U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

ELEVATION CERTIFICATE

3/27/12

OMB No. 1660-0008 Expires March 31, 2012

Important: Read the instructions on pages 1-9. 5-

405005

SECTION A D			
SECTION A-FI	ROPERTY INFORMATION	ON	For Insurance Company Use:
A1. Building Owner's Name Mark H. Edmunds & Suzanne Edwards			Policy Number
.2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or 426 Belle Isle Avenue	P.O. Route and Box No.		Company NAIC Number
City Belleair Beach State FL ZIP Code 33786			No. of the Control of
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Lega Parcel ID # 30-29-15-07317-000-0790	Description, etc.)		
 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, et A5. Latitude/Longitude: Lat. 27.931702 Long82.834171 A6. Attach at least 2 photographs of the building if the Certificate is being us A7. Building Diagram Number 1B A3. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) 0 	Hoed to obtain flood insurance A9. For a buildi	ng with an attach	and the second s
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b d) Engineered flood openings?	b) No. of p within 1 n c) Total ne	.0 foot above adj et area of flood op	penings in the attached garage acent grade 2 enings in A9.b 768 sq in
SECTION B - FLOOD INSURANCE		ered flood openin	gs?
City of Belleair Beach 125089 Pinellas	Name	B	3. State
4040000440	7. FIRM Panel live/Revised Date 9-3-03	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 10'
☐ FIS Profile ☐ FIRM ☐ Community Determined 11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 12. Is the building located in a Coastal Barrier Resources System (CBRS) are Designation Date N/A ☐ CBRS	Other (Describe) NAVD 1988	— Other (Describe) Area (OPA)?	Yes ⊠ No
SECTION C - BUILDING ELEVATION	INFORMATION (SURV	EY REQUIRE))
 Building elevations are based on: Construction Drawings* *A new Elevation Certificate will be required when construction of the building. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BF below according to the building diagram specified in Item A7. Use the same 	Building Under Consing is complete.	struction*	Finished Construction
Benchmark Utilized #754 218 SRD Vertical Datum ELEV= 12.28' (N.A.V.I Conversion/Comments N/A	e datum as the BFE. <u>).</u>		
Benchmark Utilized <u>#754 218 SRD</u> Vertical Datum <u>ELEV= 12.28' (N.A.V.I</u> Conversion/Comments <u>N/A</u>	e datum as the BFE. <u>).</u> Check	the measuremen	nt used.
Benchmark Utilized #754 218 SRD Vertical Datum ELEV= 12.28' (N.A.V.I Conversion/Comments N/A a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	e datum as the BFE. O. Check or) 10.21 ⊠ feet □	the measurement meters (Puerto F	nt used. Rico only)
Benchmark Utilized #754 218 SRD Vertical Datum ELEV= 12.28' (N.A.V.I Conversion/Comments N/A a) Top of bottom floor (including basement, crawlspace, or enclosure floob) Top of the next higher floor	e datum as the BFE. O. Check r) 10.21	the measurement meters (Puerto Fineters (Puerto Fineters (Puerto Fineters)	nt used. Rico only) Rico only)
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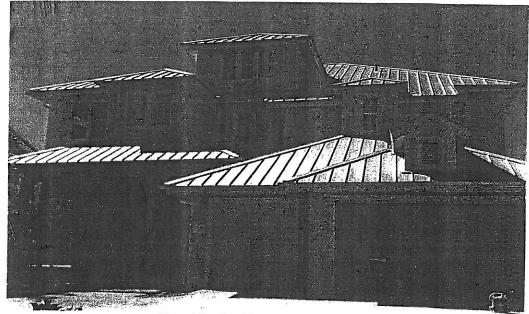
IMPORTANT: In these space Building Street Address (including			Α.	For Insurance Company Use:
426 Belle Isle Avenue	Apt., Offit, Suite, and/or blug. No.	or P.O. Route and Box No.		Policy Number
City Belleair Beach State FL Z	IP Code 33786			Company NAIC Number
SECT	ION D - SURVEYOR, ENGINE	ER, OR ARCHITECT CEI	RTIFICATION (CON	ITINUED)
∞py both sides of this Elevation C	Certificate for (1) community officia	I, (2) insurance agent/compan	y, and (3) building owr	ner.
Comments Job # 120315.01 C.2.e) = A/C Unit	<i>c.</i>			
Signature		Date 3-21-12		
melig C	Lock		e e	☐ Check here if attachments
SECTION E - BUILDING E	LEVATION INFORMATION (S	SURVEY NOT REQUIRED) FOR ZONE AO A	ND ZONE A (WITHOUT BFE)
b) Top of bottom floor (included to For Building Diagrams 6-9 windled (elevation C2.b in the diagrams E3. Attached garage (top of slab) E4. Top of platform of machinery E5. Zone AO only: If no flood de ordinance? Yes No	in for the following and check the apadjacent grade (LAG). Ing basement, crawlspace, or encing basement, crawlspace, or enciting basement flood openings provings) of the building is	propriate boxes to show whe losure) is	Rico only, enter meter ther the elevation is at feet meters feet meters feet meters feet below the love or feet meters feet meters feet meters feet meters feet meters feet meters feet feet meters feet feet meters feet feet meters feet feet feet feet feet feet feet fe	above or below the highest adjacent below or below the HAG. above or below the LAG. Instructions), the next higher floor HAG.
				A-issued or community-issued BFE)
or Zone AO must sign here. The st	atements in Sections A, B, and E	are correct to the best of my k	nowledge.	A-issued or community-issued BFE)
Property Owner's or Owner's Author	orized Representative's Name			
ress		City	State	ZIP Code
Signature		Date	Telephone	9
Comments				
			7.1	
				Check here if attachments
as lead official who is sufficient hi	SECTION G - COM	MUNITY INFORMATION (OPTIONAL)	
A community official complete	ompiete the applicable item(s) and	a sign below. Check the meas ation that has been signed an the source and date of the el ed in Zone A (without a FEMA	urement used in Items d sealed by a licensed evation data in the Cor -issued or community-	s G8 and G9. surveyor, engineer, or architect who nments area below.)
34. Permit Number	G5. Date Permit Issued	G6. Date	Certificate Of Complia	ance/Occupancy Issued
7. This permit has been issued for: 3. Elevation of as-built lowest floor 9. BFE or (in Zone AO) depth of flo 10. Community's design flood elevation	(including basement) of the building oding at the building site:	feet [meters (PR) Datum meters (PR) Datum meters (PR) Datum	
ocal Official's Name		Title		
Community Name		Telephone		
ignature		Date		
nments				
				D Chestra w
				Check here if attachments

Building Photographs See Instructions for Item A6.

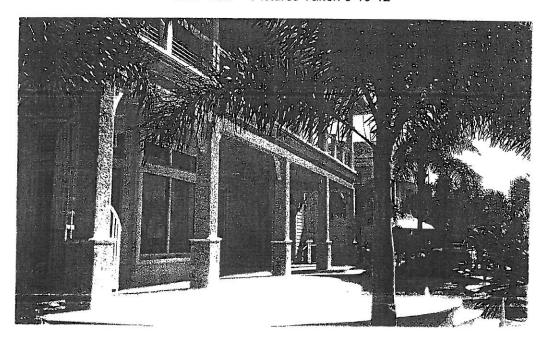
	For insurance Company Use:
uilding Street Address (including Apt., Unit. Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number
426 Belle Isle Avenue	day. 9ega
City Belleair Beach State Ft. ZIP Code 33786	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.





"Rear View" - Pictures Taken 3-19-12



Building Photographs Continuation Page

	For insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number
3 Belle Isle Avenue	
City Belleair Beach State FL ZIP Code 33786	Company NAIC 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."

