U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood 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 INSUR	ANCE COMPANY USE	
A1. Building Owner's Name				Policy Numb	oer:	
Barbara Hall						
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.				Company N	AIC Number:	
217 Koontz Avenue			01-1-		ZIP Code	
City Clendenin				25045		
	of and Block Numbers, Ta	x Parcel			c.)	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Part of Lot 3, Elk Garden (DB 2659, P 131 & Clendenin TM 7, P 16)						
A4. Building Use (e.g., Res	idential, Non-Residential,	Addition,	Accessory, 6	etc.) Residentia	al	
A5. Latitude/Longitude: L	at. 38.490289N.	Long. 81	.343562W.	Horizonta	I Datum: 🔲 NAD 1	927 🗵 NAD 1983
A6. Attach at least 2 photo	graphs of the building if the	e Certifica	ate is being u	ised to obtain floo	d insurance.	
A7. Building Diagram Num	per <u>8</u>					
A8. For a building with a cr	awlspace or enclosure(s):					
a) Square footage of o	rawispace or enclosure(s)		1	1170.00 sq ft		
b) Number of permane	nt flood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foo	above adjacent gra	ade <u>6</u>
	od openings in A8.b					
•	penings? 🗌 Yes 🖾 N					
A9. For a building with an a	ttached garage:					
]	a) Square footage of attached garageN/A sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0						
c) Total net area of flood openings in A9.b 0.00 sq in						
1	d) Engineered flood openings? Yes No					
d) Linguistica nota openinge.						
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number			B2. County Name		B3. State	
Town of Clendenin, WV / 540075 Kanawha West Virginia				West Virginia		
B4. Map/Panel B5. St Number B5. St	ffix B6. FIRM Index Date	Effe	RM Panel	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	Elevation(s) se Base Flood Depth)
54039C0302 E	02-06-2008	02-06-2	vised Date 2008	AE	629.1	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:						
IN IT IS Profile ☐ FIRM ☐ Community Determined ☐ Other/Source:						
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🗵 No						
Designation Date: CBRS OPA						

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY					
Building Street Address (including Apt., Unit, Suite, and/or Bl	FOR INSURANCE COMPANY USE Policy Number:				
217 Koontz Avenue	© 100000 ▼ 10 20000000000000000000000000000000000				
City State	ZIP C		Company NAIC Number		
Clendenin West \	/irginia 25045	·			
SECTION C – BUILDING ELEV	ATION INFORMATI	ON (SURVEY RE	EQUIRED)		
C1. Building elevations are based on: Construction I	\$70 A.	ing Under Constru	ction*		
*A new Elevation Certificate will be required when cons			AE AB/A1 A20 AB/AH AB/AO		
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: Survey grade GPS on site	Vertical Datum: N		Anna and a second		
Indicate elevation datum used for the elevations in item					
☐ NGVD 1929 ☑ NAVD 1988 ☐ Other/Sou					
Datum used for building elevations must be the same a	as that used for the Br	·E.	Check the measurement used.		
a) Top of bottom floor (including basement, crawlspace	e. or enclosure floor)		625.0 X feet meters		
	-, -, -, -, -, -, -, -, -, -, -, -, -, -		631.8 X feet meters		
b) Top of the next higher floor	\	which are the second and the second	N/A ☐ feet ☐ meters		
c) Bottom of the lowest horizontal structural member (v Zones only)		N/A feet meters		
d) Attached garage (top of slab)			14/1 lost motors		
 e) Lowest elevation of machinery or equipment servic (Describe type of equipment and location in Common 	ing the building ents)		631.8 X feet meters		
f) Lowest adjacent (finished) grade next to building (L	AG)	•	625.0 feet meters		
g) Highest adjacent (finished) grade next to building (l	HAG)		625.8 X feet meters		
h) Lowest adjacent grade at lowest elevation of deck	or stairs, including		625.0 X feet meters		
structural support SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION					
This cortification 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 lice	nsed land surveyor?	⊠Yes □ No	Check here if attachments.		
Continuor o realistic	License Number				
William R. Gunnoe, RPS	801		- millimin		
Title Registered Professional Surveyor			AM CENSON VI		
Company Name	and the second s				
Gunnoe Surveying & Mapping			NO.801 A		
Address	and the second s		P. Z.		
P.O. Box 1172			THE SOURCE STATE OF THE STATE O		
City	State	ZIP Code	MINIONAL SURVINI		
	West Virginia	25045	· ///////		
Signature William R. Jamese	Date 09-03-2020	Telephone (304) 548-5324	Ext.		
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) Subject dwelling has been set in accordance with the height requirements of the Town of Clendenin Floodplain Ordinance.					
Subject awening has been set in accordance with the neight requirements of the Town of Cleridenin's loodplain Cramance.					

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite,	Policy Number:			
217 Koontz Avenue				
City Clendenin	State West Virginia	ZIP Code 25045	Company NAIC Number	
SECTION E – BUILDING			REQUIRED)	
FOR ZO	ONE 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 		feet	rs 🔲 above or 🔲 below the HAG.	
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet	rs above or below the LAG.	
E2. For Building Diagrams 6–9 with permanent floo the next higher floor (elevation C2.b in the diagrams) of the building is	od openings provided in	Section A Items 8 and/or		
E3. Attached garage (top of slab) is	***************************************		rs ☐ above or ☐ below the HAG.	
E4. Top of platform of machinery and/or equipment servicing the building is	<u> </u>	[] feet [] mete	rs 🔲 above or 🔲 below the HAG.	
E5. Zone AO only: If no flood depth number is avail floodplain management ordinance? Yes	ilable, is the top of the bo	ottom floor elevated in ac . The local official must	ccordance with the community's certify this information in Section G.	
SECTION F - PROPERTY (OWNER (OR OWNER'S	REPRESENTATIVE) C	ERTIFICATION	
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 or Owner's Authorized Representative's Name				
Address	City	S	tate ZIP Code	
Signature	Dat	e Te	elephone	
Comments				
			•	
			Check here if attachments.	

ELEVATION CERTIFICATE

MPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Su 217 Koontz Avenue	Policy Number:			
City Clendenin	State West Virginia	ZIP Code 25045	Company NAIC Number	
SECTIO	N G - COMMUNITY INFO	RMATION (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–G10. In Puerto Rico only, enter meters.				
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 Zone AO.				
G3. The following information (Items G4-	G10) is provided for commu	unity floodplain managem	ent purposes.	
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued	
G7. This permit has been issued for:] New Construction ☐ Sub	ostantial Improvement		
G8. Elevation of as-built lowest floor (including basement) of the building:				
G9. BFE or (in Zone AO) depth of flooding at the building site:			meters Datum	
G10. Community's design flood elevation:		fee	meters Datum	
Local Official's Name	Tit	le		
Community Name	Те	lephone		
Signature	Da	ate		
Comments (including type of equipment and lo	cation, per C2(e), if applical	ole)	Chark have if attachments	
			Check here if attachments.	

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

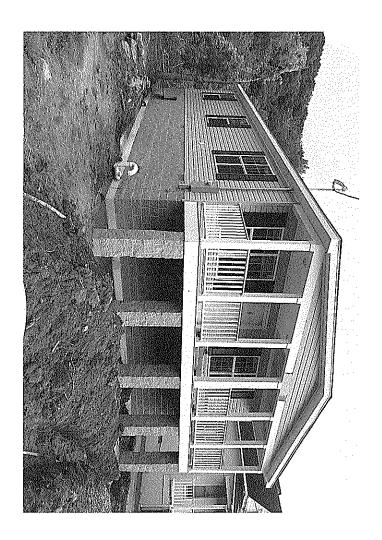
IMPORTANT: In these spaces, copy the correspo	nding information fro	om Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, a 217 Koontz Avenue	and/or Bldg. No.) or P.	O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
Clendenin	West Virginia	25045	
If using the Elevation Certificate to obtain NFIP instructions for Item A6. Identify all photographs will "Left Side View." When applicable, photographs wents, as indicated in Section A8. If submitting more	th date taken; "Front \ must_show_the_found	/iew" and "Rear View"; an ation with representative	d, if required, "Right Side View" and examples of the flood openings or
	Photo Or	18	
	FIIVU VI	16	
	Photo One		
Photo One Caption	FIIOLO ONB		Clear Photo One
			C. 20 200 00 400 00 10 10 10 10 10 10 10 10 10 10 10 1
-			
	Photo Tw	/0	
	Photo Two	nadakan karan ang ang ang ang ang ang ang ang ang a	For Continue to the continue t
Photo Two Caption			Clear Photo Two

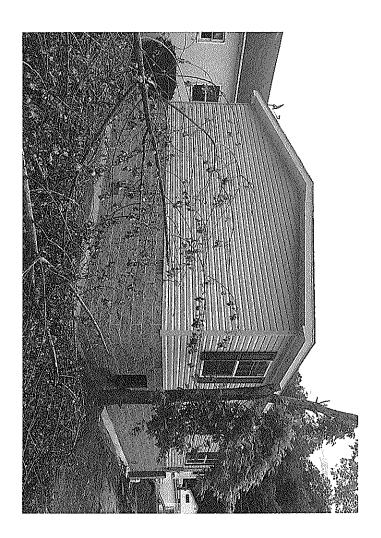
BUILDING PHOTOGRAPHS

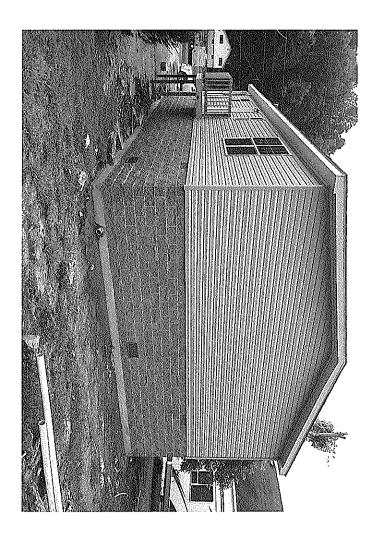
ELEVATION CERTIFICATE

Continuation Page

IMPORTANT: In these spaces, copy to	ne corresponding information from	om Section A.	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., 217 Koontz Avenue			Policy Number:	
City	State	ZIP Code	Company NAIC Number	
Clendenin	West Virginia	25045		
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 Thr	ee		
	Photo Three			
Photo Three Caption	·		Clear Photo Three	
	Photo For	Je-		
•				
	Photo Four			
Photo Four Caption	1 ROO POU		Clear Photo Four	









ę