

901 CB

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3087-0077  
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

PROJECT NUMBER: 11-50779

**SECTION A - PROPERTY OWNER INFORMATION**

BUILDING OWNER'S NAME <b>THOMAS W. SEITZ AND DAVID M. HATTEY</b>		For Insurance Company Use: Policy Number
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <b>901 GULF BLVD</b>		Company NAIC Number
CITY <b>BELLEAIR BEACH FLORIDA</b>	STATE	ZIP CODE
PROPERTY DESCRIPTION (Lot and Block Number, Tract and Parcel Number, Legal Description, etc.) <b>LOT 1 BELLEAIR BEACH YACHT CLUB ESTATES</b>		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) <b>RESIDENTIAL</b>		
LATITUDE/LONGITUDE (OPTIONAL) (DD-MM-SS.SS or DD.SSSSS)	HORIZONTAL DATUM <input type="checkbox"/> NAD 1983 <input checked="" type="checkbox"/> NAD 1983	SOURCE <input type="checkbox"/> GPS (Typical) <input checked="" type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other

**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

FIRM COMMUNITY NAME & COMMUNITY NUMBER <b>PINELLAS 125089</b>		FIRM COUNTY NAME <b>PINELLAS COUNTY</b>	FIRM STATE <b>FLORIDA</b>
FIRM MAP AND PANEL NUMBER <b>0002</b>	FIRM SUFFIX <b>B</b>	FIRM EFFECTIVE/REVISED DATE <b>3-2-83</b>	FIRM FLOOD ZONE(S) <b>A-10</b>
FIRM BASE FLOOD ELEVATION(S) (Zone AD, use depth of flooding) <b>ELEV 10'</b>			

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 datum used for the BFE in B9:  NAVD 1928  NAVD 1988  Other (Describe):  
 B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or otherwise Protected Area (CPA)?  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: (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, AR1, AR1A, AR1A1-A30, AR1AH, AR1AO  
 Complete items C3a) 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 NEI. Does the elevation reference mark used appear on the FIRM?  Yes  No  
 a) Top of bottom floor (including basement or enclosure) **16.1 ft. (m)**  
 b) Top of next higher floor **N/A ft. (m)**  
 c) Bottom of lowest horizontal structural member (V zones only) **N/A ft. (m)**  
 d) Attached garage (top of slab) **16.4 ft. (m)**  
 e) Lowest elevation of machinery and/or equipment servicing the building **N/A ft. (m)**  
 f) Lowest adjacent grade (LAG) **5.2 ft. (m)**  
 g) Highest adjacent grade (HAG) **6.0 ft. (m)**  
 h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade  
 i) Total area of all permanent openings (flood vents) in C3h) \_\_\_\_\_ sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

*Thomas W. Seitz & David M. Hattey*  
 0527-5901  
 7/9/01

**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 **MARY E. FINSTAD** LICENSE NUMBER # **5801**

TITLE **PSM** COMPANY NAME **FINSTAD LAND AND SPATIAL SURVEYING, CO, PC**

ADDRESS **1200 W. BIRCHMAN BLVD. BOX 4428** CITY **ST. PETERS** STATE **FL** ZIP CODE **33827**  
 SIGNATURE *Mary E. Finstad* DATE **7/9/2001** TELEPHONE **941-714-8518**