**JOB** #04-337

## FEDERAL EMERGENCY MANAGEMENT AGENCY

NATIONAL FLOOD INSURANCE PROGRAM

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

**ELEVATION CERTIFICATE** 

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION				For Insurance Company Use;
BUILDING OWNER'S NAME	ECEIVE			Policy Number
DENA S. HALE	The second secon			
610 BELLE ISLE AVENUE	APR - 1 2004			Company NAIC Number
CITY BELLEAIR BEACH		STATE FLORIDA	ZIP (	CODE <b>33786</b>
PROPERTY DESCRIPTION (Lot and Block Numbers	Tax Parcel Number, Lega	Description, etc.)		
LOT 69. BELLE TILE				
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL				
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: TI GPS (Type):				
□ NAD 1927 □ NAD 1983 □ USGS Quad Map □ Other:				
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION				
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER	B2. COUNTY NAM	ΛE		B3. STATE
BELLEAIR BEACH 12508	9 PINELLAS			FLORIDA
B4. MAP AND PANEL NUMBER B5. SUFFIX B6. FIRM	B7	7. FIRM PANEL		B9. BASE FLOOD ELEVATION(S)
		TVE/REVISED DATE	B8. FLOOD ZONE(S)	
B10. Indicate the source of the Base Flood Elevation (BFE) da		din 89	NB	10,0
☐ FIS Profile ☐ Community Determined ☐ Other (Describe):				
B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe):				
B12. Is the building located in a Coastal Barrier Resources Sy	stem (CBRS) area or Otherw	ise Protected Area (OPA)	? Yes No	Designation Date
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)				
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. Building Diagram Number [ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram				
accurately represents the building, provide a sketch or photograph.)  C3. 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 C3a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in				
Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of				
Section D or Section G, as appropriate, to document the datum conversion.				
Datum Conversion/Comments				
Elevation reference mark usedDoes the elevation	reference mark used appear	on the FIRM? Yes	☐ No	EDEDEDICK C. DAGUNANA
o a) Top of bottom floor (including basement or enclosure	e) <u>7</u>	<b>.9<u>5</u>ft.(m)</b>	sal,	FREDERICK S. BACHMANN LS # 5174
o b) Top of next higher floor	17	//_Zt.(m)	, S	
o c) Bottom of lowest horizontal structural member (V zo	nes only)	<u>U/A</u> it.(m)	oossed Seal, Date	Democratic
o d) Attached garage (top of slab)				20 20 20 V
o e) Lowest elevation of machinery and/or equipment				
servicing the building (Describe in a Comments are	$A/C$ $\frac{7}{2}$	. 3/ft.(m)	umb	129
o f) Lowest adjacent (finished) grade (LAG)	_5.5	Σπ.(m) 7	License Number, Emb Signature, and	my of
<ul> <li>o g) Highest adjacent (finished) grade (HAG)</li> <li>o h) No. of permanent openings (flood vents) within 1 ft.</li> </ul>		<b>7.</b>	Sens	
o i) Total area of all permanent openings (flood vents) in			ă	
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION  This certification is to be signed and seeded by a land support, or gineer, or architect authorized by land support and seeded by a land support, or gineer, or architect authorized by land signed and seeded by a land support or gineer, or architect authorized by land signed and seeded by a land support or gineer, or architect authorized by land signed and seeded by a land support or gineer.				
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 in Sections A, B, and C 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 FREDERICK S. BACHMANN LICENSE NUMBER PLS 5174				
TITLE DOCESOIONAL LAND CURVEYOR	DDEG	COURTE	SUBJECT CONTRACTOR	
TITLE PROFESSIONAL LAND SURVEYOR AND MA	NYYEK		SURVEY PROS, INC	
ADDRESS 1425 GULF TO BAY BOULEVARD		CI EADWATED	STATE	
		DATE 3/10/	FL TELET	33755 PHONE
SIGNATURE Trudent & Bashroom		3/29/0		727-449-9010
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