

**RECEIVED**  
AUG 1 2001

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM  
**ELEVATION CERTIFICATE**

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

Important: Read the instructions on pages 1-7.

**SECTION A - PROPERTY OWNER INFORMATION**

BUILDING OWNER'S NAME <b>GARY R. AND INDIAN ROCKS BEACH L. THROMBLEY</b>	For Insurance Company Use: Policy Number
BUILDING STREET ADDRESS (Including Apt. Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <b>722 BEACH TRAIL (WESTERLY STRUCTURE ON SITE)</b>	Company NAIC Number
CITY <b>INDIAN ROCKS BEACH</b>	STATE <b>FLORIDA</b>
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>LOT 6, BLOCK A, WRIGHT'S ADDITION TO HAVEN BEACH</b>	
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) <b>SINGLE FAMILY RESIDENCE</b>	
LATITUDE/LONGITUDE (OPTIONAL) (###-##-### or ###-###-###)	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983
SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:	

**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <b>INDIAN ROCKS BEACH - 125117</b>	B2. COUNTY NAME <b>PINELLAS</b>	B3. STATE <b>FLORIDA</b>
B4. MAP AND PANEL NUMBER <b>0003</b>	B5. SUFFIX <b>B</b>	B6. FIRM INDEX DATE <b>3/2/83</b>
B7. FIRM PANEL EFFECTIVE/REVISED DATE <b>3/2/83</b>	B8. FLOOD ZONE(S) <b>A11</b>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <b>11 FEET</b>

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.  
 FIS Profile  FIRM  Community Determined  Other (Describe):  
 B11. Indicate the elevation datum used for the BFE in B9:  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  No Designation Date

**SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)**

C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction  
 \*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 5 (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.)

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  
 Complete Items C3a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum WESTERLY STRUCTURE ON SITE Conversion/Comments

Elevation reference mark used          Does the elevation reference mark used appear on the FIRM?  Yes  No

▶ a) Top of bottom floor (including basement or enclosure)	<u>17.86</u> ft.(m)
▶ b) Top of next higher floor	<u>N/A</u> ft.(m)
▶ c) Bottom of lowest horizontal structural member (V zones only)	<u>14.98</u> ft.(m)
▶ d) Attached garage (top of slab)	<u>N/A</u> ft.(m)
▶ e) Lowest elevation of machinery and/or equipment servicing the building	<u>16.62</u> ft.(m)
▶ f) Lowest adjacent grade (LAG)	<u>6.15</u> ft.(m)
▶ g) Highest adjacent grade (HAG)	<u>8.2</u> ft.(m)
▶ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>N/A</u>
▶ i) Total area of all permanent openings (flood vents) in C3h <u>        </u> sq. in. (sq. cm)	<u>N/A</u>

License Number, Embossed Seal, Signature, and Date

*[Handwritten Signature]*  
#1269

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION**

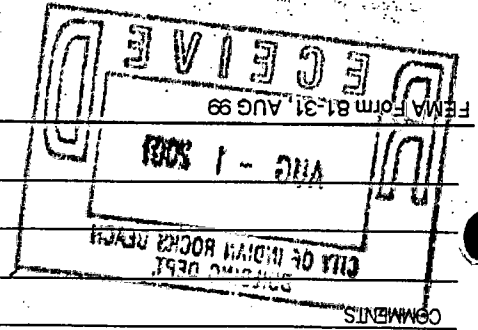
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME JOHN C. BRENDLA LICENSE NUMBER 1269

TITLE REGISTERED LAND SURVEYOR COMPANY NAME JOHN C. BRENDLA & ASSOCIATES, INC.

ADDRESS 4015 82ND AVENUE NORTH CITY PINELLAS PARK STATE FLORIDA ZIP CODE 33781

SIGNATURE *[Handwritten Signature]* DATE JULY 31, 2001 TELEPHONE (727) 576-7546



REPLACES ALL PREVIOUS EDITIONS

Check here if attachments

LOCAL OFFICIAL'S NAME \_\_\_\_\_ TITLE \_\_\_\_\_  
COMMUNITY NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

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:

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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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.

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

Check here if attachments

PROPERTY OWNERS OR OWNERS AUTHORIZED REPRESENTATIVE'S NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_  
SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
COMMENTS \_\_\_\_\_

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.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

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 Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is \_\_\_\_\_ ft(m) \_\_\_\_\_ in.(cm) above the highest adjacent grade.  
E4. 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 E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

Check here if attachments

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.  
COMMENTS \_\_\_\_\_

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

INDIAN ROCKS BEACH STATE FLORIDA	CITY _____
722 BEACH TRAIL	ZIP CODE _____
BUILDING STREET ADDRESS (including Apt. Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.	Company NAIC Number _____
IMPORTANT: In these spaces, copy the corresponding information from Section A.	Policy Number _____
	For Insurance Company Use: _____