

JOB
#04-683

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME PAUL SOLORZANO AND LEANDREA DRUM SOLORZANO 2504 HIBISCUS DRIVE WEST	For Insurance Company Use: Policy Number Company NAIC Number
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BELLEAIR BEACH

STATE FLORIDA

ZIP CODE 33786

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

LOT 2, BLOCK A, UNITE BELLEAIR BEACH SUBDIVISION

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

LATITUDE/LONGITUDE (OPTIONAL) NAD 1927 NAD 1983 HORIZONTAL DATUM: USGS Quad Map SOURCE: GPS (Type): _____ Other: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER CITY OF BELLEAIR BEACH 125089	B2. COUNTY NAME PINELLAS	B3. STATE FLORIDA			
B4. MAP AND PANEL NUMBER 12103C0112	B5. SUFFIX G	B6. FIRM INDEX DATE 9-3-03	B7. FIRM PANEL EFFECTIVE/REVISED DATE 9-3-03	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 11.0

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)

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.)

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 _____ Conversion/Comments _____

Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? Yes No

- o a) Top of bottom floor (including basement or enclosure) 9.75 ft.(m)
- o b) Top of next higher floor NA ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) NA ft.(m)
- o d) Attached garage (top of slab) 7.39 ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) AC 6.66 ft.(m)
- o f) Lowest adjacent (finished) grade (LAG) 6.89 ft.(m)
- o g) Highest adjacent (finished) grade (HAG) 7.00 ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 1
- o i) Total area of all permanent openings (flood vents) in C3.h 2 sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

FREDERICK S. BACHMANN
LS # 5174

[Signature]
7/16/04

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	FREDERICK S. BACHMANN	LICENSE NUMBER	PLS 5174
TITLE	PROFESSIONAL LAND SURVEYOR AND MAPPER	COMPANY NAME	SURVEY PROS, INC.
ADDRESS	1425 GULF TO BAY BOULEVARD	CITY	CLEARWATER
		STATE	FL
		ZIP CODE	33755
SIGNATURE	<i>[Signature]</i>	DATE	7/16/04
		TELEPHONE	727-449-9010