CB26.04807

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2022

# 497427

# **ELEVATION CERTIFICATE**

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION					ANCE COMPANY USE
A1. Building Owner's Name				Policy Numb	per:
Gary Hummer and Cindy Hummer					
<ul> <li>A2. Building Street Address (including Apt., Unit, Suit Box No.</li> <li>459 Harbor Drive N.</li> </ul>				Company N	AIC Number:
City		State		ZIP Code	
Indian Rocks Beach		Florida		33785	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  Lot 10, 24th Addition to Re-Revised Map of Indian Beach (Parcel ID #06-30-15-42462-000-0100)					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential					
A5. Latitude/Longitude: Lat. 27°54'24.4" N	Long. 82°50	0'18.1" W	Horizontal	Datum: NAD 1	927 🗵 NAD 1983
A6. Attach at least 2 photographs of the building if the	e Certificate	is being us	sed to obtain flood	insurance.	
A7. Building Diagram Number1B					71
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s)			N/A sq ft		
b) Number of permanent flood openings in the cr	awlspace or	r enclosure	(s) within 1.0 foot	above adjacent gra	de N/A
c) Total net area of flood openings in A8.b		N/A sq in			
d) Engineered flood openings? Yes X	No				
A9. For a building with an attached garage:					
a) Square footage of attached garage	64	11.40 sq ft			
b) Number of permanent flood openings in the at	tached gara	ge within 1	.0 foot above adja	cent grade 7	
c) Total net area of flood openings in A9.b	14	421.00 sq i	n		
d) Engineered flood openings?	No				
OF CTION B. FLOOD	NEUDANO	SE DATE A	AAD (FIDM) INF	DEMATION	
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number City of Indian Rocks Beach 125117		B2. County Name Pinellas			B3. State Florida
B4. Map/Panel B5. Suffix B6. FIRM Index Date	Effective/ Zone(s)			P. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)	
12103C0112 H 08-24-2021	08-24-202	ed Date 1	AE	9.0	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:					
☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other/Source:					
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?   Yes   No					
Designation Date: CBRS DPA					

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 459 Harbor Drive N.			Policy Number:	
- · · · · ·		<sup>2</sup> Code 785	Company NAIC Number	
SECTION C – BUILDING E	LEVATION INFORMA	TION (SURVEY RI	EQUIRED)	
<ul> <li>C1. Building elevations are based on: Construct</li> <li>*A new Elevation Certificate will be required when</li> <li>C2. Elevations – Zones A1–A30, AE, AH, A (with BFE Complete Items C2.a–h below according to the building benchmark Utilized: "HALL C" PID AG0554</li> </ul>	construction of the build ), VE, V1–V30, V (with I	BFE), AR, AR/A, AR/ I in Item A7. In Puert	/AE, AR/A1A30, AR/AH, AR/AO.	
Indicate elevation datum used for the elevations in	items a) through h) bel	ow.		
☐ NGVD 1929 区 NAVD 1988 ☐ Othe Datum used for building elevations must be the sa		BFE.	Check the measurement used.	
a) Top of bottom floor (including basement, crawl	space, or enclosure floc	or)	11.0 🔀 feet 🔲 meters	
b) Top of the next higher floor			23.1 X feet  meters	
c) Bottom of the lowest horizontal structural mem	ber (V Zones only)		N/A feet meters	
d) Attached garage (top of slab)	27		7.5 X feet  meters	
e) Lowest elevation of machinery or equipment s     (Describe type of equipment and location in Co	ervicing the building omments)		11.4 X feet  meters	
f) Lowest adjacent (finished) grade next to buildi	ng (LAG)		6.6 ⊠ feet ☐ meters	
g) Highest adjacent (finished) grade next to build	ing (HAG)		7.4 X feet  meters	
h) Lowest adjacent grade at lowest elevation of d     structural support	eck or stairs, including	···	5.7 X feet meters	
SECTION D - SURVEYO	R, ENGINEER, OR AF	RCHITECT CERTIF	ICATION	
This certification is to be signed and sealed by a land so I certify that the information on this Certificate representatement may be punishable by fine or imprisonment	nts my best efforts to inte	erpret the data availa	y law to certify elevation information. able. I understand that any false	
Were latitude and longitude in Section A provided by a	licensed land surveyor	? ⊠Yes □No	Check here if attachments.	
Certifier's Name	License Number 2865			
Dennis J. Eyre Title			- Liming	
Professional Surveyor and Mapper			1 January	
Company Name Geodata Services, Inc.			FIGURE OF THE PROPERTY OF THE	
Address 1166 Kapp Drive			Company of the Compan	
City Clearwater	State Florida	ZIP Code 33765	05-16-2022	
Signature Dennis J Eyre PLS 2865 Digually signed by Dennis J Eyre PLS 2865 Date: 2022.05.18 11:32:03-04007	Date 05-16-2022	Telephone (727) 447-1763	Ext.	
Copy all pages of this Elevation Certificate and all attached	ments for (1) community	official, (2) insurance	agent/company, and (3) building owner	
Comments (including type of equipment and location, p. A5. Determined with GIS program "Google Earth". A7: A9.b) (6) Engineered vents and (1) flood opening in ga A9.d) "Smart Vents" Model 1540-520, providing 200 sc Section B Note: Building permitted with B4: 12103C01 B9. Rounded whole foot value from FIRM. C2.e) Elect Additional elevations: Tankless water heater at right signs.	Stemwall foundation with large door. A9.c) 1200 to quare feet of coverage e 12 B5: "G", B6: 08-18-2 ctric meter box at left side	from vents and 221 fi ach. 009, B7: 09-03-2003 e of building.	rom opening. 3, B8: "AE", B9: 10.0	

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IMPORTANT: In these spaces, copy the corresponding infor	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. 459 Harbor Drive N.	No. Policy Number:			
City State Indian Rocks Beach Florida	ZIP Code 33785	Company NAIC Number		
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)				
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.				
E1. Provide elevation information for the following and check the the highest adjacent grade (HAG) and the lowest adjacent g a) Top of bottom floor (including basement,	e appropriate boxes to snow grade (LAG).	whether the elevation is above or below		
crawlspace, or enclosure) is  b) Top of bottom floor (including basement, crawlspace, or enclosure) is		meters above or below the HAG meters above or below the LAG.		
E2. For Building Diagrams 6–9 with permanent flood openings		<del></del>		
the next higher floor (elevation C2.b in the diagrams) of the building is		meters above or below the HAG.		
E3. Attached garage (top of slab) is  E4. Top of platform of machinery and/or equipment		meters above or below the HAG.		
servicing the building is  E5. Zone AO only: If no flood depth number is available, is the t	op of the bottom floor elevat			
floodplain management ordinance? Yes No	·			
SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION  The property owner or owner's authorized representative who completes Sections A, B, 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, and E are correct to the best of my knowledge.				
Property Owner or Owner's Authorized Representative's Name				
Address	City	State ZIP Code		
Signature	Date	Telephone		
Comments				
		_		
		Check here if attachments.		

## **ELEVATION CERTIFICATE**

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IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, St 459 Harbor Drive N.	Policy Number:					
City Indian Rocks Beach	State Florida	ZIP Code 33785	Company NAIC Number			
SECTIO	ON G - COMMUNITY INF	ORMATION (OPTIONA	_)			
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. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.						
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by 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 Zone AO.	on E for a building locate	d in Zone A (without a Fi	MA-issued or community-issued BFE)			
G3. The following information (Items G4-	G10) is provided for com	munity floodplain manag	ement purposes.			
G4. Permit Number	G5. Date Permit Issued	d G6	Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for:   New Construction  Substantial Improvement						
G8. Elevation of as-built lowest floor (including of the building:	g basement)	<b>_ _ f</b>	eet			
G9. BFE or (in Zone AO) depth of flooding at t	the building site:	<b>_ f</b>	eet  meters Datum			
G10. Community's design flood elevation:			eet  meters Datum			
Local Official's Name	,	Title				
Community Name		Telephone				
Signature	!	Date				
Comments (including type of equipment and location, per C2(e), if applicable)						
•						
			Check here if attachments.			

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

See Instructions for Item A6.

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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. 459 Harbor Drive N.			FOR INSURANCE COMPANY USE Policy Number:	
Indian Rocks Beach	Florida	33785	00.491 59	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption Front View 03-01-2022 Clear Photo One



Photo Two

Photo Two Caption Rear View 03-01-2022

Clear Photo Two

### **BUILDING PHOTOGRAPHS**

Continuation Page

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### **ELEVATION CERTIFICATE**

		Expiration bate. November 50, 2022	
IMPORTANT: In these spaces, copy the co	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 459 Harbor Drive N.			Policy Number:
City	State	ZIP Code	Company NAIC Number
Indian Rocks Beach	Florida	33785	

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

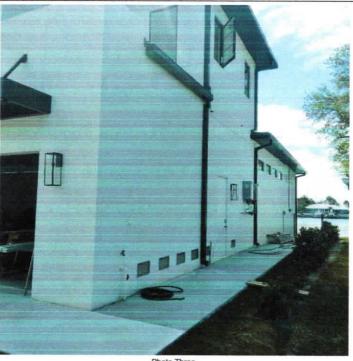


Photo Three

Photo Three Caption Right Side View 03-01-2022

Clear Photo Three

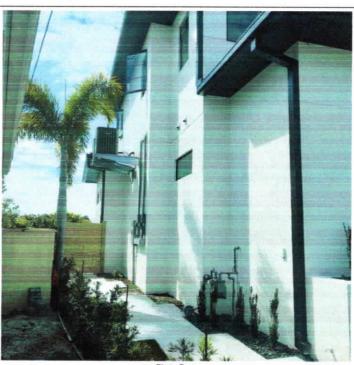


Photo Four Caption Left Side View 03-01-2022

Clear Photo Four