U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Floed Insurance Program

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008 Expiration Date: July 31, 2015

| 2. | | | | HUN A - | PROPERTY | INFORMA | TION | F | OR INSURA | NCE CO | MPANY US | E |
|--|--|---|---|--|--|--|--|--|--|--------------|--|--|
| | Building Owner's Nar | ne Robert Din | igess | | | | | p | olicy Number | | | |
| | Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. Across the road from 6670 State Route 3 | | | | | ompany NAIC | | ri . | | | | |
| | City Hamlin | | | | Sta | ate WV | 3 | ZII | Code 25 | 523 | | |
| MATERIAL PROPERTY. | Property Description Part of Lincoln Co | ounty, Carroll D | istrict, Tax Map | 20, Pare | cel 13.1 - Dee | d Book 34 | 7, pg 539 | | | | | |
| | Building Use (e.g., Re | | | | | | | | | | | |
| 6. / | Latitude/Longitude: Attach at least 2 pho | tographs of the b | | | | | nsurance. | lorizontal Da | atum: N | AD 192 | 7 💌 NA | D 198 |
| | Building Diagram Nur For a building with a | | closure(s) | | | AQ For a | huilding | uith an atta | ched garage | | | |
| | a) Square footage of | | | 950 |)sqft | | | | ched garage | | N/A | sq1 |
| | b) Number of perma or enclosure(s) w | Ithin 1.0 foot abo | we adjacent grad | e 0 | *************************************** | b) N | lumber of | permanent | flood openin djacent grad | ngs in th | ne attached | |
| | c) Total net area of t d) Engineered flood | | A8.b Yes ⊠No | | sq in | | | | openings in | | | _ sqi |
| | b) crigineered nood | | | | | | | I flood open | | Yes | ⊠ No | |
| | 1510.0 | | TION B - FLOO | DD INSUF | | ARTER STATE OF THE | RM) INFO | RMATION | 1 | | | |
| 1. N | NFIP Community Nam | e & Community N | Number | | B2. County Na Lincoln | ne | | | | B3. St WV | tate | |
| 4. N | Map/Panel Number | B5. Suffix | B6. FIRM Index | Date | B7. FIRM Pane | Effective/ | B8. Flo | od Zone(s) | B9. Base | | Elevation(s) | (Zone |
| | 54043C0089 | D | 10/16/20 | | Revised Da 10/16/2 | 2013 | | AE | | se base | e flood depi | |
| | Indicate the source o | | | | | ntered in Ite | m B9: | | | | | |
| _ | FIS Profile F | | unity Determined | hand | er/Source: | | | | | | | |
| | Indicate elevation date | | | □ NGVD : | The same of the sa | WD 1988 | | er/Source: | | | | |
| | is the building locate Designation Date: | | | | OPA | nerwise Prot | ected Area | a (OPA)? | Yes X | O No | | |
| | Designation Date. | | | | | | | | | | | |
| - | | SECTIO | N C - BUILDII | NG ELEV | ATION INFOR | MATION (| SURVEY | REQUIRE | (D) | | | |
| | Building elevations ar | e based on: | | | | | | | | | | |
| | | tificate will be red | | struction of | the building is | | Construction | on* 🗵 | Finished C | | | |
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ELEVATION CERTIFICATE, page 2

| MPORTANT: In these spaces, copy the corresponding information from Section A. | | | | | F | FOR INSURANCE COMPANY USE | | | |
|---|--|---|---|---|---|--------------------------------|------------------------|--|--|
| Building Street Address (inclu Across the road from 6 | | Suite, and/or Bldg. No.) or P.O. pute 3 | Route and Box No. | | P | olicy Number: | | | |
| City Hamlin | | State WV | ZIP Code 25523 | | | ompany NAIC Nu | mber: | | |
| | | URVEYOR, ENGINEER, O | | | | | | | |
| | tion Certificate f | or (1) community official, (2) in | surance agent/com | pany, and (| 3) building or | wner. | | | |
| Comments Section C2e = | Utilities not con | npletely hooked up at the I | time of survey. | | | | | | |
| | of the state of th | | | | | | | | |
| Signature | 1 | ~ | Date 10/29/ | 2012 | | | | | |
| SECTION E - RUII DI | NG FI EVATIO | N INFORMATION (SURVE | | | ONE AO AI | ND ZONE A | WITUALIT DEEN | | |
| For Zones AO and A (without I | BFE), complete It | ems E1–E5. If the Certificate i e. Check the measurement us | s intended to suppo | ort a LOMA | or LOMR-F re | | | | |
| Provide elevation informat grade (HAG) and the lower | tion for the follow st adjacent grade | ring and check the appropriate e (LAG). | boxes to show whe | ther the ele | evation is ab | _ | | | |
| | | , crawispace, or enclosure) is , crawispace, or enclosure) is | Security of Security | - | meters | above or | below the HAG. | | |
| | | , crawispace, or enclosure) is t flood openings provided in Se | ection A items 8 and | | meters | | below the LAG. | | |
| | | diagrams) of the building is | ection A Items 8 and | | meters | above or | | | |
| 3. Attached garage (top of sl | | and a second in the second | *************************************** | | meters | | below the HAG. | | |
| 4. Top of platform of machine | ery and/or equip | ment servicing the building is | | | meters | | below the HAG. | | |
| 5. Zone AO only: If no flood o | depth number is | available, is the top of the botto. The local official must certify | tom floor elevated in | accordance | | | | | |
| | | ROPERTY OWNER (OR O | | | | | 44. | | |
| he property owner or owner's one AO must sign here. The | authorized represents in Se | esentative who completes Sec actions A, B, and E are correct | tions A. B. and F for | Zone A (wi | | | nmunity-issued BFE) | | |
| roperty Owner or Owner's Au | thorized Represe | ntative's Name | | | - | | | | |
| ddress | | | City | | State | ZIP C | ode | | |
| ignature | | | Date | - | Teleph | ionė | | | |
| omments | | | | | | | | | |
| | | | | | | Check | here if attachments | | |
| | | SECTION G - COMMUNIT | | | | | | | |
| of this Elevation Certhicate. | complete the app | nance to administer the committee item(s) and sign below. | Check the measurer | ment used l | items G8-0 | G10. in Puerto | Rico only, enter meter | | |
| The information in Se who is authorized by | ection C was tak law to certify ele | en from other documentation vation information. (Indicate t | that has been signe the source and date | ed and seal | ed by a licer ration data i | nsed surveyor, n the Commer | engineer, or archite | | |
| A community official of | completed Section | n E for a building located in Zo | one A (without a FEN | AA-issued o | community | -Issued BFE) or | Zone AO. | | |
| 3. Ine following informa | ition (Items G4- | G10) is provided for communi | ty floodplain manag | ement pur | oses, | | | | |
| 4. Permit Number | | G5. Date Permit Issued | G6. | Date Certif | icate Of Con | npliance/Occup | pancy Issued | | |
| 7. This permit has been iss | ued for: | ew Construction Substa | ntial Improvement | * | | | | | |
| 8. Elevation of as-built lowe | | basement) of the building: | | ☐ feet | meters | Datum | | | |
| 9. BFE or (in Zone AO) depti | | ne building site: | manufacture V spinished | | meters | Datum | | | |
| 10. Community's design flood | d elevation: | | * ************************************* | feet | ☐ meters | Datum | | | |
| ocal Official's Name | | | Title | | | | | | |
| ommunity Name | | | Telephone | | | | | | |
| gnature | | | Date | *************************************** | | | | | |
| omments | | | | | | | | | |
| | | | • | | W-5000000000000000000000000000000000000 | | 7 | | |
| | | | | | | Check | here if attachments | | |
| MA Form 086-0-33 (Revised 7) | /12) | | | | | Replace | s all previous edition | | |

ELEVATION CERTIFICATE, page 3

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

| IMPORTANT: In these spaces, cop | FOR INSURANCE COMPANY USE | | |
|--|---|----------------------|--|
| Building Street Address (including Across the road from 6670 | Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. State Route 3 | Policy Number: | |
| City Hamlin | State ZIP Code WV 25523 | 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.



Front View



Back View

BUILDING PHOTOGRAPHS

Continuation Page

| IMPORTANT: In these spaces, copy | FOR INSURANCE COMPANY USE | | |
|---|---|---------|----------------------|
| Building Street Address (including A Across the road from 6670 S | ot., Unit, Suite, and/or Bldg. No.) or PO. Route an State Route 3 | Box No. | Policy Number: |
| City Hamli n | State ZIP 6 WV 255 | | 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,



Right Side View



Left Side View