## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

## **ELEVATION CERTIFICATE**

## EMC 05-6144

O.M.B. No. 3067-0077 Expires December 31, 2005

Important: Read the instructions on pages 1 - 7.

SECT	FION A - PROPERTY OWNER INFORMA	ATION	For Insurance Company Use:
BUILDING OWNER'S NAME			Policy Number
DAVID WIGGINS			
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, an 121 AND 123 WESTCOTT LANE	d/or Bldg. No.) OR P.O. ROUTE AND BOX N	IO.	Company NAIC Number
CITY ALBANY	STATE GA	ZIP COI 31721	)E
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parc LOT 40 PINE BROOK SUBDIVISION SECTION TWO	el Number, Legal Description, etc.)		
BUILDING USE (e.g., Residential, Non-residential, Addition, Ac	cessory, etc. Use a Comments area, if necessary	2.)	
RESIDENTIAL DUPLEX			
LATITUDE/LONGITUDE (OPTIONAL) HO ( ##° - ##' - ##.##"' or ##.#####") NAD 19		URCE: GPS (Type);_ USGS Quad N	Map Other:
SECTION B - FI	LOOD INSURANCE RATE MAP (FIRM) I	NFORMATION	
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER ALBANY, CITY OF 130075	B2. COUNTY NAME DOUGHERTY		33. STATE GA
B4. MAP AND PANEL  NUMBER  13095C0085  B5. SUFFIX  B6. FIRM INDE  OCT. 5, 20		B8. FLOOD ZONE(S) A	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 198.5
B10. Indicate the source of the Base Flood Elevation (BFE) data of FIS Profile FIRM Commun B11. Indicate the elevation datum used for the BFE in B9: NGN B12. Is the building located in a Coastal Barrier Resources System	nity Determined	Other (Describe): _	No Designation Date     ■
	DING ELEVATION INFORMATION (SUI		Zarro Bedgriation Bato
	<del></del>	•	1.O-mataurii an
C1. Building elevations are based on:  Construction Drawings*	☐ Building Under Construction*	∠ Finished	d Construction
*A new Elevation Certificate will be required when construction	- ·		0 17 16 15
C2. Building Diagram Number 1 (Select the building diagram mos	st similar to the building for which this certificate i	is being completed - see pa	iges 6 and 7. If no diagram accurately
represents the building, provide a sketch or photograph.)		1500 1500	
C3. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V3	·		
Complete Items C3a-i below according to the building diagra	The state of the s		
convert the datum to that used for the BFE. Show field measure	rements and datum conversion calculation. Use	e the space provided or the	Comments area of Section D or Section
G, as appropriate, to document the datum conversion.			
Datum NGVD29 Conversion/Comments			
Elevation reference mark used RM 85-1 Does the elevation re	ference mark used appear on the FIRM? 🔲	Yes 🗌 No	
o a) Top of bottom floor (including basement or enclosure)	<u>200</u> . <u>4</u> ft.(m)		ORG
o b) Top of next higher floor	<u>NA</u> _ft.(m)	Sea	CACASTER
o c) Bottom of lowest horizontal structural member (V zones o	• •	ssed //	G REGISTERED Y
o d) Attached garage (top of slab)	<u>NA</u> ft.(m)	d d D   //	NO. 2896
o e) Lowest elevation of machinery and/or equipment		豆 3	raction
servicing the building (Describe in a Commen	ts area) <u>200</u> . <u>2</u> ft.(m)	lag lb	PROFESSIONAL
o f) Lowest adjacent (finished) grade (LAG)	200 . 0_ft.(m)	\\ \\ \\	7,12-5-050 SURVE
o g) Highest adjacent (finished) grade (EAG)	200. 2_ft.(m)	sinse /	COSURVED
o h) No. of permanent openings (flood vents) within 1 ft. abov		License Number, Embossed Seal, Signature, and Date	CARY F. REED
o i) Total area of all permanent openings (flood vents) in C3.h		_: <del></del>	
	RVEYOR, ENGINEER, OR ARCHITECT		
This certification is to be signed and sealed by a land surve I certify that the information in Sections A, B, and C on this			
I understand that any false statement may be punishable b		, Section 1001.	
CERTIFIER'S NAME CARY F. REED		LICENSE NUMBER G	A RLS No. 2896
TITLE SURVEY DIRECTOR	COMPANY NAME	EMC ENGINEERING SEF	RVICES, INC.
ADDRESS	CITY	STATE	
2334 LAKE PARK DRIVE	ALBANY	GA	31707
SIGNATURE Can 7 Room	DATE DECEMBER 5, 200	TELEPI 5 229-435	

BUILDING STREET ADDRESS (Including Ant. )			<del></del> -		For Insurance Company Use:	
BUILDING STREET ADDRESS (Including Apt., U 121 & 123 WESTCOTT LANE	ипт, ъите, and/or вюд. No.) OR P.O. ROUTE AND 	) ROX NO.			Policy Number	
CITY ALBANY	STA GA	ATE	ZIP 317	CODE	Company NAIC Number	
<del></del>	ON D - SURVEYOR, ENGINEER, OR	ARCHITECT (			Participant Commission	
Copy both sides of this Elevation Certificate					·	
COMMENTS SECTION C, ITEM C3e: ELEVATION SH			-			
SITE BENICHMARK SET IS A DAIL DOAD	CDIVE CET IN THE CENTED INF OF MIC	TOOTI AND	AT THE DOODEDT	VI NE DETAILE	NI 070 000 40 FLEW 400 00	
SITE BENCHMARK SET IS A RAILROAD	OF IN THE CENTERLINE OF WES		AT THE PROPERT	Y LINE BETWEE	N LOTS 39& 40 , ELEV. = 199.28.	
CECTION E DUIL DING EL	EVATION INCODING TON (OUR)	1105			Check here if attachments	
	EVATION INFORMATION (SURVEY					
For Zone AO and Zone A (without BFE), comp Section C must be completed.	Diete items E1 through E4. If the Elevation C	ertificate is inter	nded for use as supp	oorting intormation	tor a LOMA or LOMR-F,	
E1. Building Diagram Number _(Select the burepresents the building, provide a sketch		or which this cert	ificate is being comp	oleted – see pages	6 and 7. If no diagram accurately	
E2. The top of the bottom floor (including base natural grade, if available).	ment or enclosure) of the building is	ft.(m)in.(cm)	above or be	elow (check one) (	he highest adjacent grade. (Use	
E3. For Building Diagrams 6-8 with openings ( grade. Complete items C3.h and C3.i on	front of form.					
E4. The top of the platform of machinery and/o natural grade, if available).	or equipment servicing the building is	ft.(m)in.(cm)	above or be	elow (check one) t	he highest adjacent grade. (Use	
E5. For Zone AO only: If no flood depth numb	er is available, is the top of the bottom floor	elevated in acco	rdance with the com	munity's floodplai	n management ordinance?	
	cal official must certify this information in Sec		TOTAL ATIVE OF	'DTIEIO ATION		
The property owner or owner's authorized re	ON F - PROPERTY OWNER (OR OWN  presentative who completes Sections A. B.				It a EEMA issued or community	
issued BFE) or Zone AO must sign here. The	ne statements in Sections A, B, C, and E are	correct to the b	est of my knowledge	). 	it at Livin-1550ed of Continuinty-	
PROPERTY OWNER'S OR OWNER'S AU						
ADDRESS		CITY	<del>-</del> ·	STATE	ZIP CODE	
SIGNATURE						
		DATE		TELEPH	ONE	
COMMENTS						
·						
		<u> </u>			Check here if attachments	
	SECTION G - COMMUNITY					
The local official who is authorized by law or or Certificate. Complete the applicable item(s) are	nd sign below.			-	, ,	
G1.  The information in Section C was take or local law to certify elevation information.	n from other documentation that has been s ation. (Indicate the source and date of the el				r, or architect who is authorized by s	
G2. 🗌 A community official completed Sectio	n E for a building located in Zone A (without	a FEMA-issued	l or community-issue		О.	
G3.   The following information (Items G4-G	<ol><li>is provided for community floodplain man</li></ol>	agement purpos	ses.			
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		G6. DATE CERTIFI	CATE OF COMPLIA	NCE/OCCUPANCY ISSUED	
G7. This permit has been issued for:	New Construction Substantial Imp	orovement	·			
G8. Elevation of as-built lowest floor (including				_ft.(m)	Datum:	
G9. BFE or (in Zone AO) depth of flooding at the	ne building site is:			_ ft.(m)	Datum:	
LOCAL OFFICIAL'S NAME		TIT	LE			
COMMUNITY NAME		TEL	LEPHONE			
SIGNATURE		DA	TE			
COMMENTS						
					<del></del>	
					☐ Check here if attachments	