



FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

OMB 3087-0077

# ELEVATION CERTIFICATE

This form is to be used for: 1) New Emergency Program construction in Special Flood Hazard Areas; 2) Pre-FIRM construction after September 30, 1982; 3) Post-FIRM construction; and, 4) Other buildings rated as Post-FIRM uses.

*Dr. Alfred E. and Herma G. Fireman*

BUILDING OWNER'S NAME: *Lot 2 Belleair Yacht Club Estates* ADDRESS: *101 Harrison Ave. Belleair Beach, Florida*

PROPERTY LOCATION (Lot and Block numbers and address if available): *Class M. Schoen*

COMMUNITY NO.	PANEL NO.	SUFFIX	DATE OF FIRM	FIRM ZONE	DATE OF CONSTR.	BASE FLOOD ELEV. IN AO Zone, see section	BUILDING S.	New Emergency Pre-FIRM Post-FIRM Reg.
				<i>A15</i>				

YES  NO  I certify that the information on this certificate represents my best efforts to interpret the data available, understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

SECTION I - ELIGIBILITY CERTIFICATION (Completed by Local Community Permit Official or a Registered Professional Engineer, Architect, or Surveyor.)

YES  NO  The building described above will be constructed in compliance with the community's flood plain ordinance. The certifier may rely on community records. The lowest floor (including basement) will be at an elevation of \_\_\_\_\_ ft. NGVD. Failure to construct the building at this elevation may place the building in violation of the community's flood plain management ordinance.

YES  NO  The building described above has been constructed in compliance with the community's flood plain management ordinance based on elevation data and visual inspection or other reasonable means. If NO is checked, attach copy of variance issued by the community.

YES  NO  The Mobile Home located at the address described above has been tied down/anchored in compliance with the community's flood plain management ordinance, or in compliance with the NFIP Specifications.

MOBILE HOME MAKE	MODEL	YR OF MANUFACTURE	SERIAL NO.	DIMENSIONS

Community Permit Official or Registered Professional Engineer, Architect, or Surveyor:

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

TITLE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ PHONE: \_\_\_\_\_

SECTION II - ELEVATION CERTIFICATION (Certified by a Local Community Permit Official or a Registered Professional Engineer, Architect, or Surveyor.)

FIRM ZONE A1-A30: I certify that the building at the property location described above has the lowest floor (including basement) at an elevation of \_\_\_\_\_ feet, NGVD (mean sea level), and the average grade at the building site is at an elevation of \_\_\_\_\_ feet, NGVD.

FIRM ZONES V, V1-V30: I certify that the building at the property location described above has the bottom of the lowest floor beam at an elevation of *7.01* feet, NGVD (mean sea level), and the average grade at the building site is at an elevation of *4.70* feet, NGVD.

FIRM ZONES A, A99, AH and EMERGENCY PROGRAM: I certify that the building at the property location described above has the lowest floor elevation of \_\_\_\_\_ feet, NGVD. The elevation of the highest adjacent grade next to the building is \_\_\_\_\_ feet, NGVD.

FIRM ZONE AO: I certify that the building at the property location described above has the lowest floor elevation of \_\_\_\_\_ feet, NGVD. The elevation of the highest adjacent grade next to the building is \_\_\_\_\_ feet, NGVD.

SECTION III - FLOODPROOFING CERTIFICATION (Certification by a Registered Professional Engineer or Architect)

I certify to the best of my knowledge, information, and belief, that the building is designed so that the building is watertight, with walls substantially impermeable to the passage of water and structural components having the capability of resisting hydrostatic and hydrodynamic loads and effects of buoyancy that would be caused by the flood depths, pressures, velocities, impact and uplift forces associated with the base flood.

YES  NO  In the event of flooding, will this degree of floodproofing be achieved with human intervention? (Human intervention means that water will enter the building when floods up to the base flood level occur unless measures are taken prior to the flood to prevent entry of water (e.g., jacking metal shields over doors and windows).

YES  NO  Will the building be occupied as a residence? If the answer to both questions is YES, the floodproofing cannot be credited for rating purposes and the actual lowest floor must be completed and certified instead. Complete both the elevation and floodproofing certificates.

FIRM ZONES A, A1-A30, V1-V30, AO and AH: Certified Floodproofed Elevation is \_\_\_\_\_ feet, NGVD.

THIS CERTIFICATION IS FOR  SECTION II  BOTH SECTIONS II AND III (Check One)

CERTIFIER'S NAME: *Carol M. Schoen* COMPANY NAME: *Boudreau, Schoen & Wharton* LICENSE NO. (or Affix Seal): *#255745*

TITLE: *President* ADDRESS: *9500 Koger Blvd. - Suite 110 St. Pete. FL. 33702* ZIP: \_\_\_\_\_

SIGNATURE: *Carol M. Schoen* DATE: *10/14/82* CITY: *St. Petersburg, FL.* STATE: *FL.* PHONE: *576-1199*

The insurance agent attaches the second copy of the completed form to the flood insurance policy application for new (POST-FIRM) construction or substantial improvements. Be sure that the second copy is certified.

FEMA 81-31, April 82 INSURANCE AGENTS MAY ORDER THIS FORM

Identify if the Certification form is for Section II, or both Sections II and III. Enter the certifier's name, company name, license number, title, complete address and telephone number. The certifier's signature and date must also be entered.

The insurance agent should attach the original copy of the completed form to the flood insurance policy application, the second copy should be supplied to the policyholder and the third copy retained by the agent.

If you need assistance or need to order copies of this form, call the NFIP toll-free number.

THIS CERTIFICATION IS FOR  SECTION II  BOTH SECTIONS II AND III (Check One)

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CERTIFIER'S NAME	COMPANY NAME	LICENSE NO. (or Affix Seal)		
<i>Carol M. Schoen</i>	<i>Boudreau, Schoen &amp; Wharton</i>	<i># 2557 L.S.</i>		
TITLE	ADDRESS	ZIP		
<i>President</i>	<i>9500 Loger Blvd. Suite 110 St. Pete., FL.</i>	<i>33702</i>		
SIGNATURE	DATE	CITY	STATE	PHONE
<i>Carol M. Schoen</i>	<i>10/14/82</i>	<i>St. Petersburg,</i>	<i>Florida</i>	<i>576-1199</i>

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