#### U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

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 David Shanes Policy Number:				oer:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4030 Dado Ct				Company N	AIC Number:	
City Ellicott City	\$\frac{1}{2} \text{V}			21042		
	on (Lot and Block Numbers, Ta Tax Map 24, Parcel 951	x Parcel	l Number, Leg	gal Description, etc	c.)	
A4. Building Use (e.g.,	Residential, Non-Residential,	Addition	, Accessory, e	etc.) Residentia	ıl	
A5. Latitude/Longitude	: Lat. N 39-15-34.7	Long. V	76-49-50.7	Horizontal	Datum: NAD 1	927 × NAD 1983
A6. Attach at least 2 ph	notographs of the building if the	e Certific	ate is being u	sed to obtain floor	d insurance.	
A7. Building Diagram N	lumber7					
A8. For a building with	a crawlspace or enclosure(s):					
a) Square footage	of crawlspace or enclosure(s)			336.00 sq ft		
b) Number of perm	anent flood openings in the cra	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	de 1
c) Total net area of	f flood openings in A8.b		67.00 sq in			
d) Engineered floo	d openings?	lo				
A9. For a building with a	an attached garage:					
a) Square footage	a) Square footage of attached garage 600.00 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	c) Total net area of flood openings in A9.b 0.00 sq in					
d) Engineered flood openings?						
, , , , , , , , , , , , , , , , , , , ,						
	SECTION B - FLOOD I	NSURA	NCE RATE	MAP (FIRM) INF	ORMATION	
B1. NFIP Community Name & Community Number Howard County 240044			B2. County Name Howard County		B3. State Maryland	
			Tioward Cot	inty		war yrariu
B4. Map/Panel B5. Number	. Suffix B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood El (Zone AO, use	evation(s) e Base Flood Depth)
24027C 0090 D	11-06-2013	11-06-2		Shaded X	342.8	
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 × 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						

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4030 Dado Ct			Policy Number:		
City Sta Ellicott City Ma	ryland 210	Code 042	Company NAIC Number		
SECTION C – BUILDING EL	EVATION INFORMA	TION (SURVEY R	EQUIRED)		
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)  C1. Building elevations are based on:					
h) Lowest adjacent grade at lowest elevation of dec structural support	ck or stairs, including		N/A feet meters		
SECTION D – SURVEYOR,	ENGINEER, OR AR	CHITECT CERTIF	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 C. Allen Paugh	License Number 475	# 40° 41° 11.			
Title Surveyor  Company Name KCI Technologies, Inc.  Address 11830 West Market Place  City Fulton  Signature  Copy all pages of this Elevation Continuate and all attachmed to the lowest machinery in C2(e) above is the furnace. The addition built on the east end of the house that is building elevation of the shaded x zone. The owner reports his gar	r C2(e), if applicable) re is another vent in the diagram 9. The base	ZIP Code 20759  Telephone (410) 792-8086  fficial, (2) insurance are crawl space but it flood elevation reports	has a fan mounted in it. There is an rted in B9 above is the 500 year		

## **ELEVATION CERTIFICATE**

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IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY US				
	g Street Address (including Apt., Unit, Suite, and/ Dado Ct	or Bldg. No.) or P.O.	Route and Box No.	Policy Number:
City		tate	ZIP Code	Company NAIC Number
Ellicott	City	aryland	21042	
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)				
For Zor comple enter m	nes AO and A (without BFE), complete Items E1– ete Sections A, B,and C. For Items E1–E4, use na neters.	E5. If the Certificate tural grade, if availa	is intended to support a ble. Check the measure	a LOMA or LOMR-F request, ment used. In Puerto Rico only,
<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		feet _ meter	rs 🗌 above or 🗌 below the HAG.
b)	Top of bottom floor (including basement, crawlspace, or enclosure) is		feet meter	rs above or below the LAG.
E2. Fo	or Building Diagrams 6–9 with permanent flood op	enings provided in S	ection A Items 8 and/or	9 (see pages 1–2 of Instructions)
the	e next higher floor (elevation C2.b in e diagrams) of the building is		feet meter	
E3. Att	tached garage (top of slab) is		feet meter	rs above or below the HAG.
E4. To se	p of platform of machinery and/or equipment rvicing the building is		feet meter	rs above or below the HAG.
E5. Zo	ne AO only: If no flood depth number is available odplain management ordinance?   Yes	is the top of the bot No Unknown.	tom floor elevated in ac The local official must	cordance with the community's certify this information in Section G.
	SECTION F - PROPERTY OWN	ER (OR OWNER'S F	REPRESENTATIVE) CE	ERTIFICATION
The pro	operty owner or owner's authorized representative			
commu	nity-issued BFE) or Zone AO must sign here. The	statements in Secti	ons A, B, and E are cor	rect to the best of my knowledge.
Propert	y Owner or Owner's Authorized Representative's	Name		
Address	S	City	St	ate ZIP Code
Signatu	ire	Date	Те	lephone
Comme	ents			
				Check here if attachments.

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IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, S 4030 Dado Ct	Policy Number:			
City Ellicott City	State Maryland	ZIP Code 21042	Company NAIC Number	
SECTION	ON G - COMMUNITY INFOR	MATION (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 tak engineer, or architect who is authoriz data in the Comments area below.)				
G2. A community official completed Sect or Zone AO.	ion E for a building located in	Zone A (without a FEMA	A-issued or community-issued BFE)	
G3. The following information (Items G4-	-G10) is provided for commur	nity floodplain manageme	ent purposes.	
G4. Permit Number	G5. Date Permit Issued		Date Certificate of compliance/Occupancy Issued	
G7. This permit has been issued for:	New Construction Subs	tantial Improvement		
G8. Elevation of as-built lowest floor (including of the building:	g basement)	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	
Local Official's Name	Title			
Community Name	Tele	phone		
Signature	Date	9		
Comments (including type of equipment and loc	cation, per C2(e), if applicable	9)		
			Check here if attachments.	

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

See Instructions for Item A6.

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City	State	ZIP Code	Company NAIC Number	
Ellicott City	Maryland	21042		

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 4/22/2019

Clear Photo One



Photo Two

Photo Two Caption Rear View taken 4/22/2019

Clear Photo Two

### **BUILDING PHOTOGRAPHS**

### **ELEVATION CERTIFICATE**

Continuation Page

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City	State	ZIP Code	Company NAIC Number
Ellicott City	Maryland	21042	

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 Right side view taken 4/22/19

Clear Photo Three



Photo Four

Photo Four Caption Left side view taken 4/22/19

Clear Photo Four