# 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) insura  SECTION A - PROPERTY INFORMATION					FOR INSU	RANCE COMPANY USE
A1. Building Owner's Name Darin Harper					Policy Nur	
A2. Building Street Address No.	ess (including Apt., Unit, S	uite, and/o	or Bidg. No.)	or P.O. Route a	nd Company	NAIC Number:
503 Kelly Avenue					Company	rede ramber.
City Clendenin			State		ZIP Code	
	// at and Diagle Neurobau	<b>-</b> D	West V	irginia	25045	
A3. Property Description Parts of Lots 10 & 11, Kel	lly Addition to Clendenin (I	DB 2389, F	P 698 & DB	egal Description, 2873, P 232 & C	etc.) lendenin District TM 1	I1, P 111 & 111.1)
A4. Building Use (e.g., Re	esidential, Non-Residentia	al, Addition	, Accessory	etc.) Reside	ntiał	
A5. Latitude/Longitude:			1.364480W.		ntal Datum:   NAD	1927 🔀 NAD 1983
A6. Attach at least 2 phot	tographs of the building if	the Certific	ate is being	used to obtain fl	ood insurance.	<u>25</u>
A7. Building Diagram Nur			·			
A8. For a building with a	crawispace or enclosure(s	s):				
	crawlspace or enclosure(			1008.00 sq ft		
	ent flood apenings in the	_			oot above adjacent or	ahe 8
c) Total net area of flo	ood openings in A8.b	1	1024.00 sq	n	oot aborto dajaocini gi	ade o
d) Engineered flood of			-			
A9. For a building with an	attached garage:					
a) Square footage of	attached garage		N/A sq t	t		
	ent flood openings in the a	attached o	arage within	1.0 foot ahove a	diacent arada O	
	ood openings in A9.b		0.00 sc		ujacent grade U	
d) Engineered flood o			0.00	<b>,</b>		
	SECTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM) IN	IFORMATION	
81. NFIP Community Nam	e & Community Number		B2. County			B3. State
Town of Clendenin, WV / 5	40075		Kanawha			West Virginia
B4. Map/Panel B5. St	uffix B6. FIRM Index Date	Effe	M Panel ctive/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s)
Number		1/01	isea Date			Base Flood Depth)
54039C0301 E	02-06-2008	02-06-2	rised Date 1008	AE	627.9 NAVD88	e Base Flood Depth)
54039C0301 E	21	02-06-2	008			e Base Flood Depth)
EB10. Indicate the source o	21	02-06-2 n (BFE) da	008 ita or base fl	ood depth entere		e Base Flood Depth)
EB10. Indicate the source o	f the Base Flood Elevation	02-06-2 n (BFE) da	ta or base fl	ood depth entere	ed in Item B9:	e Base Flood Depth)
B10. Indicate the source o	of the Base Flood Elevation  RM	02-06-2 n (BFE) da rmined [	ata or base fl Other/Sou	ood depth entere	ed in Item B9:	
54039C0301 E  B10. Indicate the source o  ☑ FIS Profile ☐ FII	of the Base Flood Elevation  RM	02-06-2 n (BFE) da rmined [	its or base fi Other/Sou GVD 1929 stem (CBRS	ood depth entere	ed in Item B9:	
B10. Indicate the source o  ☐ FIS Profile ☐ FII  B11. Indicate elevation dat  B12. Is the building located	of the Base Flood Elevation  RM	02-06-2 In (BFE) date imined  B9: No	its or base fi Other/Sou GVD 1929 stem (CBRS	ood depth entere	ed in Item B9:	

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IMPORTANT: In these spaces, copy the corresponding	a laformation from	O-d-		NOVERIDER 30, 2022
Building Street Address (including Apt., Unit, Suite, and/	ig knormation from	Section A.		CE COMPANY USE
303 Kelly Avenue	or Blag. No.) or P.O.	Route and Box No.	Policy Number:	
Clandonia		ZIP Code 25045	Company NAIC	Number
SECTION C - BUILDING E	LEVATION INFORM	MATION (SURVEY R	EQUIRED)	
64 5 7 7		Building Under Constru		h-10 "
*A new Elevation Certificate will be required when		ildina is complete	CLIGHT X FINIS	hed Construction
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE) Complete Items C2.a–h below according to the bui Benchmark Utilized: Survey grade GPS on site	, VE, V1-V30, V (with Iding diagram specifi Vertical Datu	h BFE), AR, AR/A, AR/ ed in Item A7. In Puert um: NAVD88	/AE, AR/A1–A30, a to Rico only, enter	AR/AH, AR/AO. meters.
Indicate elevation datum used for the elevations in	items a) through h) b	elow.		
☐ NGVD 1929  ☐ NAVD 1988 ☐ Other	Source:			5-
Datum used for building elevations must be the sar	ne as that used for th	e BFE.		
a) Top of bottom floor (including basement, crawls	nace of enclosure fi	nor)		easurement used.
b) Top of the next higher floor	pace, or enclosure in		****	meters
_			630.5 🔀 feet	meters
<ul> <li>c) Bottom of the lowest horizontal structural memb</li> <li>d) Attached garage (top of slab)</li> </ul>	er (v ∠ones only)		N/A   feet	meters
		_	N/A [] feet	meters
Lowest elevation of machinery or equipment ser (Describe type of equipment and location in Con	nments)		630.5 X feet	☐ meters
<li>f) Lowest adjacent (finished) grade next to building</li>			615.0 X feet	meters
<li>g) Highest adjacent (finished) grade next to building</li>	g (HAG)		627.3 X feet	meters
<ul> <li>h) Lowest adjacent grade at lowest elevation of des structural support</li> </ul>	ck or stairs, including		612.9 X feet	meters
SECTION D - SURVEYOR	ENGINEER, OR A	RCHITECT CERTIFIC	CATION	
This certification is to be signed and sealed by a land su I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment ur				ation information. hat any false
Were latitude and longitude in Section A provided by a li	censed land surveyor	? ⊠Yes □No	Check here	if attachments.
Certifier's Name	License Number			
William R. Gunnoe, RPS Title	-801			31111 <sub>111</sub>
Registered Professional Surveyor			initian AM	R. GUIII
Company Name				ace o
Gunnoe Surveying & Mapping			EN NO	1801 TE
Address			STA	HEIUF TO E
P.O. Box 1172			0, 7	erev 53
City	State	ZIP Code	IL SION	CURVIN
Clendenin	West Virginia	25045	"min	Hummer.
Signature William & Sunnac	Date	Telephone (304) 548-5324	Ext.	
Copy all pages of this Elevation Certificate and all attachme			rent/company and	(3) huilding owner
Comments (including type of equipment and location, per	C2(e) if annicable)	, (_,	,varipeny, and	(c) building owner.
Item A8b - value shown assumes standard 8" X 16" vents	having 128 square is	nches of vent space. T	otal annroved ven	t snace must
equal or exceed 1008 square inches as shown, with vents the structure. Subject is a proposed frame dwelling over a level. New home has been set in accordance with the height	s being installed with	n one foot of ground si	urface and evenly	spaced around
EMA Form 086-0-33 (12/19) Renli				
Repli	aces all previous editi	ions.		Form Page 2 of 6

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IMF	PORTANT: in these spaces, copy the corre	sponding information fro	m Section A	Expiration Date: November 30, 2022
BIT	ilding Street Address (including Apt., Unit, Sui	ite, and/or Bldg. No.) or P.(	O. Route and Box No.	FOR INSURANCE COMPANY USE Policy Number:
50.	3 Kelly Avenue			7 Siloy Namber.
City	y endenin	State	ZIP Code	Company NAIC Number
Cie		West Virginia	25045	
	FUR	NG ELEVATION INFORM ZONE AO AND ZONE A	(WITHOUT BFE)	
	r Zones AO and A (without BFE), complete Ite nplete Sections A, B,and C. For Items E1-E4, er meters.	ms E1–E5. If the Certificat , use natural grade, if avail	e is intended to support a able. Check the measure	LOMA or LOMR-F request, ment used. In Puerto Rico only,
E1.	Provide elevation information for the followin the highest adjacent grade (HAG) and the loa) Top of bottom floor (including basement,	ng and check the appropria west adjacent grade (LAG	te boxes to show whethe	r the elevation is above or below
	crawlspace, or enclosure) is b) Top of bottom floor (including basement,	-	feet  meter	s above or below the HAG.
	crawispace, or enclosure) is		feet meter	
E2.	For Building Diagrams 6–9 with permanent fi the next higher floor (elevation C2.b in the diagrams) of the building is	lood openings provided in	Section A Items 8 and/or	9 (see pages 1-2 of Instructions),
E3.	Attached garage (top of slab) is	-	feet	
E4.	Top of platform of machinery and/or equipme servicing the building is	ent		
<b>E</b> 5.	Zone AO only: If no flood depth number is as	vailable, is the top of the bo		
		s   NO   Onknown.	The local official must o	ertify this information in Section G.
_	SECTION F - PROPERTY			
	property owner or owner's authorized representation of the property of the property of the property owner's authorized representation of the property of the propert	Ac. The statements in Sec.	ctions A, B, and E for Zor ions A, B, and E are com	ne A (without a FEMA-issued or ect to the best of my knowledge.
Prop	perty Owner or Owner's Authorized Represent	tative's Name		
Add	ress	City	Sta	te ZIP Code
Sign	nature	Date	Tele	ephone
Соп	nments			
				- 1
				1
				☐ Check here if attachments.
EMA	\ Form 086-0-33 (12/19)	Replaces all previous e	ditions.	Form Page 3 of 6

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INPORTANT: In these spaces seem the	Expiration Date. November 30, 2022
IMPORTANT: In these spaces, copy the corresponding information from Section A.  Building Street Address (including Ant Attail Publication 1)	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 503 Kelly Avenue	Policy Number:
City State ZIP Code Clendenin West Virginia 25045	Company NAIC Number
Avest Auduma 5042	
SECTION G - COMMUNITY INFORMATION (OPTIONAL)	
The local official who is authorized by law or ordinance to administer the community's floodplain mar Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign 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 are engineer, or architect who is authorized by law to certify elevation information. (Indicate the data in the Comments area below.)  G2. A community official completed Section E for a building located in Zone A (without a FEMA or Zone AO.	d sealed by a licensed surveyor, a source and date of the elevation
G3. The following information (Items G4–G10) is provided for community floodplain management	ent purposes.
G4. Permit Number G5. Date Permit Issued G6. D	ate Certificate of ompliance/Occupancy Issued
G7. This permit has been issued for: New Construction Substantial Improvement  G8. Elevation of as-built lowest floor (including basement) of the building:	□ meters
	meters Datum
G9. BFE or (in Zone AO) depth of flooding at the building site:	meters Datum
G10. Community's design flood elevation:	meters Datum
Local Official's Name Title	
Community Name Telephone	
Signature Date	
Comments (including type of equipment and location, per C2(e), if applicable)	
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#### **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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corresponding information	from Section A.	FOR INSURANCE COMPANY US
uiii, buite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
State	7IP Code	Community
West Virginia	25045	Company NAIC Number
tographe must show the feet	if Alea and Real Mem. 9	nd, if required, "Right Side View" and
Photo O	ne	
90-11-A		
HTIQIO One		Clear Photo One
		Order I Hoto Origi
Photo Tv	vo	
Photo Two		
		Clear Photo Two
Donlogge all proview	o aditions	Form Page 5 of 6
	State West Virginia  Datain NFIP flood insurance, pgraphs with date taken; "Fror htographs must show the founitting more photographs than  Photo Co	West Virginia 25045  Detain NFIP flood insurance, affix at least 2 building pagraphs with date taken; "Front View" and "Rear View"; and tographs must show the foundation with representative nitting more photographs than will fit on this page, use the Photo One  Photo One  Photo Two

# **BUILDING PHOTOGRAPHS**

Continuation Page

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IMPORTANT: In these second	Continuation Page	Expiration Date: November 30, 202
Building Street Address (including And	the corresponding Information from Section	A. FOR INSURANCE COMPANY US
OS Kelly Avenue	., Unit, Suite, and/or Bldg, No.) or P.O. Route a	nd Box No. Policy Number:
City Clendenin	State ZIP Cod	6 Company NAIC Number
ordinatin'i	West Virginia 25045	
If submitting more photographs than with: date taken; "Front View" and photographs must show the foundation	will fit on the preceding page, affix the addit "Rear View"; and, if required, "Right Side on with representative examples of the flood open	onal photographs below. Identify all photographs View" and "Left Side View." When applicable, anings or vents, as indicated in Section A8.
	Photo Three	
	Photo Inree	
noto Three Caption	Photo Three	
		Clear Photo Three
	Photo Four	
oto Four Caption	Photo Four	
AA Form 086-0-33 (12/19)	Replaces all previous editions.	Clear Photo Four
··· (16/10)	methaces all previous editions.	Form Page 6 of 6