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SEE SURVEY ATATCHMENT FOR VARIOUS LINES

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FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

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

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION
BUILDING OWNERS NAME: CARL SILBERG, CITY OF INDIAN ROCKS BEACH BUILDING DEPT.
BUILDING STREET ADDRESS: 3 7TH. AVENUE
CITY: INDIAN ROCKS BEACH STATE: FLORIDA
PROPERTY DESCRIPTION: LOT 1 AND THE N. 1/2 OF LOT 2, BLOCK 1, HAVEN BEACH PB. 5, PG. 21
BUILDING USE: RESIDENTIAL

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 AND PANEL NUMBER: 0003
B5. SUFFIX: B
B6. FIRM INDEX DATE: 3-2-83
B7. FIRM PANEL EFFECTIVE/REVISED DATE: 3-2-83
B8. FLOOD ZONE(S): A-11
B9. BASE FLOOD ELEVATION(S): 11'

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)
Building elevations are based on: [X] Construction Drawings
C2. Building Diagram Number: 6
C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, ARIA, ARIA/E, ARIA1-A30, ARIA/H, ARIA/O
Datum: SEE COMMENTS Conversion/Comments:
Elevation reference mark used: SEE COMMENTS Does the elevation reference mark used appear on the FIRM? [X] Yes [] No
a) Top of bottom floor (including basement or enclosure) STORAGE 8.5 ft (m)
b) Top of next higher floor 18.0 (m)
c) Bottom of lowest horizontal structural member (V zones only) N/A ft (m)
d) Attached garage (top of slab) 8.5 ft (m)
e) Lowest elevation of machinery and/or equipment servicing the building NOT SHOWN ft (m)
f) Lowest adjacent grade (LAG) 8.0 ft (m)
g) Highest adjacent grade (HAG) 8.5 ft (m)
h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade: N/A
i) Total area of all permanent openings (flood vents) in C3h: N/A sq. in. (sq. cm)

Signature: Lauren R. Penny #4931 3-1-02 License Number, Embossed Seal, Signature, and Date

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.
CERTIFIER'S NAME: LAUREN R. PENNY LICENSE NUMBER: 4931
TITLE: LAND SURVEYOR COMPANY NAME: L. R. PENNY & ASSOC., INC.
ADDRESS: 10730 - 102 ND. AVENUE NORTH CITY: SEMINOLE STATE: FLORIDA ZIP CODE: 33778
SIGNATURE: Lauren R. Penny DATE: 3-1-02 TELEPHONE: (727) 398-4360

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. 3 7TH AVENUE

CITY INDIAN ROCKS BEACH STATE FLORIDA ZIP CODE 33108

Insurance Company: State Policy Number: 10111 Company NAIC Number: 10111

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

BENCHMARK: PINELLAS COUNTY DISK # 178

DESIGNATION: NARROW D

ELEVATION: 6.575

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO and ZONE A (WITHOUT BFE) Check here if attachments

For Zone AO and Zone A (without BFE), complete Items E1 through E3. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

1. 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.)

2. 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.

3. 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

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.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

SIGNATURE _____ DATE _____ TELEPHONE _____

COMMENTS _____

SECTION G - COMMUNITY INFORMATION (OPTIONAL) Check here if attachments

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.

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: _____

BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____

LOCAL OFFICIAL'S NAME _____ TITLE _____

COMMUNITY NAME _____ TELEPHONE _____

SIGNATURE _____ DATE _____

COMMENTS _____