U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY OMB No. 1660-0008 National Flood Insurance Program Important: Read the instructions on pages 1-9. Expiration Date: July 31, 2015 SECTION A - PROPERTY INFORMATION FOR INSURANCE COMPANY USE A1. Building Owner's Name ROBERT STICKLER Policy Number: A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Company NAIC Number: 216 MANSION STREET City HAMLIN State WV ZIP Code 25523 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 34 ON EAST SIDE OF MANSION ST. DEED BOOK 324 PAGE 334 - TOWN OF HAMLIN - TAX MAP 2, PARCEL 95 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) ___RESIDENTIAL A5. Latitude/Longitude: Lat. 38.275997 DEG Long. 82.104561 DEG Horizontal Datum: ☐ NAD 1927 ☒ 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 4 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>358</u> a) Square footage of attached garage sq ft N/A b) Number of permanent flood openings in the crawlspace Number of permanent flood openings in the attached garage or enclosure(s) within 1.0 foot above adjacent grade 2 within 1.0 foot above adjacent grade Total net area of flood openings in A8.b 576 sq in Total net area of flood openings in A9.b sq in d) Engineered flood openings? Yes No Engineered flood openings? Yes ☐ No SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name B3. State LINCOLN COUNTY, WV, UNINCORPORATED AREAS LINCOLN COUNTY W٧ B4. Map/Panel Number B5. Suffix B6. FIRM Index Date **B7. FIRM Panel** B8. Flood B9. Base Flood Elevation(s) (Zone 5400890001 В SEP 4 1987 Effective/Revised Date Zone(s) AO, use base flood depth) 9-4-1987 SEE CMNTS х B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. ☐ FIS Profile ☐ Community Determined ☐ Other/Source: B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 ☑ NAVD 1988 ☐ Other/Source: Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes ☑ No Designation Date: □ CBRS □ OPA SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under 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. In Puerto Rico only, enter meters Benchmark Utilized: HY0596 Vertical Datum: NAVD 1988 Indicate elevation datum used for the elevations in items a) through h) below. \square NGVD 1929 \boxtimes NAVD 1988 \square Other/Source: Datum used for building elevations must be the same as that used for the BFE. Check the measurement used. a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 641.1 ☐ meters b) Top of the next higher floor 648.9 ☐ meters c) Bottom of the lowest horizontal structural member (V Zones only) ☐ meters d) Attached garage (top of slab) <u>N/A</u>. ☐ meters e) Lowest elevation of machinery or equipment servicing the building <u>641.3</u> ☐ meters (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) 645.1 ☐ meters g) Highest adjacent (finished) grade next to building (HAG) <u>648.2</u> ☐ meters h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support <u>643.9</u> ☐ meters

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

Check here if attachments

licensed land surveyor?

☐ No

ZIP Code 25559

Certifier's Name MICHAEL D. PORTER

State wv

License Number 355

Title PARTNER

Address RT. 2, BX 820 MADISON CK RD

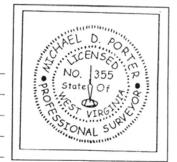
Company Name PORTER & ASSOCIATES

Signature Michael D. Forte

Date 9 OCTOBER 2013

City SALT ROCK

Telephone 304-736-8675



D. 11.11 Ot	es, copy the corresponding information fro	m Section A	١.	FOR INSURANCE COMPANY USE
Building Street Address (including a 216 MANSION STREET	Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and	Box No.		Policy Number:
City HAMLIN	State WV	ZIP Code 25	523	Company NAIC Number
SECTI	ION D – SURVEYOR, ENGINEER, OR ARCH	ITECT CERT	IFICATION (CONTINUED)
Copy both sides of this Elevation C	ertificate for (1) community official, (2) insurance agen	t/company, and	(3) building ow	ner.
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Signature Michael D	5. Portu	9 OCT 2013		
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For Zones AO and A (without BFE) and C. For Items E1–E4, use nature E1. Provide elevation information grade (HAG) and the lowest a a) Top of bottom floor (including b) Top of bottom floor (including b)	of the following and check the appropriate boxes to stadjacent grade (LAG). In grade, if available. Check the measurement used. In for the following and check the appropriate boxes to stadjacent grade (LAG). In grade basement, crawlspace, or enclosure) is	o support a LO Puerto Rico or low whether the	MA or LOMR-F ly, enter meters elevation is abo	request, complete Sections A, B, s. ove or below the highest adjacent above or below the HAG.
(elevation C2.b in the diagram 3. Attached garage (top of slab) 4. Top of platform of machinery a 5. Zone AO only: If no flood dep	is) of the building is feet _ meter is above or and/or equipment servicing the building is th number is available, is the top of the bottom floor election.	ms 8 and/or 9 (sets above or below the	see pages 8–9 or below the HAG.	of Instructions), the next higher floor HAG.
- Tes 140	Official must certify this information	mation in Section	n G.	
SECTION	ON F – PROPERTY OWNER (OR OWNER'S	REPRESENT	ATIVE) CER	RTIFICATION
he property owner or owner's author Zone AO must sign here. The state	orized representative who completes Sections A, B, and tements in Sections A, B, and E are correct to the best	d E for Zone A	without a FEMA	A-issued or community-issued BFE)
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