ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires March 31, 2012

National Flood Insurance Program

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION	For Incurance Company Hear			
A1. Building Owner's Name Somers, Robert P	For Insurance Company Use: Policy Number			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5057 Ten Mills Road	Company NAIC Number			
City Columbia State MD ZIP Code 21044	<u> </u>			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot: 17, Parcel: 0256, Deed: /13038/00124				
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): A9. For a building with an attack and Square footage of crawlspace or enclosure(s) of the building used to obtain flood insurance. A9. For a building with an attack and Square footage of crawlspace or enclosure(s) of the building used to obtain flood insurance. A9. For a building with an attack and Square footage of crawlspace or enclosure(s) of the building used to obtain flood insurance.	ched garage 313 sq ft openings in the attached garage djacent grade 0 sq in			
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	l .			
	B3. State Maryland			
B4. Map/Panel Number B5. Suffix B6. FIRM Index B7. FIRM Panel B8. Flood 240044 0028 B Date Effective/Revised Date Zone(s) March 15, 1977 December 4, 1986 C	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 319.1			
B11. Indicate elevation datum used for BFE in Item B9: ☑ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe) B12. 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 REQUIR	ED)			
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/AF below according to the building diagram specified in Item A7. Use the same datum as the BFE. Benchmark Utilized LEICA RTN Vertical Datum NAVD 1988 Conversion/Comments All elevations shown are NGVD 1929 after 0.72' conversion. Check the measurer				
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 321.4	to Rico only) neters (Puerto Rico only) to Rico only)			
f) Lowest adjacent (finished) grade next to building (LAG) 321.0	to Rico only)			
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 elevati 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 licensed land surveyor? Yes No	OF MAR			
Certifier's Name Allen Paugh License Number 475				
Title Surveyor Company Name KCl Technologies, Inc.	1 3 43 /2 1			
Address 8161 Maple Lawn City Fulton State MD ZIP Code 20759	- LWE STATION			
Signature Date, 10/2626/12 Telephone (410) 792-8086	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			

IMPORTANT: In these spaces,	copy the corresponding inform	nation from Sec	ion A.	For	Insurance Company Use:
Building Street Address (including Apt					cy Number
5057 Ten Mills Road City ColumbiaState MD ZIP Code	21044			Cor	npany NAIC Number
SECTION	I D - SURVEYOR, ENGINEER, O	OR ARCHITECT	CERTIFICATION	N (CONTINI	IED)
Copy both sides of this Elevation Certi)LU)
Comments C2e (lowest machinery) is					wided
4				ourrey are pr	31830.
Signature C. Allen Taux	A	Date 10/26/	2012/3		
SECTION E - BUILDING ELE	VATION INFORMATION (SURV			E AO AND 2	
b) Top of bottom floor (including E2. For Building Diagrams 6-9 with p (elevation C2.b in the diagrams) E3. Attached garage (top of slab) is E4. Top of platform of machinery and E5. Zone AO only: If no flood depth	grade, if available. Check the measure the following and check the appropriacent grade (LAG). basement, crawlspace, or enclosure basement, crawlspace, or enclosure bermanent flood openings provided in of the building is feet meted/or equipment servicing the building	is	uerto Rico only, en whether the elevat feet mei and/or 9 (see pag above or be below the HAG. feet meters ed in accordance v	ter meters. ion is above of ters above ters above es 8-9 of Instr elow the HAG.	r bel ow the high est adjacent e or below the HAG. e or below the LAG. ructions), the next higher floor below the HAG.
	F - PROPERTY OWNER (OR C			CERTIFICAT	TION
The property owner or owner's authorized zone AO must sign here. <i>The state</i> Property Owner's or Owner's Authorized	zed representative who completes Soments in Sections A, B, and E are co	ections A, B, and E	for Zone A (withou		
Address	822	City		State	ZIP Code
Signature		Date		Telephone	Zir Code
Comments					
	SECTION G - COMMUNI	TY INFORMATION	ON (OPTIONAL)		Check here if attachments
he local official who is authorized by la	w or ordinance to administer the com	munity's floodplain	management ordi	nance can co	mplete Sections A, B, C (or E).
is authorized by law to certify 62. A community official complete	plete the applicable item(s) and sign was taken from other documentation elevation information. (Indicate the s d Section E for a building located in a ns G4-G9) is provided for community	that has been sign cource and date of Zone A (without a F	ed and sealed by a the elevation data i EMA-issued or co	licensed surv	veyor, engin eer, or architect who nts area below.)
G4. Permit Number	G5. Date Permit Issued	G6.	Date Certificate C	Of Compliance	/Occupancy Issued
 This permit has been issued for: Elevation of as-built lowest floor (in) BFE or (in Zone AO) depth of flood Community's design flood elevation 	cluding basement) of the building: _ ing at the building site: _	🗆 fe	nent eet	l) Datum	
Local Official's Name		Title			
Community Name		Telephon	е		
Signature		Date			
Comments					
					☐ Check here if attachments

Building PhotographsSee Instructions for Item A6.

	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5057 Ten Mills Road	Policy Number
City Columbia State MD ZIP Code 21044	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page, following.



FRONT VIEW

Building Photographs Continuation Page

	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5057 Ten Mills Road	Policy Number
City Columbia State MD ZIP Code 21044	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."



REAR VIEW