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

OMB No. 1660-0008 Expiration Date: November 30, 2022

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	RANCE COMPANY USE		
A1. Building Owner's Name Paula Copley				Policy Numl	ber:			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3110 Overhills Rd					Company N	Company NAIC Number:		
•				ZIP Code				
Bunnlevel				North Ca			28323	
' '		nd Block Numbers, Ta 5276.000 Deed Book			gal Des	cription, etc.)		
A4. Building Use (e.g., Resider	ntial, Non-Residential,	Addition	, Accessory, e	etc.) _	Residental		
A5. Latitude/Longi	tude: Lat. <u>3</u>	5° 16' 50.8"	Long7	'8° 54' 53.2"		Horizontal D	atum: 🗌 NAD 1	927 × NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being u	ised to	obtain flood ir	nsurance.	
A7. Building Diagra	am Number	5						
A8. For a building	with a crawls	space or enclosure(s):						
a) Square foo	tage of crawl	lspace or enclosure(s)				sq ft		
b) Number of	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) witl	hin 1.0 foot ab	oove adjacent gra	ade
c) Total net ar	ea of flood o	penings in A8.b		sq in	1			
d) Engineered	I flood openir	ngs? 🗌 Yes 🗌 N	No					
A9. For a building \	vith an attach	ned garage:						
a) Square foot	a) Square footage of attached garage sq ft							
b) Number of	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade							
c) Total net area of flood openings in A9.b sq in								
d) Engineered	d) Engineered flood openings?							
a, engineere need spenniger — inte								
	SE	ECTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM) INFO	RMATION	
B1. NFIP Community Name & Community Number Harnett County, 370328			B2. County Name Harnett				B3. State North Carolina	
B4. Map/Panel Number	umber Date Effective/				B8. Flood B9. Base Zone(s) (Zone		se Flood Elevation(s) ne AO, use Base Flood Depth)	
0524	К	01-05-2007	01-05-2		X	1	N/A	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ☐ FIS Profile ☐ FIRM ☐ Community Determined ☒ Other/Source: FRIS (Flood Risk Information System)								
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

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. 3110 Overhills Rd	Policy Number:					
CityStateZIP CodeBunnlevelNorth Carolina28323	Company NAIC Number					
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY F	REQUIRED)					
C1. Building elevations are based on:	ruction* Finished Construction					
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	223.4 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.						
Certifier's Name License Number L-4298	annininini.					
Hillsborough North Carolina 27278	Check here if attachments. SEAL L-4298 SURVE SU					
Signature	Ext. 3204					
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) 1. C2a is proposed FFE of new mobile home. 2. Proposed "C2h" will be the back deck.						

ELEVATION CERTIFICATE

IMP	ORTANT: In these spaces, copy the correspor	FOR INSURANCE COMPANY USE					
	lding Street Address (including Apt., Unit, Suite, a	Policy Number:					
	10 Overhills Rd						
City	y nnlevel	State North Carolina	ZIP Code 28323	Company NAIC Number			
Dui	SECTION E – BUILDING E			REQUIRED)			
		NE AO AND ZONE		,			
con	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.	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		feet mete	rs 🗌 above or 🗌 below the HAG.			
	 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet mete	rs 🗌 above or 🗌 below the LAG.			
E2.	For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in the diagrams) of the building is	d openings provided in	Section A Items 8 and/or				
E3.	Attached garage (top of slab) is			rs			
E4.	Top of platform of machinery and/or equipment servicing the building is		feet mete	rs 🗌 above or 🗌 below the HAG.			
E5.	Zone AO only: If no flood depth number is availar floodplain management ordinance? Yes			cordance with the community's certify this information in Section G.			
	SECTION F - PROPERTY OF	WNER (OR OWNER'S	REPRESENTATIVE) CI	ERTIFICATION			
The	e property owner or owner's authorized representa nmunity-issued BFE) or Zone AO must sign here.	ative who completes S The statements in Se	ections A, B, and E for Zo ctions A, B, and E are co	one A (without a FEMA-issued or rect to the best of my knowledge.			
Pro	perty Owner or Owner's Authorized Representative	ve's Name					
Add	dress	City	St	ate ZIP Code			
Sig	nature	Dat	e Te	elephone			
Cor	mments						
				Check here if attachments.			

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, St 3110 Overhills Rd	Route and Box No.	Policy Number:					
City Bunnlevel	State North Carolina	ZIP Code 28323	Company NAIC Number				
SECTIO	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 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 or Zone AO.	on 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 commun	ity floodplain manageme	ent purposes.				
G4. Permit Number	mit Number G5. Date Permit Issued G6.						
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 t	he building site:	feet	meters Datum				
G10. Community's design flood elevation:		feet	meters Datum				
Local Official's Name	Local Official's Name Title						
Community Name	Community Name Telephone						
Signature Date							
Comments (including type of equipment and location, per C2(e), if applicable)							
			Check have if all a horse				
			Check here if attachments.				

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

MPORTANT: 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 N 3110 Overhills Rd	lo. Policy Number:				
City State ZIP Code Bunnlevel North Carolina 28323	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					
Photo One Caption	Clear Photo One				
Photo Two					
Photo Two					
Photo Two Caption	Clear Photo Two				

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, S 3110 Overhills Rd	Policy Number:				
City Bunnlevel	State North Carolina	ZIP Code 28323	Company NAIC Nu	mber	
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 Thre	ee			
	Photo Three				
Photo Three Caption				Clear Photo Three	
	Photo Fou	ır			
	Photo Four				
Photo Four Caption				Clear Photo Four	