

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077
Expires December 31, 200

Important: Read the instructions on pages 1 - 7.

O-115556

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME

Noah D. Curcio; Patricia A. Curcio

For Insurance Company Use:

Policy Number

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

Company NAIC Number

CITY

Belleair Beach

STATE

FL

ZIP CODE
33786PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
Lot 3, UNIT F BELLEAIR BEACH YACHT CLUB ESTATESBUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, 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 City of Belleair Beach

B2. COUNTY NAME

Pinellas

B3. STATE

FL

B4. MAP AND PANEL

NUMBER

125089 0002

B5. SUFFIX

B

B6. FIRM INDEX DATE

3/2/83

B7. FIRM PANEL

EFFECTIVE/REVISED DATE

3/2/83

B8. FLOOD ZONE(S)

A10

B9. BASE FLOOD ELEVATION(S)

(Zone AO, use depth of flooding)

11

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 N/A

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. 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 C3.-a-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 1929 Conversion/Comments N/A

Elevation reference mark used FCBM Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No

o a) Top of bottom floor (including basement or enclosure)

5.52 ft.(m)

o b) Top of next higher floor

N/A ft.(m)

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

N/A ft.(m)

o d) Attached garage (top of slab)

4.83 ft.(m)

o e) Lowest elevation of machinery and/or equipment

servicing the building (Describe in a Comments area)

4.96 ft.(m)

o f) Lowest adjacent (finished) grade (LAG)

4.0 ft.(m)

o g) Highest adjacent (finished) grade (HAG)

4.8 ft.(m)

o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade N/A

o i) Total area of all permanent openings (flood vents) in C3.h N/A sq. in. (sq. cm)

License Number, Embossed Seal,
Signature, and Date

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 Carl M. Smith, Louis R. Ramirez, Randy Roberts

LICENSE NUMBER #3762, #6304, #3144

TITLE Land Surveyor

COMPANY NAME First Financial Surveyors, Inc.

ADDRESS

950 South Winter Park, 2nd Floor, Suit 230

CITY

Casselberry

STATE

FL

ZIP CODE

32707

SIGNATURE

DATE

6/14/03

TELEPHONE

407-977-7010

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 1001 Palm Drive		For Insurance Company Use: Policy Number
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

Survey #: O-115556

1st section C item C3e is for A/C unit

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

☐ Check here if attachments

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. (Use natural grade, if available).
- 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. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is ___ ft.(m) ___ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. 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, C (Items C3.h and C3.i only), 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, C, and E are correct to the best of my knowledge.

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

ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPHONE	
COMMENTS			

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

☐ Check here if attachments

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
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G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is:

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

___ ft.(m) Datum: ___
 ___ ft.(m) Datum: ___

LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
SIGNATURE	DATE
COMMENTS	

☐ Check here if attachments