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 Master Ridge LLC Policy Number:					per:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: 8221 Main St (8217 & 8225)					AIC Number:		
City Ellicott City	ity State ZIP Code						
A3. Property Desc Tax Map 025A Par		and Block Numbers, Ta d 17661/418	ax Parcel	l Number, Leg	gal Description, etc	c.)	
A4. Building Use (A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Non-Residential						
A5. Latitude/Longi	tude: Lat. N	I 39-16-03.0	Long. V	V 76-47-53.9	Horizontal	Datum: NAD 1	927 × NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being u	used to obtain flood	d insurance.	
A7. Building Diagra	am Number	6					
A8. For a building	with a crawls	space or enclosure(s):					
a) Square foo	tage of craw	Ispace or enclosure(s)		3	3518.00 sq ft		
b) Number of	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	de <u>0</u>
c) Total net an	ea of flood o	penings in A8.b		0.00 sq ir	1		
d) Engineered	flood openir	ngs? 🗌 Yes 🗵 N	٧o				
A9. For a building v	vith an attach	ned garage:					
a) Square foot	age of attach	ned garage		0.00 sq ft			
b) Number of p	permanent flo	ood openings in the at	tached g	arage within	1.0 foot above adja	acent grade 0	
c) Total net are	ea of flood op	penings in A9.b		0.00 sq	in		-
d) Engineered							
	• • • • • • • • • • • • • • • • • • • •		******				
		CTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM) INF	ORMATION	
B1. NFIP Community Name & Community Number Howard County 240044				2. County Name oward County		B3. State Maryland	
B4. Map/Panel Number	B5. 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 0095	D	11-06-2013	11-06-2		Shaded X & AE	150.0	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:							
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							

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 an 8221 Main St (8217 & 8225)	nd Box No. Policy Number:					
CityStateZIP CodeEllicott CityMaryland21043	e Company NAIC Number					
SECTION C – BUILDING ELEVATION INFORMATION	(SURVEY REQUIRED)					
C1. Building elevations are based on:						
 g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 						
and the desired service I have been a service as a servic						
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 surveyor?						
Certifier's Name License Number						
C. Allen Paugh 475 Title Surveyor Company Name KCI Technologies, Inc. Address 11830 West Market Place City State ZIP Fulton Maryland 207	Code Code					
	ephone Ext. 0) 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) The lowest machinery per C2(e) above that is installed @ the time of survey is a heating unit in the ceiling of the lowest level. Future units to be installed in the lowest level. No hot water units found @ the time of survey. 69% of the building is building diagram 6 as reported in A7. 31% of the building is building diagram 7. The rear 69% of the building is built on or supported by piers and walls. Beams support the portion of the building that is built over the stream. A party wall is under construction on the next high floor (C2b) to separate 8217 & 8225.						

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the correspondi	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/	Policy Number:				
8221 Main St (8217 & 8225)					
-	tate ZIP	Code	Company NAIC Number		
Ellicott City M	aryland 210	43			
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.			with a planetical in about an halam		
 E1. Provide elevation information for the following and of the highest adjacent grade (HAG) and the lowest adjacent grade (HAG) and the lowest adjacent grade (HAG). a) Top of bottom floor (including basement, 	djacent grade (LAG).	tes to snow whethe	r the elevation is above or below		
crawlspace, or enclosure) is		feet meter	s 🗌 above or 🗌 below the HAG.		
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		☐ feet ☐ meter	s above or below the LAG.		
E2. For Building Diagrams 6–9 with permanent flood op	enings provided in Section	on A Items 8 and/or	Q (see pages 1–2 of Instructions)		
the next higher floor (elevation C2.b in the diagrams) of the building is	erings provided in Section	feet meter			
E3. Attached garage (top of slab) is					
E4. Top of platform of machinery and/or equipment	<u></u>	feet meter	s above or below the HAG		
servicing the building is		feet meter	s 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	ERTIFICATION		
The property owner or owner's authorized representative	•				
community-issued BFE) or Zone AO must sign here. The	e statements in Sections	A, B, and E are cor	rect to the best of my knowledge.		
Property Owner or Owner's Authorized Representative's	Name				
report, cimer or cimer or taking incommunity of	Ttaillo				
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 corre	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 8221 Main St (8217 & 8225) Policy Number:					
City	State	ZIP Code	Company NAIC Number		
Ellicott City	Maryland	21043			
SECTIO	N G - COMMUNITY IN	FORMATION (OPTIONAL)			
The local official who is authorized by law or ord Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, ent	Certificate. Complete th	e community's floodplain ma e applicable item(s) and sig	anagement ordinance can complete n below. Check the measurement		
G1. The information in Section C was take engineer, or architect who is authorize data in the Comments area below.)	ed by law to certify eleva	ation information. (Indicate th	ne source and date of the elevation		
G2. A community official completed Section or Zone AO.	on E for a building locate	ed in Zone A (without a FEM	A-issued or community-issued BFE)		
G3. The following information (Items G4–	310) is provided for com	nmunity floodplain managem	nent purposes.		
G4. Permit Number	G5. Date Permit Issue		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:	basement)	fee	t meters Datum		
G9. BFE or (in Zone AO) depth of flooding at the	ne building site:	fee	t meters Datum		
G10. Community's design flood elevation:		fee	t meters Datum		
Local Official's Name		Title			
Community Name	63	Telephone			
Signature		Date			
Comments (including type of equipment and loc	ation, per C2(e), if applic	cable)			
			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, cop	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 8221 Main St (8217 & 8225)			Policy Number:
City	State Maryland	ZIP Code	Company NAIC Number
Ellicott City			

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.

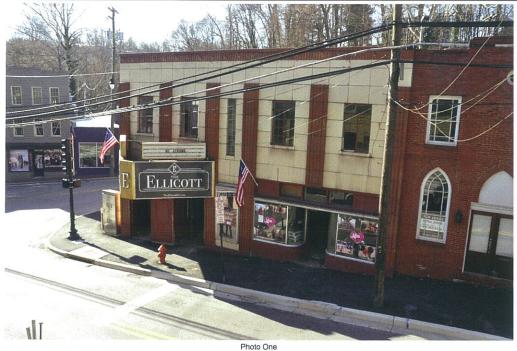


Photo One Caption Front View taken 03/19/2019

Clear Photo One



Photo Two

Photo Two Caption Rear View taken 03/19/2019

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 8221 Main St (8217 & 8225)			Policy Number:
City	State	ZIP Code	Company NAIC Number
Ellicott City	Maryland	21043	

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 side view taken 3-19-2019

Clear Photo Three

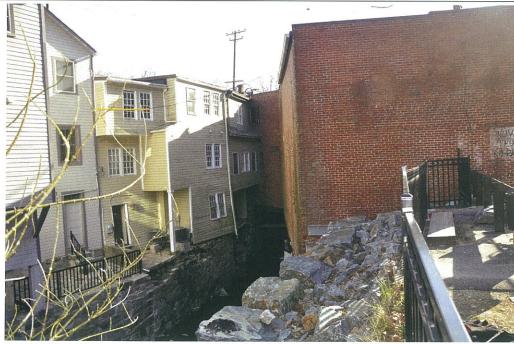


Photo Four

Photo Four Caption Right rear side view taken 3-19-2019

Clear Photo Four

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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

		15.	
IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including 8221 Main St	Apt., Unit, Suite, and/or Bldg. No.) o	or P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
Ellicott City	Maryland	21043	

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.

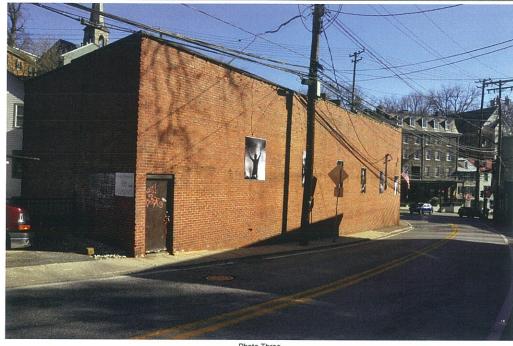


Photo Three

Photo Three Caption Left rear view taken 3-19-2019

Clear Photo Three

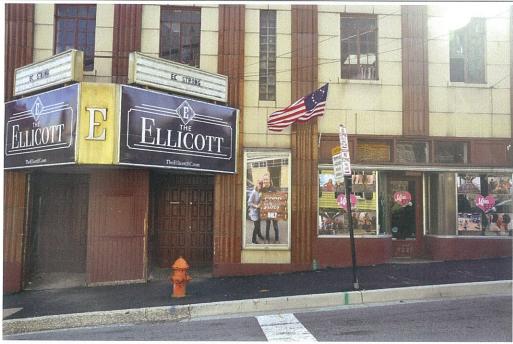


Photo Four

Photo Four Caption Front view taken 3-19-2019

Clear Photo Four