

# 2918-3

273429

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

HOLDING OWNER'S NAME DR. BLAYN GUMM		For Insurance Company Use:	
HOLDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 2224 DONATO DRIVE		Policy Number	
CITY BELLEAIR BEACH		STATE FLORIDA	ZIP CODE 33786
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 61, "BELLEVUE ESTATES ISLAND SECOND ADDITION"			
HOLDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL			
ITUDE/LONGITUDE (OPTIONAL) " - ##" - ##.##" or ##.####"		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 N.C.V.D. 1929	
		SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

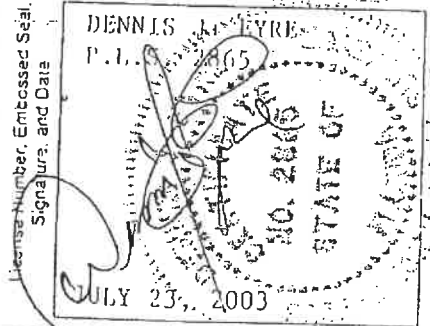
FIRM COMMUNITY NAME & COMMUNITY NUMBER CITY OF BELLEAIR BEACH/125089		B2. COUNTY NAME PINELLAS		B3. STATE FLORIDA	
B4. MAP AND PANEL NUMBER 089 0002	B5. SUFFIX B	B6. FIRM INDEX DATE 3/2/83	B7. FIRM PANEL EFFECTIVE/REVISED DATE 5/14/71-3/2/83	B8. FLOOD ZONE(S) "A-11"	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 10.00'

Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.  
 FIS Profile  FIRM  Community Determined  Other (Describe):  
 Indicate the elevation datum used for the BFE in B9:  NGVD 1929  NAVD 1988  Other (Describe):  
 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)

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.  
 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.)  
 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 NGVD 1929 Conversion/Comments DEPARTMENT OF NATURAL RESOURCES # R-65. ELEVATION: 7.75'  
 Elevation reference mark used DNR # R-65 Does the elevation reference mark used appear on the FIRM?  Yes  No

a) Top of bottom floor (including basement or enclosure)	10.1	ft.(m)
b) Top of next higher floor	21.8	ft.(m)
c) Bottom of lowest horizontal structural member (V zones only)	N/A	ft.(m)
d) Attached garage (top of slab)	8.61	ft.(m)
e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.)	10.12	ft.(m)
f) Lowest adjacent (finished) grade (LAG)	8.2'	ft.(m)
g) Highest adjacent (finished) grade (HAG)	9.1'	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 C3.h	0	sq. in. (sq. cm)



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.

SURVEYOR'S NAME DENNIS J. EYRE		LICENSE NUMBER P.L.S. 2865	
PROFESSIONAL LAND SURVEYOR		COMPANY NAME GEODATA SYSTEMS, INC.	
ADDRESS 1822 DREW STREET, SUITE #8		CITY CLEARWATER	STATE FLORIDA
		DATE JULY 23, 2003	ZIP CODE 33765
		TELEPHONE (727) 447-1763 FAX: (727) 446-4364	

IMPORTANT: In these spaces, copy the corresponding information from Section A.

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 2224 DONATO DRIVE		For Insurance Company Use:	
CITY BELLEAIR BEACH		STATE FLORIDA	ZIP CODE 33786
		Policy Number	
		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 ON THIS DAY (4/01/04) THIS ELEV. CERT. WAS REVISED TO SHOW CONSTRUCTION COMPLETED AND ITEMS C-a, b, d, e, f & g WERE REVISED.

DENNIS J. [Signature] P.E.

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

Zone AO and Zone A (without BFE), complete Items E1. through E5. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

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.)

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.)

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.

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.)

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

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 best of my knowledge.

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

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

NATURE OF BUSINESS \_\_\_\_\_ DATE \_\_\_\_\_ TELEPHONE \_\_\_\_\_

COMMENTS \_\_\_\_\_

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

Local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete items A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

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.)

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

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

PERMIT NUMBER _____	G5. DATE PERMIT ISSUED _____	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED _____
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This permit has been issued for:  New Construction  Substantial Improvement

Elevation of as-built lowest floor (including basement) of the building is: \_\_\_\_\_ ft. (m) Datum;

or (in Zone AO) depth of flooding at the building site is: \_\_\_\_\_ ft. (m) Datum;

OFFICIAL'S NAME \_\_\_\_\_ TITLE \_\_\_\_\_

MUNICIPALITY NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_

COMMENTS \_\_\_\_\_