D) E G E I V E

DERAL EMERGENCY MANAGEMENT NCY NATIONAL FLOOD INSURANCE PROGRAM

I EVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires July 31, 2002

Important: Read the instructions on pages 1 - 7.

CITY OF INDIAN COCKS REACH	ortant. Read the in	structions on pag	<u>jes 1 - 7.</u>	<u> </u>
	CTION A - PROPERTY	OWNER INFORMA	ATION	For Insurance Company Use:
BUILDING OWNER'S NAME JAMES DEGROFF	Policy Number			
BUILDING STREET ADDRESS (Including Apt., Un 513 HARBOR DRIVE NORTH	it, Suite, and/or Bldg. No.)	OR P.O. ROUTE AND	BOX NO.	Company NAIC Number
CITY INDIAN ROCKS BEACH		STATE FLOR		ZIP CODE 33785
PROPERTY DESCRIPTION (Lot and Block Number				
LOT 1. "TWENTY NINTH ADDITI BUILDING USE (e.g., Residential, Non-residential, RESIDENTIAL	ON TO RE-REVISE Addition, Accessory, etc.	D MAP OF INDIA Use Comments section	AN BEACH. #0 if necessary.)	6–30–15–42552–000–0010
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.##" or ##.####")	HORIZONTAL DATUM: NAD 1927 LLI NAD 19		_ GPS (Type): _ USGS Quad Map	Other:
SECTION B	- FLOOD INSURANC	E RATE MAP (FIRM	I) INFORMATION	
81. NFIP COMMUNITY NAME & COMMUNITY NU				
INDIAN ROCKS BEACH/125117	PINELLA	S		33. STATE FLORTDA
NUMBER	DATE EFFECT	. FIRM PANEL IVE/REVISED DATE	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)
		1-3/2/83	A-12	10.00'
B10. Indicate the source of the Base Flood Ele				
B11. Indicate the elevation datum used for the	Community Determine			acriba):
B12. Is the building located in a Coastal Barrier	Resources System (C	BPS) area or Otherw	ise Protogtod Are	scribe):
Designation Date:		ond) area or Otherw	ise Protected Are	a (OPA)? Yes No
	BUILDING ELEVATION	INFORMATION (S	URVEY REQUIRE	ED)
C1. Building elevations are based on: LCon		Building Under		XX Finished Construction
*A new Elevation Certificate will be require				
C2. Building Diagram Number 1 (Select th	e building diagram mos	t similar to the buildi	ng for which this o	ertificate is being completed - see
pages 6 and 7. If no diagram accurately re				·
C3. Elevations – Zones A1-A30, AE, AH, A (wit				
Complete Items C3a-i below according to t	he building diagram spe	ecified in Item C2. St	ate the datum use	ed. If the datum is different from
the datum used for the BFE in Section B, o	onvert the datum to tha	t used for the BFE. S	show field measur	ements and datum conversion
calculation. Use the space provided or the Datum NGVD 1929 Conversion/Commo	Comments area of Sec	tion D or Section G, . #754 (DESTC.	as appropriate, to	o document the datum conversion.
Elevation reference mark used DESIC.	21 B SRD December	-1	/ JIW	/ FIRM 10 1 11 11 11 11 11 11 11 11 11 11 11 1
☐ a) Top of bottom floor (including baseme	Does the	elevation reference i	nark used appear	on the FIRM? Yes No
b) Top of next higher floor		D I C # /626		
c) Bottom of lowest horizontal structural	mambar A/ zanas anti-	N/A	π.(π)	P.L.S. # 4626
☐ d) Attached garage (top of slab)	32 '''''' 8 ä	4		
e) Lowest elevation of machinery and/or	r equipment	•	<u> </u>	\mathcal{L}
servicing the building	oquipmont	A/C 7.	71 n.(XX) a a	I half
☐ f) Lowest adjacent grade (LAG)			71 ft.(XH) vigure on the constraint of the const	I were
g) Highest adjacent grade (HAG)		7.	2 ft.X(Xn) 2 0 (GUY D. HALE
☐ h) No. of permanent openings (flood ver	nts) within 1 ft. above a	diacent grade 0		JANUARY 24, 2001
i) Total area of all permanent openings			. (sq. cm)	•
SECTION D.	SURVEYOR, ENGINE	ER OR ARCHITECT	CERTIFICATIO	NI N
This certification is to be signed and sealed by				
I certify that the information in Sections A, B, a	a land surveyor, engin	more sents my hest	efforts to intorport	the data available
I understand that any false statement may be	ounishable by fine or in	norisonment under 18	8 II S. Code. Sec	tine data avallable. Son 1001
CERTIFIER'S NAME	pariletiasie by into or in	LICE	NSE NUMBER	1011 1001.
GUY D. HALE		PLS. #	4626	
PROFESSIONAL LAND SURVEYOR	R GT	IY D. HALE LAN	D SURVEYING	
ADDRESS 369 MEARS BLVD.	C	ITY DSMAR,	STATE FLORIDA	ZIP CODE 34677
SIGNATURE		ATE	TELEPHO	NE
- MOUNT) JANUARY 24	4, 2001	(813) 855 - 4	

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	Onding infor	nation from Section A.		For Insurance Comp	any Use:
IMPORTANT: In these spaces, BUILDING STREET ADDRESS (Inclu	iding Apt., Unit, Suite, and/or Bldg.	No.) OR P.O. ROUTE AND B	OX NO.	Policy Number	•
513 HARBOR DRIVE NO	RTH		ZIP CODE	Company NAIC Nur	nber
CITY INDIAN ROCKS BEACH	STAT FLORI	DA	33785		
SECTIO	N D - SURVEYOR, ENGINEER,	OR ARCHITECT CERTIF	ICATION (CON	TINUED)	
Copy both sides of this Elevation					•
COMMENTS					
					f attachments
SECTION E - BUILDING ELI	EVATION INFORMATION (SUR	VEY NOT REQUIRED) FO	OR ZONE AO A	ND ZONE A (WITH	odina
E2. The top of the bottom floor (in (check one) the highest adjact E3. For Building Diagrams 6-8 with	F, Section C must be completed (Select the building diagram gram accurately represents the building basement or enclosure) cent grade. Ith openings (see page 7), the new bove the highest adjacent grade.	most similar to the building uilding, provide a sketch o of the building is xt higher floor or elevated . e top of the bottom floor ele	g for which this or photograph.) Ift.(m) I I I I I I I I I	certificate is being on the community of the building is dance with the community.	completed – or [below
floodolain management ordin	ance? Yes No	Jnknown. The local official	il must certily th	is initimation in Se	ction G.
SECTIO	ON F - PROPERTY OWNER (OF	OWNER'S REPRESENT	ATIVE) CERTII	FICATION	and or
The property owner or owner's a community-issued BFE) or Zone	uthorized representative who co AO must sign here.	mpletes Sections A, B, and	d E for Zone A (WILLIOUL A FEMA-ISS	sueu oi
PROPERTY OWNER'S OR OWNER	R'S AUTHORIZED REPRESENTAT	IVE'S NAME			
ADDRESS		CITY	STATE	ZIP CODE	
		DATE		HONE	
SIGNATURE		5/112			
COMMENTS					
				[Check here	if attachment
	SECTION G - COMMU	NITY INFORMATION (OP	TIONAL)		
The local official who is authorize Sections A, B, C (or E), and G of G1. The information in Section engineer, or architect where elevation data in the Corporation of Co. A community official community official community official community of Co. G3. The following information	this Elevation Certificate. Compon C was taken from other docur no is authorized by state or local mments area below.) Inpleted Section E for a building to	nete the applicable item(s) nentation that has been signal law to certify elevation inforced in Zone A (without a	and sign below gned and embos ormation. (Indic	ssed by a licensed ate the source and or community-issue	surveyor, date of the
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE	CERTIFICATE C	F COMPLIANCE/OC	CUPANCY
G4, FERIVIT NUMBER		ISSUED			
G7. This permit has been issued G8. Elevation of as-built lowest fl G9. BFE or (in Zone AO) depth of	oor (including basement) of the		ent	ft.(m) Datum: ft.(m) Datum: _	
LOCAL OFFICIAL'S NAME		TITLE			
COMMUNITY NAME		TELEPHONE			
SIGNATURE		DATE			
COMMENTS					
					- 11 - 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
		•		L I Check here	e if attachmen
				1 OTTOOK TO	