#234254

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

FI EVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires July 31, 2002

ELEVATION CERTIFICATE	Expires July 31, 2002					
Important: Read the instructions on pages 4. 7	6-27-02					
CANADA CONTRACTOR OF THE PROPERTY OF THE PROPE	TUS-13					
Pay and Danham W. I. J.	or Insurance Company Use:					
BUILDING STREET ADDRESS (Including April Unit Suite and/or Pide No.) CO. D. C. T. C.						
903 Harbor Drive	Company NAIC Number					
STATE	ZIP CODE					
PROPERTY DESCRIPTION (1 of and D)	33786					
Lot 30, Blcok "A", Unit "C", Belleair Beach Sub, Plat Book BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory etc. Use a Commontary of the Commontary of t	and the state of t					
Residential Residential	25, Pages 3-4					
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE IN THE						
(##" - ## ##. ##" or ##. #####")	Other:					
	Other					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME B3. S	STATE					
B4 MAP AND PANEL R5 SUCCES Pinnellas County	Florida					
NUMBER DATE FEFECTIVE/PEN/ISED DATE B8. FLOOD B	9. BASE FLOOD ELEVATION(S)					
1 2 3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(Zone AO, use depth of flooding)					
To. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Ro	10					
FIS Profile XX FIRM Community Determined Other (Describe):						
B11. Indicate the elevation datum used for the BFE in B9: XX NGVD 1929 NAVD 1988 Other (Describe): B12. Is the building located in a Coastal Barrier Resources System (CRRS)	be):					
Designation Date:	PA)? LIYes [XXNo					
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on:						
new Elevation Certificate will be required when and the second delicity	XXFinished Construction					
pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)	icate is being completed - see					
), AR/AH AR/AO					
the datum used for the BFF in Section B. copyort the detail in them 62. State the datum used. It	f the datum is different from					
calculation. Use the space provided or the Comments area of Section Description.						
Datum NGVD 29 Conversion/Comments 27 Conversion Comments 29 Conversion Conversion Comments 29 Conversion Conve	cument the datum conversion.					
Elevation reference mark used N/A Door the elevation	the EIDMAN I IN ATTIME					
D h) Top of part higher floor	the FIRM? Yes XX No					
□ c) Bottom of lowest horizontal structural member (V zones only) □ d) Attached zones (N/A) = ft (m)						
□ c) Bottom of lowest horizontal structural member (V zones only) □ d) Attached garage (top of slab) □ e) Lowest elevation of machinery and/or equipment Solution of lowest horizontal structural member (V zones only) N/A ft.(m)	13 HA 102					
e) Lowest elevation of machinery and/or equipment						
servicing the building (Describe in a Comments area.) 10 • 1 ft.(m)						
D f) Lowest adjacent (finished) grade (LAG) D g) Highest adjacent (finished) grade (LAG) D g) Highest adjacent (finished) grade (LAG) D g) Highest adjacent (finished) grade (LAG)	1/00					
g) Highest adjacent (finished) grade (HAG) h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 10	10					
i) Total area of all permanent openings (flood vents) within 1 ft. above adjacent grade 10						
200 sq. In-sc. m						
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION						
The section of the Stuffell and sealed by a land our terre	elevation information					
I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the control of the statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1	data available.					
CTIFIER'S NAME Family Solime of Imprisonment under 18 U.S. Code, Section 1	001.					
Ailly J. Robertson LICENSE NUMBER 4573						
ADURESS AND AVONUE SWITT 200 CITY COMPANY NAME ACTUAL TO STATE AND AVONUE SWITT 200 CITY						
Aboress 3611 Swann Avenue, Suite 200 CITY STATE	pping, Inc.					

DATE

Suite

200

6-7-02

CITY Tampa

STATE Florida

(813) 879-23 ELEPHONE

IMPORTANT: In these sp	paces, copy the corr	esponding information	n from Section	۸.	For Insurance Company Use:
BUILDING STREET ADDRES		Suite, and/or Bldg. No.) Of	R P.O. ROUTE AN	ND BOX NO.	Policy Number
- 903 Harbor Dr		STATE		ZIP CODE	Company NAIC Number
Belleair Beac		Florida		33786	-
		OR, ENGINEER, OR A			
Copy both sides of this Ele	vation Certificate for ((1) community official, (2	2) insurance age	ent/company, and (3	B) building owner.
COMMENTS Secti	on C3.e. 10	1 is elevation	on of ole	******	pad with A/C unit
		L 10 CLEVAOL	or ere	water conc.	pad with A/C unit
			-		
SECTION E - BUILDIN	C EL EVATION INFO	DIATION (CUDVEY N	OT DECLUSES		Check here if attachmen
For Zone AO and Zone A (w	ithout REE) complete	AMATION (SURVET N	WHE CLOSE	FOR ZONE AO A	ND ZONE A (WITHOUT BFE)
For Zone AO and Zone A (winformation for a LOMA or Lo	OMR-F. Section C mu	s items £1, through £4.	if the Elevation	Certificate is inten	ded for use as supporting
E1. Building Diagram Number	er (Select the I	building diagram most s	imilar to the bui	ding for which this	certificate is being completed
see pages 6 and 7. If no	o diagram accurately	represents the building,	, provide a sketo	or photograph:)	serundate is being completed =
E2. The top of the bottom flo	oor (including baseme	ent or enclosure) of the b	building is L		n.(cm) above or below
(check one) the highest	adjacent grade. (Use	natural grade, if availa	ıble.)		
E3. For Building Diagrams 6	-8 with openings (see	e page 7), the next higher t adjacent grade. Comp	er floor or elevat	ed floor (elevation b	o) of the building is
E4. For Zone AO only: If no	flood depth number i	s available, is the top of	f the bottom floa	and US.I on front of	form.
floodplain management	ordinance? [Yes	_ No _ Unknow	n. The local off	icial must certify this	s information in Section G.
SE	CTION F - PROPERT	TY OWNER (OR OWNE	R'S REPRESE	NTATIVE) CERTIF	ICATION
The property owner or owner	er's authorized repres	entative who completes	Sections A, B,	C (Items C3.h and	C3.i only), and E for Zone A
(without a FEMA-issued or o	community-issued BF	E) or Zone AO must sig	yn here. <i>The sta</i>	tements in Section	s A, B, C, and E are correct to
the best of my knowledge. PROPERTY OWNER'S OR OV	WNER'S ALITHORIZED	PEPPESENTATIVE'S NA	ME		
					000000000000000000000000000000000000000
ADDRESS		CIT	ľY	STATE	ZIP CODE
SIGNATURE		DA	TE	TELEPHO	ONE
COMMENTS					
					Check here if attachments
		ON G - COMMUNITY IN			
The local official who is autho	rized by law or ordina	ance to administer the c	ommunity's floo	dplain managemen	t ordinance can complete
Sections A, B, C (or E), and G 61 The information in Se	of this Elevation Cer action C was taken fro	ntiticate. Complete the s	applicable item(s) and sign below.	
engineer, or architec	t who is authorized by	v state or local law to ce	ertify elevation in	signed and emboss	ed by a licensed surveyor, e the source and date of the
elevation data in the	Comments area belo	ow.)			
32. _ A community official	completed Section E	for a building located in	Zone A (withou	it a FEMA-issued or	community-issued BFE) or
Zone AO.	stion (Itama O4 O0) is	a managara en en en en			
33. The following informa					
G4. PERMIT NUMBER	G5. DATE PE	RMIT ISSUED	G6. DAT	E CERTIFICATE OF	COMPLIANCE/OCCUPANCY
67. This permit has been issu	red for: New C	onstruction 1 LSubs		mant	
88. Elevation of as-built lowes	st floor (including bas	ement) of the building is	s:		_ ft.(m) Datum:
39. BFE or (in Zone AO) dept					_ ft.(m) Datum:
LOCAL OFFICIAL'S NAME			TITLE		
COMMUNITY NAME			TELEPHONE		
30-ACC (2004) (1904) (1904) (1904) (1904) (1904) (1904) (1904) (1904) (1904) (1904) (1904) (1904) (1904) (1904)				2	
SIGNATURE			DATE		
COMMENTS			<u> </u>		
				ı	Check here if attachments
EMA E 04 04 111 05					
EMA Form 81-31, JUL 00				REPLAC	ES ALL PREVIOUS EDITIONS