OMB No. 1660-0008

Expiration Date: November 30, 2018

# **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 Matthew Richer				per:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6749 Carlinda Ave				AIC Number:
City Columbia	State Maryland		ZIP Code 21046	
A3. Property Description (Lot and Block Numbers, Tax Parc Lot 38A, Block J, Allview Estates, Tax Map 36, Parcel 218	el Number, Lega	al Description, etc.)		
A4. Building Use (e.g., Residential, Non-Residential, Additio	n, Accessory, etc	c.) Residential		
A5. Latitude/Longitude: Lat. N 39-11-05.0 Long.	W 76-51-16.1	Horizontal D	atum: NAD 1	927 × NAD 1983
A6. Attach at least 2 photographs of the building if the Certif	icate is being use	ed to obtain flood i	nsurance.	
A7. Building Diagram Number7				
A8. For a building with a crawlspace or enclosure(s):				
a) Square footage of crawlspace or enclosure(s)		0.00 sq ft		
b) Number of permanent flood openings in the crawlspa	ce or enclosure(s	s) within 1.0 foot at	oove adjacent gra	de 0
c) Total net area of flood openings in A8.b	0.00 sq in			
d) Engineered flood openings?				
A9. For a building with an attached garage:				
a) Square footage of attached garage	0.00 sq ft			
b) Number of permanent flood openings in the attached	garage within 1.0	0 foot above adjace	ent grade 0	
c) Total net area of flood openings in A9.b	0.00 sq in	ר		
d) Engineered flood openings?				
SECTION B – FLOOD INSUR	ANCE RATE M	IAP (FIRM) INFO	RMATION	***************************************
B1. NFIP Community Name & Community Number Howard County 240044  B2. County Name Howard County  B3. State Maryland				
Number   Date   Ef		B8. Flood E Zone(s)	39. Base Flood El (Zone AO, use	evation(s) Base Flood Depth)
24027C 0165 D 11-06-2013 11-06		AE	288.0	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:				
☐ FIS Profile 区 FIRM ☐ Community Determined ☐ Other/Source:				
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X 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 DPA				

# **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2018

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. 6749 Carlinda Ave			Policy Number:	
City State ZIP Code			Company NAIC Number	
Columbia Mary	rland 2104	16		
SECTION C – BUILDING ELE	VATION INFORMAT	ION (SURVEY RE	EQUIRED)	
C1. Building elevations are based on:   Construction		ding Under Constru	ıction* ⊠ Finished Construction	
*A new Elevation Certificate will be required when co		(A)		
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), \ Complete Items C2.a–h below according to the build	ing diagram specified i	n Item A7. In Puert	AE, AR/A1–A30, AR/AH, AR/AO. o Rico only, enter meters.	
Benchmark Utilized: Leica RTN GPS	Vertical Datum:			
Indicate elevation datum used for the elevations in ite		V.		
☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/S  Datum used for building elevations must be the same		FF		
	ao inal acca for the B		Check the measurement used.	
<ul> <li>a) Top of bottom floor (including basement, crawlspa</li> </ul>	ace, or enclosure floor)	2	285.20 X feet meters	
b) Top of the next higher floor		2	92.90 X feet meters	
c) Bottom of the lowest horizontal structural member	(V Zones only)		feet meters	
d) Attached garage (top of slab)			feet meters	
<ul> <li>e) Lowest elevation of machinery or equipment servi (Describe type of equipment and location in Comr</li> </ul>	cing the building nents)	2	85.30 × feet meters	
f) Lowest adjacent (finished) grade next to building	(LAG)	2	84.90 X feet meters	
g) Highest adjacent (finished) grade next to building	(HAG)	2	91.30 X feet meters	
<ul> <li>h) Lowest adjacent grade at lowest elevation of deck structural support</li> </ul>	or stairs, including	2	84.30 🗵 feet 🗌 meters	
SECTION D - SURVEYOR, I	ENGINEER, OR ARC	HITECT CERTIFI	ICATION	
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.				
Were latitude and longitude in Section A provided by a licensed land surveyor?   ✓ Yes   ✓ No   ✓ Check here if attachments.				
Certifier's Name	License Number			
C. Allen Paugh	475		_	
Title Surveyor			OF MARKET	
Company Name KCI Technologies, Inc.		Ä	OLNUM	
Address			10 000 10 10 10 10 10 10 10 10 10 10 10	
11830 West Market Place		747	g/	
City	State	ZIP Code		
Fulton	Maryland	20759	MAN LANGE STATE OF THE PARTY OF	
Signature ( Mln Guenh	Date 02-19-2018	Telephone (410) 792-8086	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)				
The lowest machinery per C2(e) above is the furnace and hot water heater.				

# **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from S	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Re 6749 Carlinda Ave	oute and Box No.	Policy Number:		
	P Code	Company NAIC Number		
Columbia Maryland 21	046	·		
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.				
<ul><li>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).</li><li>a) Top of bottom floor (including basement,</li></ul>				
crawlspace, or enclosure) is	_	rs □ above or □ below the HAG.		
b) Top of bottom floor (including basement, crawlspace, or enclosure) is	feet meter			
E2. For Building Diagrams 6–9 with permanent flood openings provided in Sec	tion A Itams 8 and/or	0 (see pages 1-2 of Instructions)		
the next higher floor (elevation C2.b in the diagrams) of the building is				
	feet meter 	rs		
E3. Attached garage (top of slab) is	feet _ meter	s 🗌 above or 🗌 below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is		rs 🔲 above or 🔲 below the HAG.		
E5. Zone AO only: If no flood depth number is available, is the top of the bottor floodplain management ordinance?   Yes No Unknown. The	m floor elevated in ac ne local official must o	cordance with the community's certify this information in Section G.		
SECTION F - PROPERTY OWNER (OR OWNER'S RE	PRESENTATIVE) CE	ERTIFICATION		
The property owner or owner's authorized representative who completes Sectio community-issued BFE) or Zone AO must sign here. The statements in Section	ns A. B. and E for Zo	ne A (without a FFMA-issued or		
Property Owner or Owner's Authorized Representative's Name				
Address City	Sta	ate ZIP Code		
Signature Date	Те	lephone		
Comments		***************************************		
		Check here if attachments.		

### **ELEVATION CERTIFICATE**

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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. 6749 Carlinda Ave			Policy Number:		
City Columbia	State Maryland	ZIP Code 21046	Company NAIC Number		
SECTION	ON G - COMMUNITY I	NFORMATION (OPTIONAL)			
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete	the community's floodplain m the applicable item(s) and sig	anagement ordinance can complete gn below. Check the measurement		
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.	ion E for a building loca	ated in Zone A (without a FEN	MA-issued or community-issued BFE)		
G3.	-G10) is provided for co	ommunity floodplain manager	ment purposes.		
G4. Permit Number	G5. Date Permit Issu	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 of the building:	g basement)	fee	et  meters Datum		
G9. BFE or (in Zone AO) depth of flooding at t	the building site:	fee	et 🔲 meters Datum		
G10. Community's design flood elevation:		fee	et 🗌 meters Datum		
Local Official's Name		Title			
Community Name		Telephone	· · · · · · · · · · · · · · · · · · ·		
Signature		Date	, ,,,,,,,,,,		
Comments (including type of equipment and loc	cation, per C2(e), if app	licable)			
			Check here if attachments.		

#### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

See Instructions for Item A6.

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Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6749 Carlinda Ave		
State	ZIP Code	Company NAIC Number
Maryland	21046	, ,
	, Unit, Suite, and/or Bldg. No.) c	, Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  State ZIP Code

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 Front View taken 02/08/2018

Clear Photo One



Photo Two

Photo Two Caption Rear View taken 02/08/2018

Clear Photo Two

#### **BUILDING PHOTOGRAPHS**

OMB No. 1660-0008

Expiration Date: November 30, 2018

#### **ELEVATION CERTIFICATE**

Con	tinuat	tion	Ρ,	ag	е

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. 6749 Carlinda Ave			Policy Number:
City	State	ZIP Code	Company NAIC Number
Columbia	Maryland	21046	

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 Left Rear View taken 02/08/2018

Clear Photo Three



Photo Four

Photo Four Caption Front view taken 02/08/2018

Clear Photo Four