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 INFORMATION					FOR INSUR	ANCE COMPANY USE	
A1. Building Owner's Name				Policy Numb	per:		
Christina and Shawn Anderson							
A2. Building Street Address (in Box No. 93 Lynns Fork Rd.						AIC Number:	
City			State	7	ZIP Code		
Elkview			West Virg	jinia	25071		
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Dist. 1 Tax Map 18 Tax Parcel 33						
A4. Building Use (e.g., Resider	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential						
A5. Latitude/Longitude: Lat. 3	8.478234	Long8	1.399923	Horizontal	Datum: NAD 1	927 🗵 NAD 1983	
A6. Attach at least 2 photograp	hs of the building if the	Certifica	ate is being u	sed to obtain flood	l insurance.		
A7. Building Diagram Number	8						
A8. For a building with a crawls	space or enclosure(s):						
a) Square footage of craw	Ispace or enclosure(s)		1	200.00 sq ft			
b) Number of permanent fl	ood openings in the cra	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ade 9	
c) Total net area of flood o	penings in A8.b	1	152.00 sq in				
d) Engineered flood openi	ngs? 🛛 Yes 🗌 N	lo					
A9. For a building with an attac	A9. For a building with an attached garage:						
a) Square footage of attached garage N/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 of flood o	penings in A9.b		N/A sq	in			
d) Engineered flood opening	ngs?	10					
-, -ngment and aparmige.							
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Community Name & Community Number B2. County Name B3. State							
Kanawha Co. 540070 Kanawha West Virginia							
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	Elevation(s) e Base Flood Depth)	
54039 C 0285 E	02-06-2008	02-06-2		x			
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: FIS Profile FIRM Community Determined Other/Source: FPMS Report 1906-2414-1845							
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: CBRS DPA							
			.51				

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IMPO	RTANT: In these spaces, copy the corresponding information from Section	FOR INSURANCE COMPANY USE				
	ng Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route anns Fork Rd.	Policy Number:				
City State ZIP Code C Elkview West Virginia 25071			Company NAIC Number			
	SECTION C - BUILDING ELEVATION INFORMATION	N (SURVEY RE	EQUIRED)			
C1.	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 – 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 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)	6	529.10 X feet meters			
	b) Top of the next higher floor	6	i33.54 × 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 (Describe type of equipment and location in Comments)	6	533.54 X feet meters			
	f) Lowest adjacent (finished) grade next to building (LAG)	6	28.60 X feet meters			
	g) Highest adjacent (finished) grade next to building (HAG)	6	30.28 X feet meters			
	h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	6	529.10 X feet meters			
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.						
Were	e latitude and longitude in Section A provided by a licensed land surveyor?	Yes No	Check here if attachments.			
	fier's Name License Number p L. Longenecker PS 1026		A23255##.			
Title Mem	hor		LONGE LONGE			
	pany Name					
Wilki	nson Surveying, LLC.		No. 3026			
Addr 818	ess Grandview Dr.		TATEOF			
City		P Code	VIRGINIA S			
Dunk	- Van de la constant	5064	202250000000000			
Sign	02-17-2020 (3)	elephone 04) 768-5678	Ext.			
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, per C2(e), if applicable) C2(e) is an outside heat pump to be elevated on treated platform. A8 Flood Vents are Certified to Vent 250 square feet, the flood vent net openings are 128 square inches per vent.						

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IMPORTANT: In these spaces, copy the corresponding information from S	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. F 93 Lynns Fork Rd.		Policy Number:		
	IP Code 5071	Company NAIC Number		
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)				
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 b) Top of bottom floor (including basement,	feet _ mete	rs above or below the HAG.		
crawlspace, or enclosure) is				
E2. For Building Diagrams 6–9 with permanent flood openings provided in Se the next higher floor (elevation C2.b in the diagrams) of the building is	ection A Items 8 and/or			
E3. Attached garage (top of slab) is		rs above or below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is		rs above or below the HAG.		
E5. Zone AO only: If no flood depth number is available, is the top of the bottom floodplain management ordinance? Yes No Unknown.	om floor elevated in ac The local official must	ccordance with the community's certify this information in Section G.		
SECTION F - PROPERTY OWNER (OR OWNER'S R	EPRESENTATIVE) C	ERTIFICATION		
The property owner or owner's authorized representative who completes Sect community-issued BFE) or Zone AO must sign here. The statements in Section	tions A, B, and E for Zons A, B, and E are co	one A (without a FEMA-issued or rrect to the best of my knowledge.		
Property Owner or Owner's Authorized Representative's Name				
Address City	S	tate ZIP Code		
Signature Date	Te	elephone		
Comments				

ELEVATION CERTIFICATE

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MPORTANT: 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. 93 Lynns Fork Rd.				Policy Number:
City State ZIP Code Elkview West Virginia 25071				Company NAIC Number
SECTIO	ON G - COMMUNIT	TY INFORMATION (OPT	IONAL)	
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Comple	ter the community's flood ete the applicable item(s)	dplain mana and sign b	agement ordinance can complete pelow. Check the measurement
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 Sect or Zone AO.	ion E for a building	located in Zone A (withou	ut a FEMA-	-issued or community-issued BFE)
G3. The following information (Items G4-	-G10) is provided fo	or community floodplain n	manageme	nt purposes.
G4. Permit Number	G5. Date Permit	Issued		ate Certificate of ompliance/Occupancy Issued
G7. This permit has been issued for:	New Construction	n Substantial Improve	ement	
G8. Elevation of as-built lowest floor (includin of the building:	g basement)		feet	meters Datum
G9. BFE or (in Zone AO) depth of flooding at	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 lo	cation, per C2(e), i	f applicable)		
				Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 93 Lynns Fork Rd.			Policy Number:
City Elkview	State West Virginia	ZIP Code 25071	Company NAIC Number

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

Clear Photo One



Photo Two

Photo Two Caption

Clear Photo Two

BUILDING PHOTOGRAPHS

Continuation Page

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 93 Lynns Fork Rd.			Policy Number:
City	State Vicariais	ZIP Code	Company NAIC Number
Elkview	West Virginia	25071	

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

Clear Photo Four