

MAR 14 2002

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAMO.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME

Richard M. Hirsh & Lisa K. Hirsh

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

621 Belle Isle

CITY

Belleair Beach

STATE

FL

ZIP CODE

33770

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

The North 5 feet of Lot 61 & Lot 62 less the East 5 feet, BELLE ISLE

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.)

Residential

LATITUDE/LONGITUDE (OPTIONAL)

(##° - ##' - ###.###" or ###.####")

HORIZONTAL DATUM:

☐ NAD 1927 ☐ NAD 1983SOURCE: ☐ GPS (Type):☐ USGS Quad Map ☐ Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER

125089

B2. COUNTY NAME

Pinellas

B3. STATE

Florida

B4. MAP AND PANEL
NUMBER

0002

B5. SUFFIX

B

B6. FIRM INDEX
DATE

3/2/83

B7. FIRM PANEL
EFFECTIVE/REVISED DATE

3/2/83

B8. FLOOD
ZONE(S)

A-11

B9. BASE FLOOD ELEVATION(S)
(Zone AO, use depth of flooding)

10.0'

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:

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction

*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 _____

Elevation reference mark used SEE COMMENTS Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No☐ a) Top of bottom floor (including basement or enclosure)

11 . 4 ft.(m)

☐ b) Top of next higher floor

16 . 0 ft.(m)

☐ c) Bottom of lowest horizontal structural member (V zones only)

N . A ft.(m)

☐ d) Attached garage (top of slab)

6 . 8 ft.(m)

☐ e) Lowest elevation of machinery and/or equipment
servicing the building

11 . 4 ft.(m)

☐ f) Lowest adjacent grade (LAG)

6 . 4 ft.(m)

☐ g) Highest adjacent grade (HAG)

6 . 7 ft.(m)

☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 0☐ i) Total area of all permanent openings (flood vents) in C3h 0 sq. in. (sq. cm)License Number, Embossed Seal,
Signature, and DateEdward D. Murphy
5333
3-08-02

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 elevation information.

I certify that the information in Sections A, B, and C 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.

CERTIFIER'S NAME

Edward D. Murphy, R.L.S.

LICENSE NUMBER

IB-6960

TITLE

President

COMPANY NAME

Murphy's Land Surveying, Inc.

ADDRESS

5760 11th Avenue, N.

CITY

St. Petersburg

STATE

FL

ZIP CODE

33710

SIGNATURE

DATE

3/8/02

TELEPHONE

727/347-8740

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. 621 Belle Isle			Policy Number
CITY Belleair Beach	STATE FL	ZIP CODE 33770	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

Elevations Based on P.C.E.D. Benchmark (Harris F)

Elevation = 7.035'

Elevations Based on N.G.V.D. 1929

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number ____ (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.)

E2. The top of the bottom floor (including basement or enclosure) of the building is ____ ft.(m) ____ in.(cm) ____ above or ____ below (check one) the highest adjacent grade.

E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is ____ ft.(m) ____ in.(cm) above the highest adjacent grade.

E4. For 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 ordinance? ____ Yes ____ No ____ Unknown. The local official must certify this information in Section G.

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.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

RESS CITY STATE ZIP CODE

SIGNATURE DATE TELEPHONE

COMMENTS

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.

G1. ____ The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. ____ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. ____ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	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 is: ____ ft.(m) Datum: ____

G9. BFE or (in Zone AO) depth of flooding at the building site is: ____ ft.(m) Datum: ____

LOCAL OFFICIAL'S NAME TITLE

COMMUNITY NAME TELEPHONE

SIGNATURE DATE

MENTS