U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

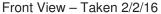
SECTION A - PROPERTY INFORMATION	FOR INSURANCE COMPANY USE					
A1. Building Owner's Name Marie Alex Desir	Policy Number:					
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 515 Oakview Road	Company NAIC Number:					
City Decatur State Ga ZIP Code 30030						
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Part of Lot 7, Block A, Dekalb County Fair Assoc. S/D; LL 214, 15 TH Dist; Dekalb Co. TP # 1521404013						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat. 33.7624 Long84.2989 Horizontal Datum: NAD 1927 NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 7 A8. For a building with a crawlspace or enclosure(s):						
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFO	DRMATION					
B1. NFIP Community Name & Community Number City of Decatur - No. 130065 B2. County Name Dekalb	B3. State Georgia					
	8. Flood B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 976.7					
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: 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						
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
C1. Building elevations are based on: C2. 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: Opus Static Solutions Vertical Datum: NAVD 88 Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 NAVD 1988 Other/Source:						
Datum used for building elevations must be the same as that used for the BFE.	Check the measurement used.					
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	☑ feet ☐ meters ☑ 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 dinformation. I certify that the information on this Certificate represents my best efforts to interpret the data at understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section Check here if comments are provided on back of form. Were latitude and longitude in Section Application of the comments are provided on back of form. Were latitude and longitude in Section Application of the comments are provided on back of form. Were latitude and longitude in Section Application of the comments are provided on back of form. Were latitude and longitude in Section Application of the comments are provided on back of form. Were latitude and longitude in Section Application of the comments are provided on back of form. Were latitude and longitude in Section Application of the comments are provided on back of form. Were latitude and longitude in Section Application of the comments are provided on back of form. Were latitude and longitude in Section Application of the comments are provided on back of form. Were latitude and longitude in Section Application of the comments are provided on back of form. Were latitude and longitude in Section Application of the comments are provided on back of form. Were latitude and longitude in Section Application of the comments are provided on back of form. Were latitude and longitude in Section Application of the comments are provided on back of form. Were latitude and longitude in Section Application of the comments are provided on back of form. Were latitude and longitude in Section Application of the comments are provided on back of form. Were latitude and longitude in Section Application of the comments are provided on back of form. Were latitude and longitude in Section Application of the comments are provided on back of form. Were latitude and longitude in Section Application of the comments are provided on back of form. Were latitu	vailable. tion 1001. provided by a No S#3174 0043					

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IMPORTANT: In these spaces, co	ection A.	FOR INSURANCE COMPANY US	SE	
Building Street Address (including Apt., 515 Oakview Road	ox No.	Policy Number:		
City Decatur	State Ga ZII	P Code 30030	Company NAIC Number:	
SECTION	D – SURVEYOR, ENGINEER, OR ARCHITE	CT CERTIFICATION (CONTINUED)	
Copy both sides of this Elevation Certifi	cate for (1) community official, (2) insurance agent	company, and (3) building	owner.	
Comments Type of Machinery is an A	C Unit			
Signature	Date 2/	3/16		
Olgitatal o)			
SECTION E BUILDING ELE	ATION INFORMATION (SURVEY NOT REC	QUIRED) FOR ZONE A	O AND ZONE A (WITHOUT BE	-E)
 and C. For Items E1-E4, use natural g E1. Provide elevation information for grade (HAG) and the lowest adja a) Top of bottom floor (including b) Top of bottom floor (including b) E2. For Building Diagrams 6-9 with p (elevation C2.b in the diagrams) E3. Attached garage (top of slab) is 	pasement, crawlspace, or enclosure) ispasement, crawlspace, or enclosure) isermanent flood openings provided in Section A Ite of the building is feet meter above or feet above or	n Puerto Rico only, enter methow whether the elevation	neters. is above or below the highest adjaces above or below the HAG. above or below the HAG. below the LAG. 8–9 of Instructions), the next higher of the HAG.	cent
	/or equipment servicing the building is			68
	number is available, is the top of the bottom floor e Unknown. The local official must certify this infor		n the community's floodplain manage	ement
SECTION	F – PROPERTY OWNER (OR OWNER'S RI	EPRESENTATIVE) CEI	RTIFICATION	
	ed representative who completes Sections A, B, a nents in Sections A, B, and E are correct to the bes		FEMA-issued or community-issued	BFE)
Property Owner's or Owner's Authorize	d Representative's Name			
Address	City	Stat	te ZIP Code	
Signature	Date	Tele	ephone	
Comments				
			☐ Check here if atta	chmen
	SECTION G - COMMUNITY INFORM	ATION (OPTIONAL)		
he local official who is authorized by law fithis Elevation Certificate. Complete the	or ordinance to administer the community's floodpla applicable item(s) and sign below. Check the meas	in management ordinance	can complete Sections A, B, C (or E)), and (
G1. The information in Section C v is authorized by law to certify a	vas taken from other documentation that has been elevation information. (Indicate the source and dat	signed and sealed by a lic e of the elevation data in tl	ensed surveyor, engineer, or archite he Comments area below.)	ect who
32. A community official complete	d Section E for a building located in Zone A (withou	ut a FEMA-issued or comm	nunity-issued BFE) or Zone AO.	
G3. The following information (Iten	ns G4–G10) is provided for community floodplain n	nanagement purposes.		
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of C	Compliance/Occupancy Issued	
G7. This permit has been issued for:	☐ New Construction ☐ Substantial Impl	ovement		
38. Elevation of as-built lowest floor (in	cluding basement) of the building:	☐ feet ☐ meters	Datum	
39. BFE or (in Zone AO) depth of flood	ing at the building site:	☐ feet ☐ meters	Datum	
G10. Community's design flood elevation	n:	☐ feet ☐ meters	Datum	
Local Official's Name	Title			
Community Name	Tele	phone		
Signature	Date			
Comments		- H		
			☐ Check here if atta	chmer

Building Photographs See Instructions for Item A6.

IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 515 Oakview Road			Policy Number:
City Decatur	State Ga	ZIP Code 30030	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.





Rear View - Taken 2/2/16

