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

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

		SEC1	TION A -	PROPERTY INF	ORMATION	FOR	INSURANCE COMPANY USE		
							y Number:		
							pany NAIC Number:		
City Ellicott City			St	ate MD ZIP C	ode 21042				
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax Map 24, Parcel 956, Lot 20 Valley Mede									
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat. 39°16′57.5″N Long. 76°50′41.9″W 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 3 A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) or enclosure(s) or enclosure(s) or enclosure(s) or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) within 1.0 foot above adjacent grade 0 or enclosure(s) or									
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION									
B1. NFIP Community Name Howard County 240044	& Community N	lumber	B2. Coun Howard (B3. S MD	State		
B4. Map/Panel Number 240044 0090	B5. Suffix D	B6. FIRM Index I November 6, 20		B7. FIRM Panel Effective/Revised D November 6, 201	ate Zone(s)		9. Base Flood Elevation(s) (Zone AO, use base flood depth) 379.4		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. FIS Profile FIRM Community Determined Other/Source: FEMA DFIRM GIS 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)? CBRS OPA									
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. 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: Leica RTN Network Vertical Datum: 1988 Indicate elevation datum used for the elevations in items a) through h) below. Datum used for building elevations must be the same as that used for the BFE.									
					C	heck the r	neasurement used.		
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 384.4						 ☆ fe ☆ fe ☆ fe ☆ fe ☆ fe ☆ fe 	meters		
n) Lowest adjacent grad						⊠ fe	et 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 I understand that any false I Check here if commen Check here if attachmed Certifier's Name C. Allen Patritle Surveyor Address 8161 Maple Lawr	information on to statement may buts are provided of ents.	his Certificate repre e punishable by fine	esents my k e or impriso Were lati licensed	best efforts to interponment under 18 U. itude and longitude land surveyor? License Nur nologies, Inc State MD	ret the data available S. Code, Section 100 in Section A provided ☑ Yes ☐ No nber 475 ZIP Code 21043	01.	OF MANAGER OF STATE O		
Signature // ////	4 11	Date 02/03/14		reiepnone	410-792-8086				

ELEVATION CERTIFICATE, page 2 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: 3225 Birchmede Dr. City Ellicott City State MD ZIP Code 21042 Company NAIC Number: 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 The hotwater heater is lowest machinery in item c2.e. Signature C. ALLEN PAI Date 02/03/14 SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE 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 ☐ meters ☐ above or ☐ below the HAG. b) Top of bottom floor (including basement, crawlspace, or enclosure) is ☐ feet ☐ meters ☐ above or ☐ below the LAG. E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is ☐ feet ☐ meters ☐ above or ☐ below the HAG. E3. Attached garage (top of slab) is ☐ feet ☐ meters ☐ above or ☐ below the HAG. E4. Top of platform of machinery and/or equipment servicing the building is __ _ ☐ feet ☐ meters ☐ above or ☐ below the HAG. E5. 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, 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's or Owner's Authorized Representative's Name Address ZiP Code City State Signature Date Telephone Comments 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. Check the measurement used in Items G8-G10. In Puerto Rico only, enter meters. 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 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-G10) 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: ☐ feet ☐ meters Datum __ G9. BFE or (in Zone AO) depth of flooding at the building site: feet ☐ meters Datum ___ G10. Community's design flood elevation: ☐ feet ☐ meters Datum

Title

Date

Telephone

FFMA Form 086-0-33 (7/12)

Local Official's Name

Community Name

Signature

Comments

Check here if attachments.

ELEVATION CERTIFICATE, page 3

Building Photographs

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corres	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and 3225 Birchmede Dr.	Policy Number:		
City Ellicott City	State MD ZIP Code 21042	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

ELEVATION CERTIFICATE, page 4

Building Photographs

Continuation Page

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. 3225 Birchmede Dr.

Policy Number:

City Ellicott City

State MD

ZIP Code 21042

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.



Rear View