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	R INSURANCE COMPANY USE		
A1. Building Owner's Name Policy Number: Robert Palmer and Regina Sotomayor				
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No Box No. 621 Belle Isle Avenue) or P.O. Route and Con	npany NAIC Number.		
City State		Code		
Belleair Beach Floris	<u> </u>	86		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Lot 62 less E. 5' & N. 5' of Lot 61, BELLE ISLE	Legal Description, etc.)			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accesso	y, etc.) Residential			
A5. Latitude/Longitude: Lat. 27d 56' 00.30" N. Long. 82d 49' 52.	47" W. Horizontal Datum.] NAD 1927 🗵 NAD 1983		
A6. Attach at least 2 photographs of the building if the Certificate is being	g used to obtain flood insurance			
A7. Building Diagram Number 3				
A8. For a building with a crawlspace or enclosure(s)				
 a) Square footage of crawlspace or enclosure(s) 	N/A sq ft			
b) Number of permanent flood openings in the crawlspace or enclo	sure(s) within 1.0 foot above adja	icent grade N/A		
c) Total net area of flood openings in A8.b N/A s	q in	the state of the s		
d) Engineered flood openings? [] Yes 🗵 No				
A9. For a building with an attached garage:				
a) Square footage of attached garage 1018.00 s	a ft			
b) Number of permanent flood openings in the attached garage with		. Niča		
N 44-5104 1-54 1-550 - 2-8 1-74		Neys.		
to an interest contract of the	sd iu			
d) Engineered flood openings? Yes No				
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION				
	nty Name	B3. State		
Belleair Beach 125089 Pinellas		Florida		
B4. Map/Panel B5. Suffix B6. FIRM Index B7. FIRM Panel Effective/Revised Date	Zone(s) (Zone	Flood Elevation(s) AO, use Base Flood Depth)		
12103C 0112 G 09-03-2003 09-03-2003	AE	10.0'		
B10. Indicate the source of the Base Flood Elevation (BFE) data or bas	e flood depth entered in Item B9:			
☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other/Source:				
B11. Indicate elevation datum used for BFE in Item B9: NGVD 192	NAVD 1988 Other/s	Source:		
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Tyes X No				
Personal States				
Lesignation Date: LERS LE CPA				

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MPORTANT: In these spaces, copy the corresponding information from Section A.		FOR INSURANCE COMPANY US		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 621 Belle Isle Avenue			Policy Numb	per:
ity elleair Beach	State Florida	ZIP Code 33786	Company N.	AIC Number
SECTION C - BU	JILDING ELEVATION INF	ORMATION (SURVEY)	REQUIRED)	
	Construction Drawings*	Building Under Const		Finished Construction
*A new Elevation Certificate will be requ	_			maned Constituction
 Elevations – Zones A1–A30, AE, AH, A Complete Items C2.a–h below according Benchmark Utilized: Harris F 	(with BFE), VE, V1–V30, V ng to the building diagram sp	(with BFE), AR, AR/A, Al pecified in Item A7. In Pue	R/AE, AR/A1-A erto Rico only, e	30, AR/AH, AR/AO. nter meters.
		Datum: NAVD 1988		
Indicate elevation datum used for the el NGVD 1929 ☒ NAVD 1988		n) below.		
Datum used for building elevations mus	it be the same as that used:	for the REE		
			Check the	e measurement used.
 a) Top of bottom floor (including basen 	nent, crawlspace, or enclosu	ire floor)	6.0 🗙 6	eet [] meters
b) Top of the next higher floor		(verve) a profession and a series of a	10.6	eet [] meters
 c) Bottom of the lowest horizontal struct 	tural member (V Zones only	<i>(</i>)	N/A 🔯 te	eet [] meters
d) Attached garage (top of slab)			N/A ⊠ fe	eet meters
i.owest elevation of machinery or eq (Describe type of equipment and loc	uipment servicing the buildination in Comments)	ng	7.5 × fe	
f) Lowest adjacent (finished) grade ne:	xt to building (LAG)		5.7 X fo	et meters
g) Highest adjacent (finished) grade ne			6.0 🔯 fe	
h) Lowest adjacent grade at lowest ele- structural support	=	uding	N/A 🗵 fa	-
SECTION D - S	URVEYOR, ENGINEER, O	D ADCUITEDT OFFITE		
This certification is to be signed and sealed to certify that the information on this Certificate statement may be purishable by fine or impr	oy a land surveyor, engineer	, or architect authorized by	and the second	elevation information. and that any false
Vere latitude and longitude in Section A pro-		marks.	☐ Check	here if attachments.
Cartifier's Name	License Numt	oer		here if attachments. RD D. MUR. RT 1F1 No. 5333
dward D. Murphy	#5333		Tilli.	RD D. MUD
itle	A Prince and the property of the second seco		I'II'OMA	TIFICA
rofessional Land Surveyor			3 4000	
Company Name	The second secon			No. 5333
Aurphy's Land Surveying, Inc.			REG	£ 2
ddress 760 11th Avenue N.			E 80000	STATE OF
	****			PATE OF CORIDA OF
ity t. Petersburg	State Florida	ZIP Code 33710	CALL RE	PATE OF CORIDA SA
ignature Quas D leur	Date 04-22-2020	Telephone (727) 347-8740	Ext.	
opy all pages of this Elevation Certificate and	all attachments for (1) comm	, ,	agent/company	, and (3) building owner
omments (including type of equipment and I 2e = A/C - East side of house			T S	
	manufacture de la companya de la com			

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the correspor	iding informatio	n from Section A.	FOR INSUF	RANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, a 621 Belle Isie Avenue	ind/or Bldg. No.) o	or P.O. Route and Box N	lo. Policy Numi	per:
City Belleair Beach	State Florida	ZIP Code 33786	Company N	AIC Number
SECTION E – BUILDING E FOR ZO	LEVATION INF	ORMATION (SURVEY NE A (WITHOUT BFE	NOT REQUIRED)
For Zones AO and A (without BFE), complete Items E complete Sections A, B, and C. For Items E1–E4, use enter meters.	e natural grade, if	available. Check the me	easurement used. In	Puerto Rico only,
 E1. Provide elevation information for the following ar the highest adjacent grade (HAG) and the lowes a) Top of bottom floor (including basement. 	nd check the appr it adjacent grade i	opriate boxes to show w (LAG).	hether the elevation	n is above or below
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		[] feet []	meters above	or Delow the HAG.
crawispace, or enclosure) is F2. For Building Diagrams 6-9 with permanent flood	Conceines espeide	[] feet []		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	openings provide	ed in Section Alitems 8 a		in a contraction of the instruction of the instruct
E3. Attached garage (top of slab) is		[] feet []		or below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is		[feet []	meters above	or below the HAG.
E5. Zone AO only: If no flood depth number is availa floodplain management ordinance? Yes [ble, is the top of t	he bottom floor elevated lown. The local official	I in accordance with must certify this info	the community's ormation in Section G.
SECTION F - PROPERTY OV	VNER (OR OWN	ER'S REPRESENTATIV	(E) CERTIFICATIO	N
The property owner or owner's authorized representationmunity-issued BFE) or Zone AO must sign here. Property Owner or Owner's Authorized Representative	The statements in	Sections A. B. and E a	re correct to the bea	st of my knowledge.
Address		City	State	ZIP Code
Signature		Date	Telephone	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Comments	To children and the control of the c		VP F Markey Street Copyrights and the household consequences	
				k here if attachments.

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the o			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Un 621 Belle Isle Avenue	it, Suite, and/or Bldg. No.)	or P.O. Route and Box No	e. Policy Number:
City		200 0	
Belleair Beach	State Florida	ZIP Code 33786	Company NAIC Number
	CTION G - COMMUNITY		A1)
The local official who is authorized by law of Sections A, B, C (or E), and G of this Elevations of the Bernard In Items G8–G10. In Puerto Rico only	ation Certificate. Complete r, enter meters.	the applicable item(s) and	d sign below. Check the measurement
G1: The information in Section C was engineer, or architect who is auth data in the Comments area below	iorized by law to certify ele	ntation that has been sign evation information. (Indica	ned and sealed by a licensed surveyor, ate the source and date of the elevation
G2. A community official completed S or Zone AO.	Section E for a building loca	ated in Zone A (without a	FEMA-issued or community-issued BFE)
G3. The following information (Items	G4-G10) is provided for co	ommunity floodplain mana	agement purposes.
G4. Permit Number	G5. Date Permit Iss	ued	36. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:] Substantial Improvemen	ıt
G8. Elevation of as-built lowest floor (inclu- of the building)	ding basement) ——		feet meters Datum
G9. BFE or (in Zone AO) depth of flooding	at the building site:		feet meters Datum
G10. Community's design flood elevation	William militar		feet meters
Local Official's Name	7.17	Title	
Community Name		Telephone	
Signature	Conference on the second and advantage of the second of th	Date	
Comments (including type of equipment and	l location, per C2(e), if app	blicable)	
			Check here if attachments,
and the same of th			

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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IMPORTANT: In these spaces, co	py the corresponding information	on 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. 621 Belle Isle Avenue			Policy Number:	
City	State	ZIP Code	Company NAIC Number	
Belleair Beach	Florida	33786		

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 Caption FRONT VIEW

Clear Photo One



Photo Tw

Photo Two Caption REAR VIEW

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 621 Belle Isle Avenue		
Florida	33786	
	Apt., Unit, Suite, and/or Bldg. No.) State	Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. State ZIP Code

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 Caption SIDE VIEW

Clear Photo Three



Photo Four Caption SIDE VIEW

Clear Photo Four