

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** For Insurance Company Use: **Policy Number BUILDING OWNER'S NAME** BNALEMENT EFSORTS, BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number MOST WESTERLY BUILDING ZIP CODE CITY R EHEH PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

BLOCK (7, LOT 9 4 N' 2 LOT LO LO-REVISEO MAYOF INDIBUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) BEACH INDIAN MOTEL LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: | GPS (Type): (##° - ##' - ##.##" or ##.####") | NAD 1927 | NAD 1983 USGS Quad Map SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B3. STATE B2. COUNTY NAME **B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER** PINELLAS INDIAN ROCKS BEACH, 125117 B7. FIRM PANEL **B9. BASE FLOOD ELEVATION(S) B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX** B8. FLOOD DATE EFFECTIVE/REVISED DATE ZONE(S) (Zone AO, use depth of flooding) AIL, VI4 MARCH 2, 1983 LIGE COMMENTS B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. I 4 FIRM Community Determined |__| Other (Describe): | | FIS Profile B11. Indicate the elevation datum used for the BFE in B9: I ✓ 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: NOT DETERMINED SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) Building Under Construction* Building elevations are based on: | |Construction Drawings* I / Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number 6 (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.) 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 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. Conversion/Comments Elevation reference mark used PINGLER Does the elevation reference mark used appear on the FIRM? (including basement or enclosure) ft.(m) <u>9</u>_ ft.(m) (b) Top of next higher floor C) Bottom of lowest horizontal structural member (V zones only) ft.(m) (top of slab) ft.(m) (Ye) Lowest elevation of machinery and/or equipment servicing the building ELEVATOR SHAFT ft.(m) ப் ந Lowest adjacent grade (LAG) (ft.(m g) Highest adjacent grade (HAG) (flood vents) within 1 ft. above adjacent grade _ (flood vents) in C3h 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. LURY BY DR

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G5. DATE PERMIT ISSUED G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED 7. This permit has been issued for: New Construction Substantial Improvement 8. Elevation of as-built lowest floor (including basement) of the building is: ft.(m) Datum: 9. 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	ections A, B, C (or E), and G of this Elevation Certificate. Complete the state of the information in Section C was taken from other documentation engineer, or architect who is authorized by state or local law to elevation data in the Comments area below.) 32. A community official completed Section E for a building located Zone AO.	e applicable Item(s) and sign on that has been signed and certify elevation information. in Zone A (without a FEMA-in the floodplain management parts)	embossed by a licensed surveyor, (Indicate the source and date of the source and community-Issued BFE) of the purposes.
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