

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------|
| A1. Building Owner's Name CHARLES S. CUTRIGHT /FORMERLY WILLIAM E. McKNIGHT | | For Insurance Company Use: Policy Number |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 27 RITCHIE STREET City BUCKHANNON State WV ZIP Code 26201 | | Company NAIC Number |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TM 11 PARCEL 280 | | |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u> | | |
| A5. Latitude/Longitude: Lat. <u>38-59-03</u> Long. <u>80-13-02</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983 | | |
| A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. | | |
| A7. Building Diagram Number <u>6</u> | | |
| A8. For a building with a crawlspace or enclosure(s): | | A9. For a building with an attached garage: |
| a) Square footage of crawlspace or enclosure(s) <u>600</u> sq ft | | a) Square footage of attached garage _____ sq ft |
| b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u> | | b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____ |
| c) Total net area of flood openings in A8.b <u>0</u> sq in | | c) Total net area of flood openings in A9.b _____ sq in |
| d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No |

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

| | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------------------------|---------------------------------------|-------------------------|-----------------------------------------------------------------------|
| B1. NFIP Community Name & Community Number 540199 0127 | | B2. County Name UPSHUR | | B3. State WV | |
| B4. Map/Panel Number 54097C 0127 | B5. Suffix D | B6. FIRM Index Date 09/29/2010 | B7. FIRM Panel Effective/Revised Date | B8. Flood Zone(s) AE | B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 1417.5 |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____ | | | | | |
| B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____ | | | | | |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA | | | | | |

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

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. Use the same datum as the BFE.
Benchmark Utilized RM 1 Vertical Datum 1432.48
Conversion/Comments _____


Check the measurement used.

| | | |
|----------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------------------------------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) | <u>1416.3</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| b) Top of the next higher floor | <u>1419.5</u> | <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| c) Bottom of the lowest horizontal structural member (V Zones only) | _____ | <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| d) Attached garage (top of slab) | _____ | <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) | _____ | <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| f) Lowest adjacent (finished) grade next to building (LAG) | <u>1415.6</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| g) Highest adjacent (finished) grade next to building (HAG) | <u>1416.3</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support | <u>1416.2</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |

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.

Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

| | | | |
|-----------------------------------------------------------------------------------------------|--------------------------------|------------------------|----------------|
| Certifier's Name DALE P. BENNETT | | License Number 954 | |
| Title OWNER | Company Name BENNETT SURVEYING | | |
| Address 11 GREEN STREET | City BUCKHANNON | State WV | ZIP Code 26201 |
| Signature  | Date FEB.. 13, 2012 | Telephone 304-472-0817 | |

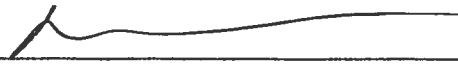


| | |
|------------------------------------------------------------------------------------------------------------------------|----------------------------|
| IMPORTANT: In these spaces, copy the corresponding information from Section A. | For Insurance Company Use: |
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 27 RUTCHIE STREET | Policy Number |
| City BUCKHANON State WV ZIP Code 26201 | Company NAIC Number |

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments

Signature  Date 02/13/12

Check here if attachments

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 0._____ feet meters above or below the HAG.
b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____.0 feet meters above or below the LAG.
- E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.
- E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

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.*

Property Owner's or Owner's Authorized Representative's Name _____

| | | | |
|-----------------|------------|-----------------|----------------|
| Address _____ | City _____ | State _____ | ZIP Code _____ |
| Signature _____ | Date _____ | Telephone _____ | |
| Comments _____ | | | |

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

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 and G9.

- 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 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-G9) is provided for community floodplain management 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 Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters (PR) Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____
- G10. Community's design flood elevation _____ feet meters (PR) Datum _____

| | |
|-----------------------------|-----------------|
| Local Official's Name _____ | Title _____ |
| Community Name _____ | Telephone _____ |
| Signature _____ | Date _____ |
| Comments _____ | |



MAP SCALE 1" = 500'



PANEL 0127D

FIRM FLOOD INSURANCE RATE MAP

UPSHUR COUNTY,
WEST VIRGINIA
AND INCORPORATED AREAS
PANEL 127 OF 375
(SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS:

| | | | |
|---------------------|--------|-------|--------|
| COMMUNITY | NUMBER | PANEL | SUFFIX |
| BUCKHANNON, CITY OF | 540189 | 0127 | D |
| UPSHUR COUNTY | 540186 | 0127 | D |

Notice to User: The Map Number shown below should be used when placing map orders; the Community Number shown above should be used on insurance applications for the subject community.

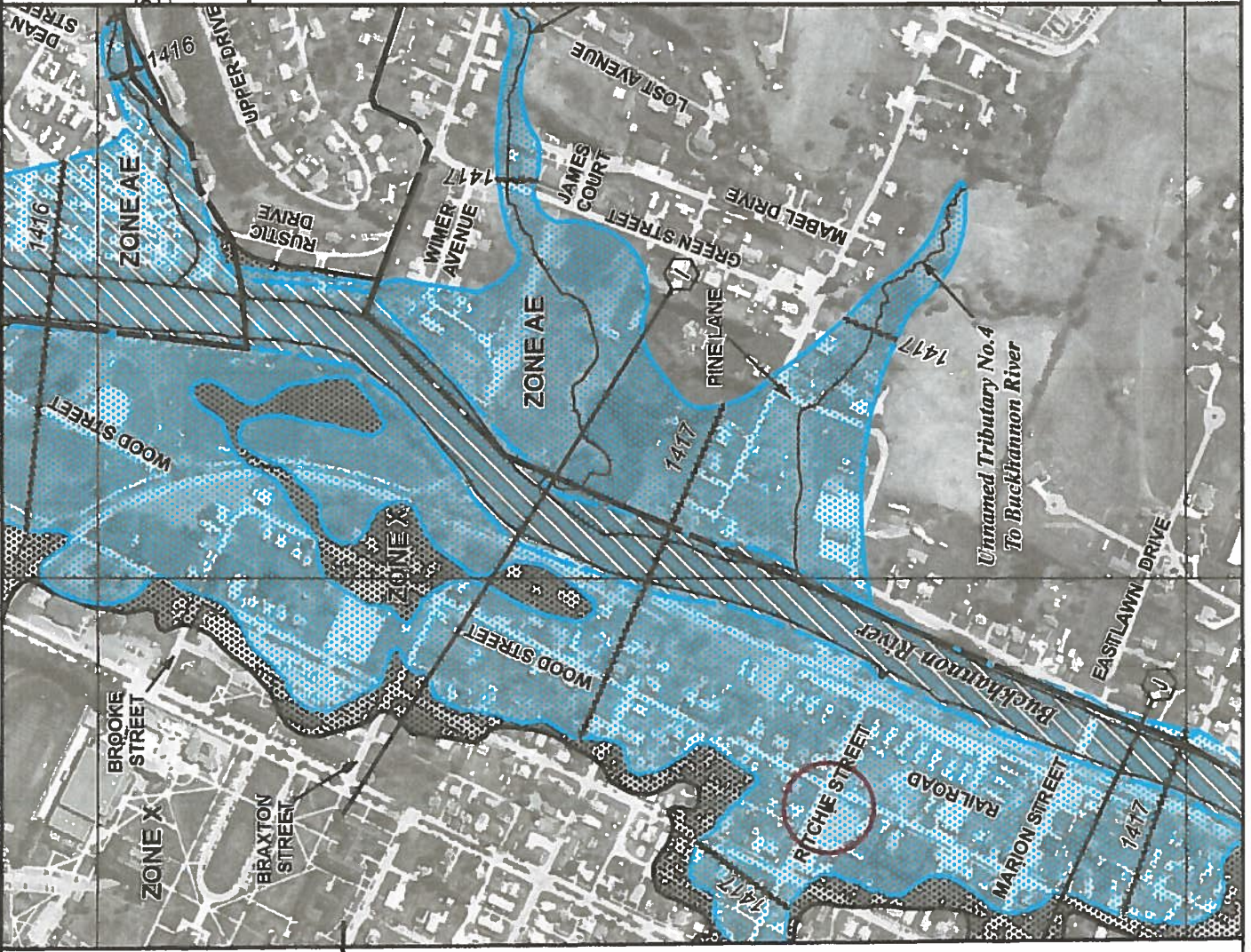
MAP NUMBER
54097C0127D

EFFECTIVE DATE
SEPTEMBER 29, 2010



Federal Emergency Management Agency

NATIONAL FLOOD INSURANCE PROGRAM



725000 FT

JOINS PANEL 0126

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at www.msc.fema.gov

