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.

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding information from	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. F 8141 Main Street	Policy Number:				
1 (1997) - AN 1997	IP Code 1043	Company NAIC Number			
SECTION C – BUILDING ELEVATION INFORM	IATION (SURVEY R	EQUIRED)			
 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: Howard County 25DMT2 Vertical Datum: NAVD88 					
Indicate elevation datum used for the elevations in items a) through h) b NGVD 1929 NAVD 1988 Other/Source:	elow.				
Datum used for building elevations must be the same as that used for th	e BFE.	Check the measurement used.			
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	oor)127. 4	X feet meters			
b) Top of the next higher floor	133. 9	X feet meters			
c) Bottom of the lowest horizontal structural member (V Zones only)	·	X feet meters			
d) Attached garage (top of slab)	•	X feet meters			
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	134. 0	X feet meters			
f) Lowest adjacent (finished) grade next to building (LAG)	124. 8	X feet meters			
g) Highest adjacent (finished) grade next to building (HAG)	134. 2	x feet meters			
 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 		X feet 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 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 surveyo	r? 🗵 Yes 🗌 No	Check here if attachments.			
Certifier's Name License Number	***************************************	"ARRINIAN"			
C. Allen Paugh 475		OF MARY			
Title Surveyor		TO REAL PROPERTY OF THE PROPER			
Company Name KCI Technologies, Inc		Place Seal Thate			
Address 11850 West Market Place, Suite A	Hate				
City State Fulton Maryland	ZIP Code 20759	一			
Signature C. Markey Date 11/10/2016	Telephone (410) 792-8086				
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) C2e (lowest machinery) is furnace and hot water heater. This address is a town house style building with party walls on either side and an active stream bed at ground lever at the rear wall.					

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/o 8141 Main Street	or Bldg. No.) or P.O. Route	and Box No.	Policy Number:			
	ate ZIP Co aryland 21043		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) is						
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	Sta	ate ZIP Code			
Signature	Date	Те	lephone			
Comments			☐ Check here if attachments.			

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			
			Policy Number:			
City Ellicott City	State Maryland	ZIP Code 21043	Company NAIC Number			
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.						
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)	en from other documentation ed by law to certify elevation	that has been signed ar information. (Indicate th	nd sealed by a licensed surveyor, e source and date of the elevation			
G2. A community official completed Secti or Zone AO.	on E for a building located in	Zone A (without a FEM)	A-issued or community-issued BFE)			
G3. The following information (Items G4–	G10) is provided for commun	ity floodplain managem	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)		meters Datum			
G9. BFE or (in Zone AO) depth of flooding at t	the building site:		meters Datum			
G10. Community's design flood elevation:			meters Datum			
Local Official's Name	Title					
Community Name	Tele	phone				
Signature Date						
Comments (including type of equipment and loc	cation, per C2(e), if applicable)				
			-			
		¥				
			Check here if attachments.			

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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. 8141 Main Street		Policy Number:		
City		State	ZIP Code	Company NAIC Number
Ellicott City		Maryland	21043	

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 09/27/2016



Photo Two

Photo Two Caption Rear Left View taken 09/27/2016