## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

**ELEVATION CERTIFICATE** 

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

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFO	RMATION	For Insurance Company Use:
BUILDING OWNER'S NAME JOHN P. & LYN. S. CONBELLA		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 104 22nd STREET		Company NAIC Number
BELLEAIR FLORIDA		ZIP CODE
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, e LOT 52, BELLEVUE ESTATES FIFTH ADDITION	***************************************	
BUILDING USF (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL		
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE:  _   GPS (Type):		
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION		
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER BELLEAIR BEACH-125089 B2. COUNTY NAME PINELLAS		B3. STATE FLORIDA
B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX B7. FIRM PANEL	B8. FLOOD	B9. BASE FLOOD ELEVATION(S)
NUMBER 125089-0021 B 3-02-83 EFFECTIVE/REVISED DA	ATE ZONE(S) A-11	(Zone AO, use depth of flooding)
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.		
FIS Profile   FIRM   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 System (CBRS) area or Otherwise Protected Area (OPA)?   Yes   No		
Designation Date:Yes  X  No		
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)		
1. Building elevations are based on:		
*A new Elevation Certificate will be required when construction of the building is complete		
C2. Building Diagram Number 1 (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		
Flevation reference mark used		
C) b) Top of next higher floor		
LLC) Hottom of lowest horizontal structural mambas (1) (1)		
☐ d) Attached garage (top of slab) 7.30 ft (m) $\frac{90}{2}$		
口 e) Lowest elevation of machinery and/or equipment		
servicing the buildingft.(m)		
	7.4 ft.(m) 4 ft.(m) 7.6 ft.	11/1/201
☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade		
	q. in. (sq. cm)	0. 1528 6 22-02
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION NO FELLINGE		
This contification is to be signed and and all the training to be signed and and and all the training to the signed and and and all the training to the signed and and and and all the training to the signed and and and and and all the training to the signed and and and and and and all the training to the signed and and and and and and and and and an		
reently that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.		
OFFICIENCE MANUEL COUNTY OF THE PROPERTY OF TH		
WILLIAM C. KEATING NO. 1528	LICENSE NUMBER	AU
TITLE COMPANY NAME		
ADDRESS CITY STATE ZIP CODE		
SIGNATURE	FLORIDA TELEPHON	_33765
FEMA Form 81-31, AUG 99  SEE REVERSE SIDE FOR CONTINUE	727-446-1263	3
FEMA Form 81-31, AUG 99 SEE REVERSE SIDE FOR CONTINUE	ATION DEDLA	CES ALL DREVIOUS EDITIONS

JOHN P. CONDELLA LYN S. CONDELLA

JUL 26 2002

1520. LB # 0423

