



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 OWNER'S NAME: DALTON WEST, INC. / CHEZ SOLEIL CONDOMINIUM
BUILDING STREET ADDRESS: 1501 BEACH TRAIL / 2 15TH AVENUE NEW
CITY: INDIAN ROCKS BEACH STATE: FLORIDA ZIP CODE: [blank]

PROPERTY DESCRIPTION: LOTS 9,10,11, BLK. 27 RE-REVISED MAP OF INDIAN BEACH PB. S, PG. 6 PLUS A PORTION OF UK ALLEY
BUILDING USE: RESIDENTIAL

LATITUDE/LONGITUDE (OPTIONAL): [blank] HORIZONTAL DATUM: [ ] NAD 1927 [ ] NAD 1983 SOURCE: [ ] GPS (Type): [ ] USGS Quad Map [ ] Other: [ ]

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

Table with 6 columns: 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) (10)

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. [ ] FIS Profile [X] FIRM [ ] Community Determined [ ] Other (Describe):
B11. Indicate the elevation datum used for the BFE in B9: [X] NGVD 1929 [ ] NAVD 1988 [ ] Other (Describe):
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? [ ] Yes [X] No Designation Date: [ ]

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

Building elevations are based on: [ ] Construction Drawings [X] Building Under Construction [ ] Finished Construction
C2. Building Diagram Number 6
C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO
Elevation reference mark used SEE COMMENTS Does the elevation reference mark used appear on the FIRM? [ ] Yes [X] No
a) Top of bottom floor (including basement or enclosure) 10.2 ft(m)
b) Top of next higher floor N/A ft(m)
c) Bottom of lowest horizontal structural member (V zones only) N/A ft(m)
d) Attached garage (top of slab) 10.2 ft(m)
e) Lowest elevation of machinery and/or equipment servicing the building N/A ft(m)
f) Lowest adjacent grade (LAG) 8.3 ft(m)
g) Highest adjacent grade (HAG) 9.7 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)

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 & ASSOCIATES, INC
ADDRESS: 10730 102 AVENUE NORTH CITY: SEMINOLE STATE: FL ZIP CODE: 33778
SIGNATURE: [Signature] DATE: 1-20-00 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.

1501 BEACH TRAIL / 2 15TH AVENUE NORTH NEW

CITY STATE ZIP CODE

INDIAN ROCKS BEACH FLORIDA

For Insurance Company Use

Policy Number

Company NAIC Number

**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 MAP # 178  
NARROW D LOCATED AT SOUTHWEST CORNER OF THE  
INTERSECTION OF GULF BOULEVARD SR 699 + 5TH AVE.  
(SR 699) ELEV. 6.575

Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO and ZONE A (WITHOUT BFE)**

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.

- E1. 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.)
- E2. 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.
- E3. 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

Check here if attachments

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

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.

- G1.  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.)
- G2.  A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3.  The following information (Items G4-G9) is provided for community floodplain management purposes.

|                   |                        |   |
|-------------------|------------------------|---|
| G4. PERMIT NUMBER | G5. DATE PERMIT ISSUED | 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 basement) of the building is: \_\_\_\_\_ ft.(m) Datum: \_\_\_\_\_

G9. 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

Check here if attachments