U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

### **ELEVATION CERTIFICATE**

446944

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 ROBERT & LORETTA EVANS	Policy Number:			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 109 15 <sup>th</sup> STREET	Company NAIC Number.			
City BELLEAIR BEACH State FL ZIP Code 34683				
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT E, BLOCK 16, BELLEAIR BEACH UNIT D, PUBLIC RECORDS OF PINELLAS COUNTY, FLORIDA.				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL  A5. Latitude/Longitude: Lat. 27*-55'-15.7" Long82*- 50'-33.3" Horizontal Datur  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):  A9. For a building with an attach at Square footage of crawlspace or enclosure(s) 1,786 sq ft a) Square footage of attach at Square	ached garage <u>N/A</u> sq ft  It flood openings in the attached garage adjacent grade <u>N/A</u> d openings in A9.b <u>N/A</u> sq in enings?			
B4. Map/Panel Number 12103C/0112  B5. Suffix G  B6. FIRM Index Date 08/18/09  B7. FIRM Panel Effective/Revised Date 09/03/03  B8. Flood Zone(s) "AE"	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)			
FIS Profile FISM Community Determined Other/Source: County Engineer  B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:  12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Designation Date: N/A  SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)				
C1. Building elevations are based on:  Construction Drawings* Building Under 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 below according to the building diagram specified in Item A7. In Puerlo Rico only, enter meters.  Benchmark Utilized: HALL-A  Vertical Datum: NAVD 88  Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929 NAVD 1988 Catum used for building elevations must be the same as that used for the BFE.				
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)	☑ feet ☐ meters			
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  N/A.	□ meters     □ meters     □ meters     □ meters     □ 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 certify elevatinformation. I certify that the information 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.  Check here if comments are provided on back of form.  Check here if attachments.  Were latitude and longitude in Section A provided by licensed land surveyor?  Yes No  Certifier's Name MOHAMMAD B. FAR	ion			
Title Prof.Land Surveyor Company Name MOHAMMAD B. FAR	STATE OF STATE			
Address 813 MEADOWNEW PLACE City TRINITY State FL ZIP Code 34655	SUCH SOUND STORES			
Signature 10. 5545 B. Fu Date 02/12/16 Telephone 727-375-1740	SURVEYOR SURVEYOR			

ELEVATION CERTIFICATE, page 2 IMPORTANT: In these spaces, copy the corresponding information 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. Policy Number. 109 15th STREET City BELLEAIR BEACH State FL ZIP Code 33786 Company NAIC Number. SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED) Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner. Comments A/C = AIR CONDITIONING Signature Date 02/12/16 TORIDA SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is ☐ feet ☐ meters ☐ above or ☐ below the LAG. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is ☐ feet ☐ meters ☐ above or ☐ below the HAG. E3. Attached garage (top of slab) is 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 available, is the top of the bottom floor elevated in accordance with the community's floodplain management SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge. roperty Owner's or Owner's Authorized Representative's Name Address City State ZIP Code Signature Date Telephone Comments Check here if attachments. SECTION G - COMMUNITY INFORMATION (OPTIONAL) The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8-G10. In Puerto Rico only, enter meters. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.) A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO. G2. 🔲 G3. 🗌 The following information (Items G4-G10) is provided for community floodplain management purposes. G5. Date Permit Issued G4. Permit Number G6. Date Certificate Of Compliance/Occupancy Issued G7. This permit has been issued for: ☐ New Construction Substantial Improvement G8. Elevation of as-built lowest floor (including basement) of the building: meters ☐ feet Datum G9. BFE or (in Zone AO) depth of flooding at the building site: ☐ feet meters Datum \_\_ G10. Community's design flood elevation: ☐ feet ☐ meters Datum \_ Local Official's Name Title Community Name Telephone Signature Date omments Check here if attachments.

#### **ELEVATION CERTIFICATE**, page 3

## Building Photographs See Instructions for Item A6.

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.  109 15th STREET			FOR INSURANCE COMPANY USE Policy 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.

#### **FRONT VIEW** 02/12/16



#### **REAR VIEW** 02/12/16



#### **ELEVATION CERTIFICATE**, page 4

# Building Photographs Continuation Page

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. 109 15th STREET			FOR INSURANCE COMPANY USE Policy Number:

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.

### **LEFT VIEW** 02/12/16





