#### 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.

		CTION A - PROPERT	Y INFO	RMATION			RANCE COMPANY USE
A1. Building Owner's Name						Policy Number:	
Dreama Harper							
<ul> <li>A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.</li> <li>113 Swans Lane</li> </ul>					Company	Company NAIC Number:	
City St. Albans	City State ZIF				ZIP Code		
A3. Property Des	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)						
Lots 76 & 77 Marlaing Addition, TM 3E, Parcel 36							
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential							
A5. Latitude/Long	itude: Lat. 3	38.39810*	Long,	31.85394°	Horizonta	al Datum: NAD	1927 X NAD 1983
A6. Attach at leas	t 2 photograp	ohs of the building if th	e Certifi	cate is being			
A7. Building Diagr							
A8. For a building	with a crawle	space or enclosure(s):					
a) Square foo	tage of craw	Ispace or enclosure(s	)		910 sq ft		
b) Number of	permanent fl	ood openings in the c	awispac	e or enclosur	e(s) within 1.0 foo	t above adjacent gr	ade N/A
c) Total net ar	ea of flood o	penings in A8.b	N/A	sqi	า		
d) Engineered	l flood openii	ngs? ☐ Yes ⊠ l	No				
A9. For a building	vith an attacl	ned garage:					
a) Square foot	age of attach	ned garage		N/A sq f	t		•
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 openings in A9.b N/A sq in							
d) Engineered			do.		111		
-,		ac. [] (65 [])	••				
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Community Name & Community Number				B2. County	B2. County Name		B3. State
Kanawha County 540070			Kanawha			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 E (Zone AO, use	levation(s) Base Flood Depth)
54039C0213	E	02-06-08	02-06-	08	AE	586.7	
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: N/A							
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source: N/A							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?   Yes   No							
Designation Date: N/A CBRS OPA							
	·					***************************************	

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					FOR INSURANCE COMPANY USE		
				Policy Number:			
City	en com de la companya del companya del companya de la companya de				Company NAIC Number		
	ST. ALBANS	WV 25177	and a	1			
	SECTION C - BUILD	DING ELEVATION INFORMATI	ON (SURVEY RE	EQUIRED)			
C1.			ing Under Constru	iction* X Finis	hed Construction		
	*A new Elevation Certificate will be required			H .i			
C2.	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: HX2130  Vertical Datum: NAVD1988						
	Indicate elevation datum used for the eleva	itions in items a) through h) below	J				
	☐ NGVD 1929 ⊠ NAVD 1988 ☐		N/A				
	Datum used for building elevations must be	the same as that used for the Bl	E.				
					easurement used.		
	a) Top of bottom floor (including basement	t, crawispace, or enclosure floor)		585.4 × feet	meters		
	b) Top of the next higher floor	•		589.3 × feet	meters		
	c) Bottom of the lowest horizontal structura	al member (V Zones only)		n/a feet	meters		
	d) Attached garage (top of slab)			n/a feet	meters		
	e) Lowest elevation of machinery or equip (Describe type of equipment and location	ment servicing the building on in Comments)		589.3 ⋉ feet	meters		
	f) Lowest adjacent (finished) grade next to	building (LAG)		585.4 × feet	meters meters		
	g) Highest adjacent (finished) grade next t			585.4 × feet	meters		
	h) Lowest adjacent grade at lowest elevati structural support			585.3 × feet	meters		
*****		VEYOR, ENGINEER, OR ARC	HITECT CERTIF	ICATION	-		
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.							
We	re latitude and longitude in Section A provid	ed by a licensed land surveyor?	⊠Yes □ No	Check her	CALHOUA CALHOUA CALHOUA CALHOUA CATGE CATGE		
Cer	tifier's Name	License Number			All House		
Jim	my D Galhoun	• PE 4782		- SHILL C	CISTED		
Title				Will Committee of the C	247.89 m		
	npany Name				STATE OF		
	houn Engineering & Surveying				TOT VIRGINIA		
	lress Sherwood Circle			THE STATE OF THE S	NAL ENGLISH		
City		State	ZIP Code	•			
	ricane	West Virginia	25526				
	nature Caelan	Date 09-10-19	Telephone 304-757-4999	Ext.			
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.							
	nments (including type of equipment and lo	cation, per C2(e), if applicable)		2			
1							

#### **ELEVATION CERTIFICATE**

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

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Suite, and/o	te and Box No.	Policy Number:					
113 SWANS LANE							
Old,		Code	Company NAIC Number				
ST. ALBANS WV	25177						
SECTION E – BUILDING ELE FOR ZONE	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).							
<ul> <li>Top of bottom floor (including basement, crawlspace, or enclosure) is</li> </ul>	N/A	☐ feet ☐ meter	s 🗌 above or 🔲 below the HAG.				
<ul> <li>Top of bottom floor (including basement, crawlspace, or enclosure) is</li> </ul>	e <b>N/A</b>	☐ feet ☐ meter	rs 🔲 above or 🔲 below the LAG.				
E2. For Building Diagrams 6-9 with permanent flood op	enings provided in Section	on A Items 8 and/or	9 (see pages 1-2 of Instructions),				
the next higher floor (elevation C2.b in the diagrams) of the building is	N/A	☐ feet ☐ meter	s above or below the HAG.				
E3. Attached garage (top of slab) is	N/A	feet meter	rs				
E4. Top of platform of machinery and/or equipment servicing the building is	N/A	☐ feet ☐ mete					
E5. Zone AO only: If no flood depth number is available floodplain management ordinance?   Yes	, is the top of the bottom No Unknown. The	floor elevated in ac e local official must	cordance with the community's certify this information in Section G.				
SECTION F - PROPERTY OWN	ER (OR OWNER'S REP	RESENTATIVE) C	ERTIFICATION				
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. Th	Castion	n A P and E for 7	one A (without a FEMA-issued or				
Property Owner or Owner's Authorized Representative's							
N/A			:				
Address	City	S	tate ZIP Code				
N/A							
Signature	Date	, 10	elephone				
N/A							
Comments							
N/A							
			Check here if attachments.				

## **ELEVATION CERTIFICATE**

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IMPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSU	IRANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.				Policy Nun	The state of the s	
113 SWANS LANE						
1 -	State	ZIP Code		Company i	NAIC Number	
ST. ALBANS	WV	25177				
		INFORMATION (OP				
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, er	i Commone. Commen	r the community's floo e the applicable item(s	dplain mar s) and sign	nagement or below. Che	dinance can complete ck the measurement	
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 Sect or Zone AO.	G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.					
G3. The following information (Items G4–G10) is provided for community floodplain management purposes.						
G4. Permit Number	G5. Date Permit Is:	sued	G6. D	ate Certifica	te of	
N/A	N/A	·	N/A	ompliance/C	Occupancy Issued	
G7. This permit has been issued for:	] New Construction [	☐ Substantial Improve	ement			
G8. Elevation of as-built lowest floor (including of the building:	) basement)	N/A	☐ feet	meters	Datum N/A	
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	N/A	feet	meters	Datum N/A	
G10. Community's design flood elevation:	-	N/A	feet	meters	Datum N/A	
Local Official's Name		Title				
N/A		***************************************				
Community Name N/A		Telephone				
Signature		Date				
N/A		Date				
Comments (including type of equipment and loc	ation per C2(a) if an	nlianhla)				
oommonta (molading type of equipment and loc	ation, per Oz(e), ii ap	plicable)				
N/A						
				☐ Che	ck here if attachments.	

### **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No.

113 SWANS LANE

City

State

7IP Code

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 Front View of Lot Looking NE

**ELEVATION CERTIFICATE** 

Clear Photo One



Photo Two

Photo Two Caption Rear View Looking SW

Clear Photo Two

#### **BUILDING PHOTOGRAPHS**

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.

113 SWANS LANE

City

State

ZIP Code

Company NAIC Number:

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 Right View Looking NW

**ELEVATION CERTIFICATE** 

Clear Photo Three



Photo Four

Photo Four Caption Left View Looking SE

Clear Photo Four Form Page 6 of 6