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 IN	FOR INSUR	ANCE COMPANY USE		
A1. Building Owner's Name Michael J and Brigid E Linsenmeyer T/E			Policy Numb	per:
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6730 Allview Dr 			Company N.	AIC Number:
City Columbia	State 2 Maryland 2			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 25 BL K, 6730 Allview Dr, Allview Estates, Deed 07502/00052				
A4. Building Use (e.g., Residential, Non-Residential, Add	dition, Accessory, e	etc.) Residential		
A5. Latitude/Longitude; Lat. N 39-11-04.6 Lo	ong. W 76-51-26.6	Horizontal [Datum: NAD 1	927 × NAD 1983
A6. Attach at least 2 photographs of the building if the C	ertificate is being u	sed to obtain flood	insurance.	
A7. Building Diagram Number 1A				
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 crawl	Ispace or enclosure	(s) within 1.0 foot a	bove 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 attact	hed garage within 1	l.0 foot above adjac	cent grade 0	
c) Total net area of flood openings in A9.b 0.00 sq in				
d) Engineered flood openings? ☐ Yes ☒ No				
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION				
B1. NFIP Community Name & Community Number 240044 B2. Count Howard C				B3. State Maryland
B4. Map/Panel B5. Suffix B6. FIRM Index Date B	7. FIRM Panel Effective/ Revised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) Base Flood Depth)
240044 0165 D 11-06-2013 11	1-06-2013	AE	288.8	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item 89:				
☐ FIS Profile ☑ 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 DPA				

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6730 Allview Dr			Policy Number:	
		IP Code 1046	Company NAIC Number	
SECTION C – BUILDING E	LEVATION INFORM	IATION (SURVEY RI	EQUIRED)	
	ion Drawings*	Building Under Construitlding is complete. In BFE), AR, AR/A, AR/ ed in Item A7. In Puert Im: NAVD 1988 elow. BFE. BOOT) 2 2 2	Check the measurement used. 289.00 Feet meters 6eet meters 76et meters 78eq meters 88eq Feet meters 88eq Feet meters 96eq meters 18eq meter	
n) Lowest adjacent grade at lowest elevation of de structural support	eck or stairs, including	2	288.20 × feet meters	
SECTION D – SURVEYOR	R, ENGINEER, OR A	RCHITECT 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 Title Surveyor Company Name KCI Technologies, Inc. Address 11850 West Market Place, Suite A City Fulton Signature	State Maryland Date 05-24-2017	ZIP Code 20759 Telephone (410) 792-8086	Ext.	
Copy all pages of this Elevation Certificate and all attachm Comments (including type of equipment and location, per Lowest machinery per C2(e) is the furnace. This house is included in the living space of the house. There is a dec	ents for (1) community er C2(e), if applicable) appears to have had a	official, (2) insurance	out it has been remodeled and	

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Building Street Address (including Apt., Unit, Suite, and/o	or Bidg. No.) or P.O. Rou	te and Box No.	Policy Number:		
	ate ZIP aryland 2104	Code 46	Company NAIC Number		
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) isb) Top of bottom floor (including basement, crawlspace, or enclosure) is		feet meter			
E2. For Building Diagrams 6–9 with permanent flood op- the next higher floor (elevation C2.b in the diagrams) of the building is	enings provided in Section	on A Items 8 and/or			
E3. Attached garage (top of slab) is		feet meter			
E4. Top of platform of machinery and/or equipment servicing the building is		☐ feet ☐ meter	rs ☐ above or ☐ below the HAG.		
E5. Zone AO only: If no flood depth number is available, floodplain management ordinance? Yes			cordance with the community's certify this information in Section G.		
SECTION F - PROPERTY OWN	ER (OR OWNER'S REPI	RESENTATIVE) CE	RTIFICATION		
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 or Owner's Authorized Representative's Name					
Address	City	St	ate ZIP Code		
Signature	Date	Te	elephone		
Comments					
			Check here if attachments.		

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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, St 6730 Allview Dr	uite, and/or Bldg. No.) or P.O. Ro	ute and Box No.	Policy Number:
City Columbia		Code 046	Company NAIC Number
SECTIO	N G - COMMUNITY INFORMAT	TION (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 applica	inity's floodplain mai able item(s) and sign	nagement ordinance can complete 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.	on E for a building located in Zon	e A (without a FEMA	N-issued or community-issued BFE)
G3. The following information (Items G4–	G10) is provided for community f	loodplain managem	ent purposes.
G4. Permit Number	G5. Date Permit Issued	G6. [Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	New Construction Substant	ial Improvement	
G8. Elevation of as-built lowest floor (including of the building:	basement)		meters Datum
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	feet	meters Datum
G10. Community's design flood elevation:		feet	meters Datum
Local Official's Name	Title		
Community Name	Telepho	ne	
Signature	Date		
Comments (including type of equipment and loc	ation, per C2(e), if applicable)		
			Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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City Columbia	State Maryland	ZIP Code 21046	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.



Photo One

Photo One Caption Front View taken 05/15/2017

Clear Photo One



Photo Two

Photo Two Caption Rear View taken 05/15/2017

Clear Photo Two

BUILDING PHOTOGRAPHS

Continuation Page

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6730 Allview Dr			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 1	nree		
	Photo Tr	nree		
Photo Three Caption			Clear Photo Three	
	Photo	Four		
Photo Four Caption	Photo F	our	Clear Photo Four	

ELEVATION CERTIFICATE