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

DMB 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.

	SE	CTION A - PROPER	TY INFORMATION		The second secon	IPANCE COMPANY LICE	
A1. Building Own	ner's Name	The state of the s	FOR INSURANCE COMPANY USE Policy Number:				
Kyle Handy							
A2. Building Stre Box No. 1656 Glen Ray	et Address (i	Company	Company NAIC Number:				
City Alderson West Virginia						ZIP Code 24910	
A3. Property Des Dist. 7 Tax Map 1	cription (Lot Tax Parcel 2	and Block Numbers, 262	Tax Parcel Number, I	egal Description,	etc.)		
A4. Building Use	(e.g., Reside	ential, Non-Residentia	I, Addition, Accesson	, etc.) Reside	ntial		
A5. Latitude/Long			Long80.673212		ntal Datum: NAD	1007 El NAD 1000	
A6. Attach at leas	st 2 photogra	phs of the building if t		used to obtain fl	and incurence	1927 X NAD 1983	
A7. Building Diag	ram Number	8	The Continuate is being	used to obtain it	ood insurance.		
		space or enclosure(s)):				
		vispace or enclosure(s		1008.00 sq ft	**		
		lood openings in the o			not aboue adiagons		
c) Total net a	rea of flood o	openings in A8.b	1152.00 sq		ou above adjacent gr	ade 9	
d) Engineere			No Sq	""			
A9. For a building			140				
a) Square foo			N/A sq				
		lood openings in the a	ttached garage withir	1.0 foot above a	djacent grade N/A		
c) Total net ar	ea of flood o	penings in A9.b	N/A s	q in			
d) Engineered	I flood openir	ngs?	No				
	SI	FCTION B - FLOOD	INCURANCE DATE	- 24 A D (DIDON			
B1. NFIP Commun	ity Name & (Community Number			IFORMATION		
Summers County 8	- Trumber	B2. County Summers	Name		B3. State West Virginia		
B4. Map/Panel Number 54089 C 0160	B5. Suffix	B6. FIRM Index Date 02-03-2010	B7. FIRM Panel Effective/ Revised Date 02-03-2010	B8. Flood Zone(s)		levation(s) e Base Flood Depth)	
			02 00 20 10	AE	1538.35		
B10. Indicate the s	ource of the	Base Flood Elevation	(BFE) data or base f	ood depth entere	d in Item RO		
	FIRM	Community Deter	mined Other/Soi	ırce:	d in item by.		
B11. Indicate eleva	ation datum u	used for BFE in Item E	39: NGVD 1929		Other/Source:		
B12. Is the building	g located in a	Coastal Barrier Resc	ources System (CDD)	() area or Other	00 D	PA)? ☐ Yes ⊠ No	
Designation [Date:	the state of the s	CBRS OPA) area or Otherw	ise Protected Area (C)PA)? ☐ Yes ☒ No	
	A-section of the section of the sect						
EMA Form 086-0-33	(12/19)		enlaces all province	alis! a —			
		L.	eplaces all previous	editions.		Form Page 1 of 6	

WB No. 1660-0008

Expiration Date: November 30, 2022 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 Box No. Policy Number: 1656 Glen Ray City State ZIP Code Company NAIC Number Alderson West Virginia 24910 SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: Construction Drawings* ☐ Building Under Construction* X 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) 1535.7 X feet meters b) Top of the next higher floor 1542.2 X feet meters Bottom of the lowest horizontal structural member (V Zones only) N/A feet meters 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) 1542.2 |X | feet meters Lowest adjacent (finished) grade next to building (LAG) 1535.5 X feet meters g) Highest adjacent (finished) grade next to building (HAG) 1537.5 X feet meters h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 1535.7 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 latitude and longitude in Section A provided by a licensed land surveyor?

区 Yes □ No Check here if attachments. Certifier's Name License Number Philip L. Longenecker PS 1026 Title Member Company Name Wilkinson Surveying, LLC. Address 818 Grandview Dr. City State ZIP Code Dunbar West Virginia 25064 Signature Date Telephone Ext. 10-23-2020 (304) 768-5678 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 external heat pump on a treated platform. Freedom Flood vents are used and are rated to vent 250 square feet per vent for a total vented area of 2250 square feet.

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IMPORTANT: In these spaces, copy the c	FOR INSURA	NCE COMPANY USE		
Building Street Address (including Apt., Uni	Policy Numbe			
1656 Glen Ray				
City Alderson	State West Virginia	ZIP Code 24910	Company NAI	C Number
SECTION E - BUI	LDING ELEVATION INFOR	RMATION (SURVEY NO	OT REQUIRED)	
For Zones AO and A (without BFE), complete complete Sections A, B, and C. For Items E1 enter meters. E1. Provide elevation information for the following highest adjacent grade (HAC) and the highest grade (HAC) and the highe	te Items E1–E5. If the Certific I–E4, use natural grade, if ava	ate is intended to suppo- ailable. Check the measu	urement used. In P	uerto Rico only,
the highest adjacent grade (HAG) and to a) Top of bottom floor (including basen crawlspace, or enclosure) is	ine lowest adjacent grade (LA	G).		r Delow the HAG.
 b) Top of bottom floor (including basen crawlspace, or enclosure) is 	nent,	feet me		r Delow the LAG.
E2. For Building Diagrams 6–9 with permanthe the next higher floor (elevation C2.b in the diagrams) of the building is	nent flood openings provided i	n Section A Items 8 and		-2 of Instructions),
E3. Attached garage (top of slab) is		feet me	ters above o	r below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is				r below the HAG.
E5. Zone AO only: If no flood depth number floodplain management ordinance?	is available, is the top of the Yes \[\] No \[\] Unknow	bottom floor elevated in n. The local official mus	accordance with the structure of the str	ne community's nation in Section G.
SECTION F - PROPI	ERTY OWNER (OR OWNER	S REPRESENTATIVE)	CERTIFICATION	
The property owner or owner's authorized recommunity-issued BFE) or Zone AO must si Property Owner or Owner's Authorized Representations Address	girnere. The statements in Se	ections A, B, and E are o	State	ZIP Code
Signature	Da	ate	Telephone	
Comments				
			Check I	nere if attachments.
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MPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., U 1656 Glen Ray	ox No. Policy Number:		
City Alderson	State West Virg	ZIP Code ginia 24910	Company NAIC Number
			TIONALY
		NITY INFORMATION (OP	
Sections A, B, C (or E), and G of this Electrons and Items G8–G10. In Puerto Rico on	vation Certificate. Com ly, enter meters.	nplete the applicable item(odplain management ordinance can complete s) and sign below. Check the measurement n signed and sealed by a licensed surveyor,
engineer, or architect who is au data in the Comments area bel	thorized by law to cert ow.)	tify elevation information. (Indicate the source and date of the elevation
or Zone AO.			out a FEMA-issued or community-issued BFE)
33. The following information (Item	s G4–G10) is provided	d for community floodplain	management purposes.
G4. Permit Number	G5. Date Pern	nit Issued	G6. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	☐ New Construct	tion Substantial Impro	vement
G8. Elevation of as-built lowest floor (income of the building:	cluding basement)		feet meters Datum
G9. BFE or (in Zone AO) depth of flood	ng 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 location, per C2(e)), if applicable)	
			Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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Policy Number:

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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.

FOR INSURANCE COMPANY USE

1656 Glen Ray

ZIP Code

Company NAIC Number

City Alderson

State West Virginia

24910

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

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Clear Photo Two

Replaces all previous editions.

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BUILDING PHOTOGRAPHS

Continuation Page

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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.

1656 Glen Ray

City

Alderson

State

Vest Virginia

State TIP Code

West Virginia

State TIP 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 left

Clear Photo Three



Photo Four

Photo Four Caption right

Clear Photo Four

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