq in							
d) Engineered t	flood openin	gs? ⊠Yes □ N	lo					
A9. For a building wi	th an attach	ed garage:						
a) Square foota	ge of attach	ed garage		N/A sq ft				
a) Square footage of attached garageN/A sq ft b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A								
c) Total net area	c) Total net area of flood openings in A9.b N/A sq in							
d) Engineered f	d) Engineered flood openings?							
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Community Name & Community Number B2. County Name B3. State					B3. State			
City of Ronceverte 540043				Greenbrier West Vi			West Virginia	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9.	Base Flood El (Zone AO, use	evation(s) e Base Flood Depth)
54025 C 0751	E	10-16-2012	10-16-2		×	N/A		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: X FIS Profile FIRM Community Determined Other/Source:								
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:								
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date: OPA								

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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 E 586 Ronceverte Ave.	ox No. Policy Number:					
City State ZIP Code	Company NAIC Number					
Ronceverte West Virginia 24970						
SECTION C - BUILDING ELEVATION INFORMATION (S	URVEY REQUIRED)					
C1. Building elevations are based on: Construction Drawings* Building Und	der Construction* X Finished Construction					
*A new Elevation Certificate will be required when construction of the building is cor						
Complete Items C2.a-h below according to the building diagram specified in Item A	C2. 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 C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.					
Benchmark Utilized: GPS OPUS Vertical Datum: NAVD 8	88					
Indicate elevation datum used for the elevations in items a) through h) below.						
☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source:						
Datum used for building elevations must be the same as that used for the BFE.	Check the measurement used.					
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	1737.5 X feet meters					
b) Top of the next higher floor	1746.9 X feet meters					
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A feet meters					
d) Attached garage (top of slab)	N/A feet meters					
e) Lowest elevation of machinery or equipment servicing the building	1746.9 🔀 feet 🦳 meters					
(Describe type of equipment and location in Comments) ———	1737.3 ⊠ feet meters					
f) Lowest adjacent (finished) grade next to building (LAG)	1743.1 🔀 feet 🦳 meters					
g) Highest adjacent (finished) grade next to building (HAG)	1745.1 X leet meters					
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	1737.8 X feet meters					
SECTION D – SURVEYOR, ENGINEER, OR ARCHITEC	T 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.						
Were latitude and longitude in Section A provided by a licensed land surveyor?	S □ No □ Check here if attachments.					
Certifier's Name License Number Philip L. Longenecker PS 1026						
Title	Section DVC					
Member	RENSC					
Company Name						
Wilkinson Surveying, LLC.	STATEDF					
Address 818 Grandview Dr.	STATEDF					
City State ZIP Co Dunbar West Virginia 25064	de Significant					
Signature Date Teleph 07-09-2020 (304) 7	one Ext. 68-5678					
Copy all pages of this Ejevation Certificate and a attachments for (1) community official, (2) insurance agent/company, and (3) building owner.						
Comments (including type of equipment and location, per C2(e), if applicable)						
C2(e) is a heat pump raised on a treated plat form.						

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSURANCE COMPANY USE		
	ding Street Address (including Apt., Unit, Suite, Ronceverte Ave.	Policy Number:				
City	nceverte	State West Virginia	ZIP Code 24970	Company NAIC Number		
	SECTION E – BUILDING FOR ZO	ELEVATION INFORMA		REQUIRED)		
com	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.	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).					
	Top of bottom floor (including basement, crawlspace, or enclosure) is	2	feet _ mete	rs above or below the HAG.		
	 Top of bottom floor (including basement, crawlspace, or enclosure) is 	-	feet _ mete	rs above or below the LAG.		
E2.	For Building Diagrams 6–9 with permanent floot the next higher floor (elevation C2.b in the diagrams) of the building is	od openings provided in s	Section A Items 8 and/or			
E3.	Attached garage (top of slab) is		feet mete	rs above or below the HAG.		
E4.	Top of platform of machinery and/or equipment servicing the building is		feet mete	rs above or below the HAG.		
E5.	Zone AO only: If no flood depth number is avail floodplain management ordinance? Yes			ccordance with the community's certify this information in Section G.		
	SECTION F - PROPERTY C	OWNER (OR OWNER'S	REPRESENTATIVE) C	ERTIFICATION		
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a 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.						
Pro	perty Owner or Owner's Authorized Representat	tive's Name				
Add	iress	City	Si	tate ZIP Code		
Sig	nature	Date	e Te	elephone		
Cor	mments					
				Check here if attachments.		

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Su 586 Ronceverte Ave.	No. Policy Number:				
City Ronceverte	State ZIP Code West Virginia 24970	Company NAIC Number			
	N G - COMMUNITY INFORMATION (OPTIC	DNAL)			
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 (without	a FEMA-issued or community-issued BFE)			
G3. The following information (Items G4-	G10) is provided for community floodplain ma	anagement purposes.			
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for:	New Construction Substantial Improvem	nent			
G8. Elevation of as-built lowest floor (including of the building:	basement)	feet meters Datum			
G9. BFE or (in Zone AO) depth of flooding at t	the 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 location, per C2(e), if applicable)					
		Check here if attachments.			

BUILDING PHOTOGRAPHS

OMB No. 1660-0008

ELEVATION CERTIFICATESee Instructions for Item A6. Expiration Date: November 30, 2022

IMPORTANT: In these spaces, o	FOR INSURANCE COMPANY USE		
Building Street Address (including 586 Ronceverte Ave.	g Apt., Unit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
Ronceverte	West Virginia	24970	

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.



Photo One

Photo One Caption front

Clear Photo One



Photo Two

Photo Two Caption rear

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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Expiration Date: November 30, 2022

	T .		
IMPORTANT: In these spaces, copy the cor	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, § 586 Ronceverte Ave.	Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
Ronceverte	West Virginia	24970	

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.

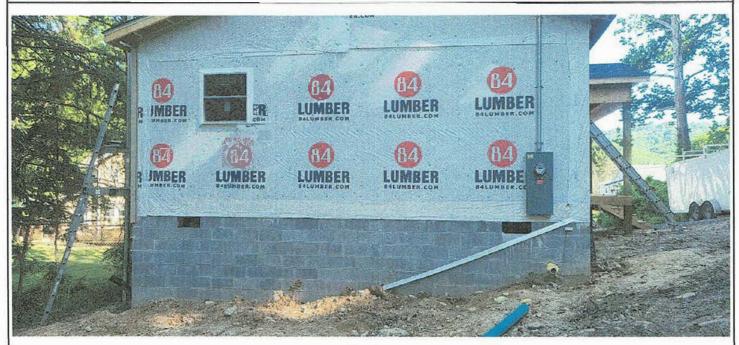


Photo Three

Photo Three Caption left

Clear Photo Three



Photo Four

Photo Four Caption right

Clear Photo Four