U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008 Expiration Date: July 31, 2015

	SECTION A - PROPER	TY INFORMATION	F	OR INSURANCE COMPANY USE
A1. Building Owner's Name Taylor Morrison of F	lorida, Inc		P	olicy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. 180 Haven Beach Dr S (Building 8)			THE JUNE STATE	ompany NAIC Number:
City Indian Rocks Beach		State FL	ZIF	^{2 Code} 33785
A3. Property Description (Lot and Block Numbers, Tax Lot 50 Cove at Indian Rocks Beach, PB 13	39 Pages 43-45	ide i con la continua di		
 A4. Building Use (e.g., Residential, Non-Residential, A A5. Latitude/Longitude: Lat. N 27° 53' 10.3" A6. Attach at least 2 photographs of the building if th A7. Building Diagram Number	Long. W 82° 5	0' 58,7" to obtain flood insurand A9. For a buildir	ce.	NI/A
 b) No. of permanent flood openings in the crawls enclosure(s) within 1.0 foot above adjacent gr c) Total net area of flood openings in A8.b 	pace or ade 79 1346.45 sq	b) Number within 1.	of permanent to 0 foot above a	lood openings in the attached garage
d) Engineered flood openings? 🗵 Yes 🔲 I	No Manual	Land of the land o	red flood open	
	FLOOD INSURANCE R		FORMATION	
B1. NFIP Community Name & Community Number City of Indian Rocks Beach 125117	B2. County	Name Pinellas		B3. State Florida
B4. Map/Panel Number B5. Suffix B6. FIRM	Revise		Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone A0, use base flood depth) 10' & 11'
B10.Indicate the source of the Base Flood Elevation (B			Examile:	10 0 11
*A new Elevation Certificate will be required when C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), C2.a–h below according to the building diagram spenchmark Utilized: Box on GI OPP Lot 42 El	construction of the buildir VE, V1-V30, V (with BFE), A pecified in Item A7. In Puer lev = 4.79'	AR, AR/A, AR/AE, AR/A2 rto Rico only, enter meter tical Datum: NAVD 1	L-A30, AR/AH, ers. 988	
Indicate elevation datum used for the elevations in Datum used for building elevations must be the sa			NAVD 1988 [Other/Source:
		6 4		surement used.
 a) Top of bottom floor (including basement, crawls b) Top of the next higher floor 	space, or enclosure floor)	17 7	⊠ feet	meters
c) Bottom of the lowest horizontal structural mem	ber (V Zones only)	N/A	X feet ☐ feet	meters meters
d) Attached garage (top of slab)		N/A	☐ feet	meters
 e) Lowest elevation of machinery or equipment se (Describe type of equipment and location in Co 	mments)	11 5	K feet	meters
f) Lowest adjacent (finished) grade next to buildin		5.1	⊠ feet	meters
 g) Highest adjacent (finished) grade next to buildir h) Lowest adjacent grade at lowest elevation of destructural support 		6 . 0	⊠ feet ☐ feet	meters meters
SECTION D - Si	URVEYOR, ENGINEER,	OR ARCHITECT CE	RTIFICATION	1
his certification is to be signed and sealed by a land sunformation. I certify that the information on this Certificat understand that any false statement may be punishable. Check here if comments are provided on back of form Check here if attachments.	rveyor, engineer, or archite te represents my best effor by fine or imprisonment ur	ct authorized by law to outs to interpret the data ander 18 U.S. Code, Section Apropriate in Section Apr	certify elevation available. on 1001. ovided by a	
		License Number		IBLACE I
		5185		CD/L/NL
Scott R. Fowler Title	Company Name		Corporation	HERE _
Certifier's Name Scott R. Fowler Title Florida Registered Surveyor Address	Landmark Engin	eering & Surveying (ZIP Code	HERE 11-5-15
Scott R. Fowler Title Florida Registered Surveyor	Landmark Engin	eering & Surveying (ZIP Code 33619	HERE 11-5-15 Sattlemaler

	ELEVATI	ION.	CERT	FICATE	E. page 2
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	the corresponding information from Secti		THE REAL PROPERTY.	FC	OR INSURANCE	COMPANY USE
180 Haven Beach Dr S (Build		UZ POPULE PRESE	192	Po	licy Number:	
City Indian Rocks Beach	State FL	ZIP Code 33785		Co	mpany NAIC Nui	mber:
SECTIO	N D – SURVEYOR, ENGINEER, OR A	ARCHITECT CE	RTIFICATIO	N (CON	TINUED)	mr 1 - 871
Copy both sides of this Elevation Cert	tificate for (1) community official, (2) insur-	ance agent/comp	pany, and (3) bu	uilding ow	ner.	Arusibo Sa
a hand held GPS device. The enclosure's walls, each certif	re and original seal of a Florida Registered Sun e equipment referenced in C2e is the water hea fied to handle 200 square feet; 3 Flood Solution g, and 72 Vents 4" x 1/4" in the garage door. No	iter, located inside to s LLC Vents (mode	the structure. Ve of FS-1616) in the	nting 4 Sn enclosure	nart Vents (mode's wall, each ce	el 1540-510) in the rtified to have 158.15
Signature Sutt Rarvle		Date 11/05/2	2015	Balain.	to 1 of	
SECTION E - BUILDING ELE	EVATION INFORMATION (SURVEY N	OT REQUIRE) FOR ZONE	E AO AN	ID ZONE A	WITHOUT BFE)
For Items E1–E4, use natural grade, if E1. Provide elevation information for tl grade (HAG) and the lowest adjace a) Top of bottom floor (including ba	mplete Items E1–E5. If the Certificate is in a vailable. Check the measurement used, he following and check the appropriate boent grade (LAG), assement, crawlspace, or enclosure) is a sement, crawlspace, or enclosure) is	In Puerto Rico o	nly, enter mete	rs. on is abo meters		
	ermanent flood openings provided in Section	on A Items 8 and				
	b in the diagrams) of the building is		feet □			below the HAG.
3. Attached garage (top of slab) is			feet		-1	below the HAG.
4. Top of platform of machinery and/	or equipment servicing the building is _	Earl Mark III	☐ feet ☐		12	below the HAG.
	mber is available, is the top of the bottom Unknown. The local official must certify th		accordance wi			BATTAN PRODUCT OF CONTINUES
SECTION	F - PROPERTY OWNER (OR OWN	IER'S REPRES	ENTATIVE)	ERTIFI	CATION	The Action
Property Owner or Owner's Authorized	nts in Sections A, B, and E are correct to a Representative's Name	City	lowledge.	State	ZIP C	ode
ignature		Date		Teleph	one	
				тогори	0.10	
omments						
						ar minute et
					☐ Check	here if attachments
	SECTION G - COMMUNITY I	NFORMATION	(OPTIONAL)		B I I I I WAS TO I KNOW I
i of this Elevation Certificate. Complete 1. The information in Section C who is authorized by law to ce 2. A community official complete	we or ordinance to administer the communities the applicable item(s) and sign below. Chowas taken from other documentation that ertify elevation information. (Indicate the ed Section E for a building located in Zone ms G4–G9) is provided for community flor	eck the measurer It has been signe source and date A (without a FEN	ment used in Ite ed and sealed e of the elevation MA-issued or co	ems G8-G by a licer on data in mmunity-	G10. In Puerto nsed surveyor, n the Commer	Rico only, enter meter engineer, or architents area below.)
4. Permit Number	G5. Date Permit Issued	G6.	Date Certificat	e Of Con	npliance/Occu	pancy Issued
7. This permit has been issued for:		al Improvement		meters meters	Datum	
88. Elevation of as-built lowest floor (89. BFE or (in Zone AO) depth of floor			☐ feet ☐	meters	Datum	E Mark Compani
8. Elevation of as-built lowest floor (9. BFE or (in Zone AO) depth of flood 10.Community's design flood elevation		Title	☐ feet ☐	meters	Datum	
as. Elevation of as-built lowest floor (i 69. BFE or (in Zone AO) depth of flood a10. Community's design flood elevation.		Title Telephone	☐ feet ☐	meters	Datum	
G8. Elevation of as-built lowest floor (in G9. BFE or (in Zone AO) depth of flood G10. Community's design flood elevation. Cocal Official's Name Community Name		_ حاد وزادن	☐ feet ☐	meters	Datum	

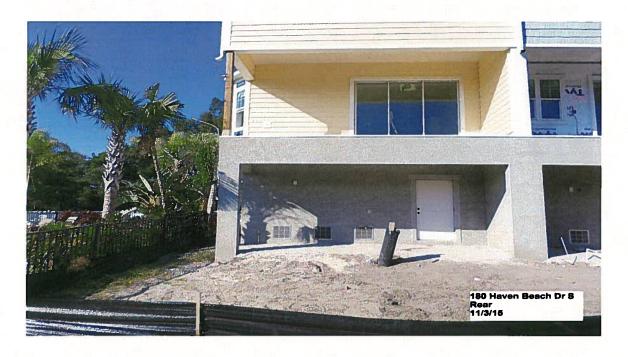
BUILDING PHOTOGRAPHS

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the co	FOR INSURANCE COMPANY USE Policy Number:	
Building Street Address (including Apt., Unit 180 Haven Beach Dr S (Building		
City Indian Rocks Beach	State ZIP Code FL 33785	Company NAIC Number:

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.





ELEVATION CERTIFICATE, page 4

BUILDING PHOTOGRAPHS

Continuation Page

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. 180 Haven Beach Dr S (Building 8)			FOR INSURANCE COMPANY USE		
			Policy Number:		
City Indian Rocks Beach	State FL	ZIP Code 33785	Company NAIC Number:		

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.

