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

					FOR INSURANCE COMPANY USE			
A1. Building Owner's Na	me Taylor Mori	ison of Florida, Inc		Wind I	P	olicy Number:	Production of the state of the	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. 196 Haven Beach Dr S (Building 7)						Company NAIC Number:		
City Indian Rock	s Beach	and of the profit of the	State	FL	ZIF	^{2 Code} 33785	di supe distingio	
A3. Property Description	(Lot and Block Nu	mbers, Tax Parcel Number ch, PB 139 Pages 43-		n, etc.)		THE RESIDENCE		
A5. Latitude/Longitude: A6. Attach at least 2 pho A7. Building Diagram Nu A8. For a building with a a) Square footage of b) No. of permanent	Lat. N 27° 53' 10 ptographs of the bimber Z crawlspace or end ff crawlspace or er t flood openings in in 1.0 foot above a flood openings in a	uilding if the Certificate is losure(s): loclosure(s) the crawlspace or adjacent grade 134	W 82° 50' 56, being used to obt	ain flood insura A9. For a built a) Squar b) Numb within c) Total r	ance. ding with an attace e footage of attace er of permanent 1.0 foot above a	ched garage flood openings in djacent grade openings in A9.b	N/A sq ft the attached garage N/A N/A sq in	
	SECT	ION B - FLOOD INSUI	RANCE RATE N	IAP (FIRM)	INFORMATION			
B1. NFIP Community Nam City of Indian I			B2. County Name		8 39 7 4 4	B3.	State	
B4. Map/Panel Number	B5. Suffix	125117 B6. FIRM Index Date 08/18/2009	B7. FIRM Panel I Revised Date 09/03/20	tone	3. Flood Zone(s)	B9. Base Floor	rida d Elevation(s) (Zone se flood depth) 10'	
B10. Indicate the source of	revenue de como de la	The second secon		12 12	THE RESIDENCE PROPERTY.		and Total Control of the St. Act.	
C2. Elevations – Zones A	SECTION re based on: tificate will be required: 1–A30, AE, AH, A (ing to the building	Construction Drawings uired when construction of with BFE), VE, V1–V30, V (diagram specified in Item	* Building is co with BFE), AR, AR A7. In Puerto Ric	ng Under Const omplete. /A, AR/AE, AR/ o only, enter me	ruction* A1-A30, AR/AH, eters.	Finished Constr		
Indicate elevation date	tum used for the e	levations in items a) throust be the same as that use	igh h) below.	NGVD 1929	3 NAVD 1988 □	Other/Source: _	or observat	
a) Top of bottom floo	r (including basem	ent, crawlspace, or enclos	sure floor)	6.5	⊠ feet	meters		
b) Top of the next high	gher floor			17 . 3	▼ feet	meters		
		ctural member (V Zones o	,	I/A I/A	☐ feet	meters		
	of machinery or eq	uipment servicing the build	The state of the s	11 9	feet X feet	☐ meters ☐ meters		
f) Lowest adjacent (1	The Control of the last of the	ation in Comments) It to building (LAG)	a La conditioners	5 8	⊠ feet	meters		
	g) Highest adjacent (finished) grade next to building (HAG)			6 2	⊠ feet	meters		
	rade at lowest ele	vation of deck or stairs, in	cluding 1	VA	☐ feet	meters		
E. 1.60	SECTIO	ON D - SURVEYOR, E!	IGINEER. OR A	RCHITECT C	ERTIFICATION		1 Val.	
This certification is to be significant on a light that the understand that any false so the comments.	gned and sealed be information on the statement may be pare are provided on ba	y a land surveyor, enginee is Certificate represents m punishable by fine or impri ack of form. Were lat	r, or architect auti y best efforts to in sonment under 18 itude and longitud	norized by law to eterpret the date of U.S. Code, Sec le in Section A	o certify elevation a available. ction 1001.		15 (a) #5(85	
Echeck here if attachment	s.	licensed	land surveyor?	License Numbe	No er	3 30	PLACE	
Scott R. Fowler			y Nama	5185		37	SEAL	
Florida Registered Surv	eyor	Compan Landm	y Name J <mark>ark Engineerin</mark> g	& Surveying		13	HERE	
Address 8515 Palm River Road	priso in the	City Tampa		State FL	ZIP Code 33619	3,3	0 0 0	
Signature States	when	Date 11/18/2		Telephone (813) 621-78		SIRD	14110 20	

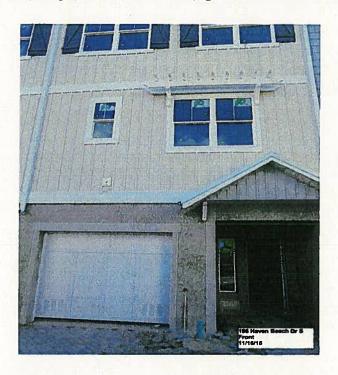
	e corresponding information from Sect		1741451		OR INSURANCE COMPANY USE
Building Street Address (including Apt., 196 Haven Beach Dr S (Build		oute and Box No.	196	Po	olicy Number:
City Indian Rocks Beach	State ZIP Code an Rocks Beach FL 33785		Co	ompany NAIC Number:	
SECTION	D - SURVEYOR, ENGINEER, OR	ARCHITECT CE	RTIFICAT	ION (CON	TINUED)
opy both sides of this Elevation Certifi	cate for (1) community official, (2) insu	rance agent/comp	any, and (3) building ov	vner.
a hand held GPS device. The e enclosure's walls, each certified	and original seal of a Florida Registered Su- equipment referenced in C2e is the water he d to handle 200 square feet; 3 Flood Solutio and 72 Vents 4" x 1/4" in the garage door. N	eater, located inside the ns LLC Vents (model	ne structure. FS-1616) in	Venting 4 Sr the enclosur	mart Vents (model 1540-510) in the e's wall, each certified to have 158.15
signature Suff Rhoole	~	Date 11/18/2	015		
	ATION INFORMATION (SURVEY	NOT REQUIRED) FOR ZO	NE AO AI	ND ZONE A (WITHOUT BFE)
or Zones AO and A (without BFE), comp or Items E1–E4, use natural grade, if a	olete Items E1-E5. If the Certificate is i	intended to suppor	t a LOMA o	r LOMR-F re	
 Provide elevation information for the grade (HAG) and the lowest adjacent 		oxes to show whet	her the ele	vation is ab	ove or below the highest adjacent
a) Top of bottom floor (including base	ement, crawlspace, or enclosure) is	500	The second second	meters	above or below the HAG.
b) Top of bottom floor (including base	ement, crawlspace, or enclosure) is		☐ feet	meters	☐ above or ☐ below the LAG.
2. For Building Diagrams 6–9 with perm	nanent flood openings provided in Sect	tion A Items 8 and	or 9 (see p	pages 8-9 o	f Instructions),
the next higher floor (elevation C2.b	in the diagrams) of the building is	165 17	☐ feet	meters	above or below the HAG.
3. Attached garage (top of slab) is	A World		community of	meters	☐ above or ☐ below the HAG.
4. Top of platform of machinery and/or	equipment servicing the building is		☐ feet	meters	☐ above or ☐ below the HAG.
5. Zone AO only: If no flood depth numl ordinance? Yes No Un	ber is available, is the top of the botton known. The local official must certify t			e with the co	ommunity's floodplain management
SECTION	F - PROPERTY OWNER (OR OW	NER'S REPRES	FNTATIVE) CERTIE	ICATION
roperty Owner or Owner's Authorized Red ddress	epresentative's Name	City		State	ZIP Code
ignature		Date	100	Teleph	none Tabli Canadan etradi
		T I Will in	Day men		
omments					
E THE THE PARTY OF	Minumental State of State	SHE IS IN THE		nikam z 'iii	☐ Check here if attachments
	SECTION G - COMMUNITY	INFORMATION	(OPTION	AL)	
he local official who is authorized by law	or ordinance to administer the commur the applicable item(s) and sign below. C	nity's floodplain mar heck the measuren	nagement o nent used in	rdinance car	n complete Sections A, B, C (or E), a G10. In Puerto Rico only, enter mete
of this Elevation Certificate. Complete t				IN COLUMN	
1. The information in Section C was	as taken from other documentation th	at has been signe	d and seal	ed by a lice	nsed surveyor, engineer, or archite
The information in Section C way who is authorized by law to cert	tify elevation information. (Indicate the	e source and date	of the elev	ation data	in the Comments area below.)
The information in Section C way who is authorized by law to cert A community official completed	tify elevation information. (Indicate the Section E for a building located in Zon	e source and date e A (without a FEM	of the elev A-issued o	ation data in community	in the Comments area below.)
 The information in Section C way who is authorized by law to certain A community official completed The following information (Item 	tify elevation information. (Indicate the Section E for a building located in Zon s G4–G9) is provided for community f	e source and date le A (without a FEM loodplain manage	of the elev A-issued or ment purpo	ration data r community oses.	in the Comments area below.) -issued BFE) or Zone AO.
 The information in Section C way who is authorized by law to certain A community official completed The following information (Item 	tify elevation information. (Indicate the Section E for a building located in Zon	e source and date le A (without a FEM loodplain manage	of the elev A-issued or ment purpo	ration data r community oses.	in the Comments area below.)
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 The information in Section C we who is authorized by law to certain A community official completed The following information (Item Permit Number This permit has been issued for: 	tify elevation information. (Indicate the Section E for a building located in Zons G4–G9) is provided for community f G5. Date Permit Issued New Construction	e source and date le A (without a FEM loodplain manage G6.	of the elever of	vation data r community pses. icate Of Cor	in the Comments area below.) -issued BFE) or Zone AO.
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1. The information in Section C way who is authorized by law to cert 2. A community official completed 3. The following information (Item 4. Permit Number 7. This permit has been issued for: 8. Elevation of as-built lowest floor (Inc. 9. BFE or (in Zone AO) depth of flooding which is a contraction of the contraction	tify elevation information. (Indicate the Section E for a building located in Zons G4–G9) is provided for community for G5. Date Permit Issued New Construction Substanticluding basement) of the building:	e source and date le A (without a FEM loodplain manage G6.	of the elevial issued or ment purportion Date Certif	vation data r community pses. icate Of Cor	in the Comments area below.) -issued BFE) or Zone AOippliance/Occupancy Issued Datum
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1. The information in Section C we who is authorized by law to cert 2. A community official completed 3. The following information (Item 4. Permit Number 7. This permit has been issued for: 8. Elevation of as-built lowest floor (in: 9. BFE or (in Zone AO) depth of flooding 10. Community's design flood elevation ocal Official's Name	tify elevation information. (Indicate the Section E for a building located in Zons G4–G9) is provided for community for G5. Date Permit Issued New Construction Substanticluding basement) of the building:	e source and date e A (without a FEM doodplain manage) G6. tial Improvement	of the elevial issued or ment purportion Date Certif	ration data r community ses. icate Of Cor meters meters	in the Comments area below.) -issued BFE) or Zone AO. Inpliance/Occupancy Issued Datum Datum
i. The information in Section C we who is authorized by law to certal. A community official completed is. The following information (Item. i4. Permit Number if. This permit has been issued for: i8. Elevation of as-built lowest floor (in: i9. BFE or (in Zone AO) depth of flooding information (Item. i6.) Community's design flood elevation in incommunity Name	tify elevation information. (Indicate the Section E for a building located in Zons G4–G9) is provided for community for G5. Date Permit Issued New Construction Substanticluding basement) of the building:	e source and date le A (without a FEM loodplain manage G6. tial Improvement Title	of the elevial issued or ment purportion Date Certif	ration data r community ses. icate Of Cor meters meters	in the Comments area below.) -issued BFE) or Zone AO. Inpliance/Occupancy Issued Datum Datum
i. The information in Section C we who is authorized by law to certical. A community official completed is. The following information (Item is. Permit Number is. Elevation of as-built lowest floor (Inc. 10. Community's design flood elevation ocal Official's Name is authorized in the information in the information is a community Name is authorized in the information in the	tify elevation information. (Indicate the Section E for a building located in Zons G4–G9) is provided for community for G5. Date Permit Issued New Construction Substanticluding basement) of the building:	e source and date le A (without a FEM loodplain manage) G6. tial Improvement Title Telephone	of the elevial issued or ment purportion Date Certif	ration data r community ses. icate Of Cor meters meters	in the Comments area below.) -issued BFE) or Zone AO. Inpliance/Occupancy Issued Datum Datum
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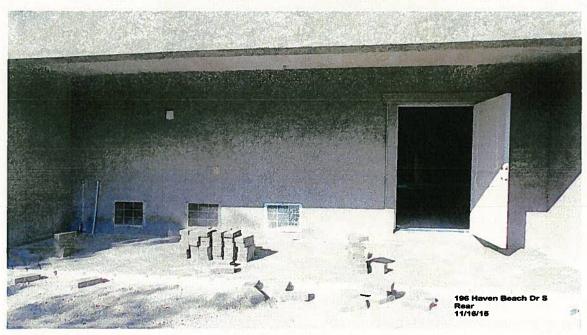
BUILDING PHOTOGRAPHS

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the co	FOR INSURANCE COMPANY USE Policy Number:		
Building Street Address (including Apt., Unit 196 Haven Beach Dr S (Building			
City Indian Rocks Beach	State FL	ZIP Code 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.





BUILDING PHOTOGRAPHS

Continuation Page

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, 196 Haven Beach Dr S (Building 7		D. Route and Box No.	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.

