U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Floor 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) insurance agent/company, and (3) building owner.

SECTION A -	PROPERTY INFORMATION		FOR INSU	IRANCE COMPANY USE
A1. Building Owner's Name				mber:
JEFFERY K. + DAYL	E L. MEANS			
A2. Building Street Address (including Ap Box No. Z32 RIVER EOGL) or P.O. Route and	Company	NAIC Number:
City RONCEVERTE	State	WV	ZIP Code	
A3. Property Description (Lot and Block N	umbers, Tax Parcel Number, NAP Z4C PARC		:.)	
A4. Building Use (e.g., Residential, Non-R			CATIA	
A5. Latitude/Longitude: Lat. 37°43'			Datum: NAD	1927 F NAD 1983
A6. Attach at least 2 photographs of the b			December 1997	1921 NAD 1903
A7. Building Diagram Number 5	arrang is the continuate to posit	g dood to obtain nood	modrance.	
A8. For a building with a crawlspace or en	closure(s):			
a) Square footage of crawlspace or er	523	sq ft		
b) Number of permanent flood opening	147		ahove adjacent or	ada 4//A
c) Total net area of flood openings in A		in	above adjacent gri	ade N/A
d) Engineered flood openings?				
A9. For a building with an attached garage:	100404000			
a) Square footage of attached garage		ft		
 b) Number of permanent flood opening 	s in the attached garage withi	n 1.0 foot above adja	cent grade	A
 c) Total net area of flood openings in A 	9.b N/A s	iq in		
d) Engineered flood openings?	es No			
B1. NFIP Community Name & Community N	FLOOD INSURANCE RATI		RMATION	
				B3. State
		ENBRIER		WV -
B4. Map/Panel B5. Suffix B6. FIRM Date	Index B7. FIRM Panel Effective/ Revised Date	B8. Flood Zone(s)	B9. Base Flood El (Zone AO, use	levation(s) Base Flood Depth)
0751 E 10/16/2		AE	1652.6	,
B10. Indicate the source of the Base Flood		lood depth entered in	Item B9:	
	nity Determined Other/So			
P11. Indicate elevation datum used for BFE	in Item B9: NGVD 1929	☑ NAVD 1988 [Other/Source:	
B12. Is the building located in a Coastal Bar	rrier Resources System (CRR)	S) area or Otherwise	Protected Area (O	IPAI2 T Vos F
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes Designation Date: N/A CBRS DPA				
<u>•7.5</u>				
MA Form 086 0 22 (42/40)				

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

PORTANT: In these spaces, copy the corresponding information from Section		FOR INSURANCE COMPANY USE	
ilding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route a	and Box No.	Policy Number:	
Z32 RIVER EOGE LANE State ZIP Coo	do	Company NAIC Number	
, O	970	Company NAIC Number	
SECTION C - BUILDING ELEVATION INFORMATION		EQUIRED)	
	g Under Constru		
*A new Elevation Certificate will be required when construction of the building is		etion Pinished Constitu	
 Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), Complete Items C2.a–h below according to the building diagram specified in Ite 	, AR, AR/A, AR/A em A7. In Puerto	AE, AR/A1-A30, AR/AH, AR/A o Rico only, enter meters.	
Indicate elevation datum used for the elevations in items a) through h) below.	1658.62		
☐ NGVD 1929 NAVD 1988 ☐ Other/Source:			
Datum used for building elevations must be the same as that used for the BFE.			
		Check the measurement u	
 a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 	1656.Z	feet meters	
b) Top of the next higher floor	NIA	feet meters	
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A	feet _ meters	
d) Attached garage (top of slab)	NIA	feet meters	
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	N/A		
f) Lowest adjacent (finished) grade next to building (LAG)	1645.5	feet meters	
	1647. 2	feet meters	
h) Lowest adjacent grade at lowest elevation of deck or stairs, including			
structural support	1646.1	eet _ meters	
SECTION D - SURVEYOR, ENGINEER, OR ARCHIT	TECT CERTIFIC	CATION	
is certification is to be signed and sealed by a land surveyor, engineer, or architecterify that the information on this Certificate represents my best efforts to interpret afternent may be punishable by fine or imprisonment under 18 U.S. Code, Section	the data availab 1001.	law to certify elevation informa ile. I understand that any false	
]Yes ∐No	Check here if attachmen	
rtifier's Name License Number			
N. EUGENE KELLEY 443		Tommon .	
PRESIDENT		DOUGENE HE SE	
		A CENSE LA	
mpany Name		145.10 00 10 1	
mpany Name V. E. KELLEY SURVEYING Co.		No. 443	
W. E. KELLEY SURYEYING Co. dress		No. 443	
V. E. KELLEY SURYEYING Co.		No. 443	
V. E. KELLEY SURYEYING Co. O. Box 296	^o Code	No. 443 * No. 443 * STATE OF VIRGINITY OF	
V. E. KELLEY SURYRYING Co. Oress O. Box 296 State ZIP	Code	No. 443 STATE OF STONAL SURVINO	
V. E. KELLEY SURYRYING CO. dress P. O. Box 296 State V ZIP RONCEVERTE Date Date Tele	4970 ephone	STATE OF VIRGINIO	
V. E. KELLEY SURYRYING CO. dress P. O. Box 296 State V ZIP RONCEVERTE Date Date Tele	4970 ephone (04)645-2	STATE OF VIRGINION STATE OF VIRGINION OF VIR	

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY L	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			Policy Number:	
Z3Z RIVER EOGE LANE			1 1 1	
City	State	ZIP Code	Company NAIC Number	
RanceverTE	HIY -	Z4970		
SECTION E – BUILDING EI		MATION (SURVEY NO A (WITHOUT BFE)	OT REQUIRED)	
	2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		t a LOMA as LOMB E request	
or Zones AO and A (without BFE), complete Items E omplete Sections A, B, and C. For Items E1–E4, use inter meters.				
 Provide elevation information for the following and the highest adjacent grade (HAG) and the lowest 			ther the elevation is above or below	
Top of bottom floor (including basement, crawlspace, or enclosure) is	N/A	feet _ me	ters above or below the HA	
 Top of bottom floor (including basement, crawlspace, or enclosure) is 	NA	feet me	eters above or below the LA	
2. For Building Diagrams 6-9 with permanent flood	openings provided in	Section 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 me	ters above or below the HA	
3. Attached garage (top of slab) is	N/A	feet me	ters above or below the HA	
 Top of platform of machinery and/or equipment servicing the building is 	N/A	feet me	ters above or below the HA	
 Zone AO only: If no flood depth number is availab floodplain management ordinance? Yes 			accordance with the community's st certify this information in Section C	
SECTION F – PROPERTY OW	NED (OD OWNED)	C DEDDECENTATIVE	CERTIFICATION	
roperty Owner or Owner's Authorized Representative			200	
ddress N/A	Cit	у	State ZIP Code	
gnature	Da	te	Telephone	
N/A				
omments				
	570			
			Check here if attachments	

ELEVATION CERTIFICATE

OMB 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:	
232 RIVER EDGE				
City	State		ZIP Code	Company NAIC Number
RONCEVERTE	WV COMM	UNITY INFOR	Z4970 MATION (OPTIONAL	,
				
G2. A community official completed S or Zone AO.	tion Certificate. Co , enter meters. taken from other or orized by law to ce (.) ection E for a build	ocumentation ertify elevation	olicable item(s) and si that has been signed nformation. (Indicate Zone A (without a FE	ign below. Check the measurement and sealed by a licensed surveyor, the source and date of the elevation MA-issued or community-issued BFE)
G3 The following Information (Items C	54-6 Tuji is provide	a for commun	ty floodplain manage	ment purposes.
G4. Permit Number	G5. Date Pen	mit Issued		Date Certificate of Compliance/Occupancy Issued
	14/4			14/2
G7. This permit has been issued for:	New Construc	ction Subst	antial Improvement	
G8. Elevation of as-built lowest floor (included of the building:	ding basement)	NIA	fe	et 🗌 meters Datum
BFE or (in Zone AO) depth of flooding	at the huilding site	NIA	☐ fee	et meters
G10. Community's design flood elevation:	at the building site.	NIA		et meters
Local Official's Name		Title		
Community Name		Telep	hone	
Signature N/A		Date		
Comments (including type of equipment and	location, per C2(e)), if applicable)		
				Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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IMPORTANT: In these spaces, copy the co	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Z32 RIVER EDGE LANE			Policy Number:
RONCEVERTE	State IN I/	ZIP 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

Clear Photo One



Photo Two Caption

Clear Photo Two

Replaces all previous editions.

BUILDING PHOTOGRAPHS

Continuation Page

OMB 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:

City

232 RIVER EDGE LANE

ZIP Code

RONCEVERTE

ELEVATION CERTIFICATE

14/1/

☑ Z9970

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

Clear Photo Three



Photo Four

Photo Four Caption

Clear Photo Four

FEMA Form 086-0-33 (12/19)

Replaces all previous editions.

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