

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077  
Expires December 31, 2005

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

## SECTION A - PROPERTY OWNER INFORMATION

|                                                                                                                                     |                    |                                             |
|-------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------------------------------|
| BUILDING OWNER'S NAME<br><b>MICHAEL HALE</b>                                                                                        |                    | For Insurance Company Use:<br>Policy Number |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.<br><b>1853 STRAIGHT FORK ROAD</b> |                    | Company NAIC Number                         |
| CITY<br><b>ALKOL</b>                                                                                                                | STATE<br><b>WV</b> | ZIP CODE<br><b>25501</b>                    |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)                                            |                    |                                             |

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)  
**RESIDENTIAL**

LATITUDE/LONGITUDE (OPTIONAL)  
(##-##-##.## or #####)

HORIZONTAL DATUM:  
☒ NAD 1927 ☐ NAD 1983

SOURCE: ☐ GPS (Type):  
☒ USGS Quad Map ☐ Other:

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

|                                                                                          |                        |                                              |                                                               |                               |                                                                                 |
|------------------------------------------------------------------------------------------|------------------------|----------------------------------------------|---------------------------------------------------------------|-------------------------------|---------------------------------------------------------------------------------|
| B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER<br><b>LINCOLN COUNTY UNINCORPORATED AREAS</b> |                        | B2. COUNTY NAME<br><b>LINCOLN</b>            |                                                               | B3. STATE<br><b>WV</b>        |                                                                                 |
| B4. MAP AND PANEL NUMBER<br><b>540088 0175</b>                                           | B5. SUFFIX<br><b>B</b> | B6. FIRM INDEX DATE<br><b>SEPT. 18, 1987</b> | B7. FIRM PANEL EFFECTIVE/REVISED DATE<br><b>SEPT 18, 1987</b> | B8. FLOOD ZONE(S)<br><b>A</b> | B9. BASE FLOOD ELEVATION(S)<br>(Zone AO, use depth of flooding)<br><b>685.7</b> |

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.  
☐ FIS Profile ☐ FIRM ☐ Community Determined

B11. Indicate the elevation datum used for the BFE in B9: ☐ NGVD 1929 ☒ Other (Describe): **POINT ON BOUNDARY**

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☐ No Designation Date

## 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. Building Diagram Number **1** (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

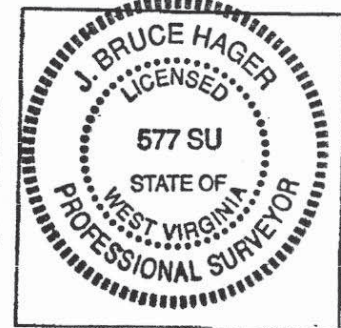
C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO  
Complete Items C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum \_\_\_\_\_ Conversion/Comments

Elevation reference mark used **E151**. Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No

- a) Top of bottom floor (including basement or enclosure) **687.14 ft.(m)**
- b) Top of next higher floor **691.02 ft.(m)**
- c) Bottom of lowest horizontal structural member (V zones only) **— ft.(m)**
- d) Attached garage (top of slab) **— ft.(m)**
- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) **686.90 ft.(m)**
- f) Lowest adjacent (finished) grade (LAG) **686.60 ft.(m)**
- g) Highest adjacent (finished) grade (HAG) **687.10 ft.(m)**
- h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade **0**
- i) Total area of all permanent openings (flood vents) in C3.h **292 sq. in. (sq. cm)**

License Number, Embossed Seal, Signature, and Date



## 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 in Sections A, B, and C 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.

CERTIFIER'S NAME

**J. BRUCE HAGER**

LICENSE NUMBER

**577 SU**

TITLE

**PROFESSIONAL SURVEYOR**

COMPANY NAME

**AUGUSTA LAND CONSULTANTS, INC**

ADDRESS

**P.O. Box 1422**

CITY

**DANVILLE**

STATE

**WV**

ZIP CODE

**25053**

SIGNATURE

DATE

**7-7-2004**

TELEPHONE

**304-369-7039**

|                                                                                                                                                                                                                              |                    |                          |                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------|--------------------------------------------------------------------|
| <b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b><br>BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.<br><u>1853 STRAIGHT FORK ROAD</u> |                    |                          | For Insurance Company Use:<br>Policy Number<br>Company NAIC Number |
| CITY<br><u>ALKOL</u>                                                                                                                                                                                                         | STATE<br><u>WV</u> | ZIP CODE<br><u>25501</u> |                                                                    |

### 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

Ce: FLOOR LEVEL PUMP HOUSE @ 686.90 A/C PAD @ 687.14

RESIDENCE HAS 1000 SF OF LIVING SPACE & ONLY 292.5 SQ IN OF VENT SPACE

☐ Check here if attachments

### SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is 0 ft (m) 2 in (cm) ☒ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is 3 ft (m) 11 in (cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is 0 ft (m) 2 in (cm) ☐ above or ☒ below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. For 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, C (items C3.h and C3.i only), 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, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS

J. BRUCE HAGGZ

SIGNATURE

P.O. BOX 1422

COMMENTS

*[Signature]*

CITY

DANVILLE

DATE

STATE

WV

TELEPHONE

ZIP CODE

25053

☐ 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.

- G1. ☒ The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local 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-G6) 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 is: 687.14 ft (m)

G9. BFE or (in Zone AO) depth of flooding at the building site is:

687.14 ft (m)

Datum: NAD 1927

Datum:

LOCAL OFFICIAL'S NAME

STEVEN E. MCCOMAS

COMMUNITY NAME

Lincoln Co. W.Va.

SIGNATURE

*[Signature]*

COMMENTS

TITLE

Building Permit Compliance Officer

TELEPHONE

304-824-7990 Ext. 264

DATE

7-9-04

☐ Check here if attachments