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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		For Insurance Company Use:
BUILDING OWNER'S NAME ERIC MEYER		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 2316 Gulf Blvd		Company NAIC Number
CITY INDIAN ROCKS BEACH	STATE FLORIDA	ZIP CODE
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 10 Block 42 RE-REVISED MAP OF INDIAN BEACH PB 5 PG 6 Pinellas County Florida		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) Residential		
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 Indian Rocks Beach 125117	B2. COUNTY NAME Pinellas	B3. STATE Florida
B4. MAP AND PANEL NUMBER 125117-0003	B5. SUFFIX B	B6. FIRM INDEX DATE 3/2/83
B7. FIRM PANEL EFFECTIVE/REVISED DATE 3/2/83	B8. FLOOD ZONE(S) All	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 10 FEET

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 _____ (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.
 Datum (NGVD29) Conversion/Comments VACANT LOT NO ELEV. ON PLANS
 Elevation reference mark used NARROW "D" Does the elevation reference mark used appear on the FIRM? Yes No

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

License Number, Embossed Seal, Signature, and Date

10/30/2000

Harry W. Marlow

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 HARRY W. MARLOW	LICENSE NUMBER RLS 1303 (LR938)
TITLE Registered Land Surveyor	COMPANY NAME HARRY W MARLOW, INC
ADDRESS 3941 68th Ave N	CITY Pinellas Park
SIGNATURE <i>Harry W. Marlow</i>	STATE FL
DATE 10-30-00	ZIP CODE 33781
TELEPHONE 727-525-6945	

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

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

For Insurance Company Use: _____
 Policy Number: _____
 BUILDING OWNER'S NAME: **ERIC MEYER**
 BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.: **2316 GULF BLVD**
 CITY: **INDIAN ROCKS BEACH**
 STATE: **FLORIDA**
 ZIP CODE: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): **Lot 10 Block 42 RE-REVISED MAP OF INDIAN BEACH PB 5 PG 6 PINELLAS COUNTY FLORIDA**
 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.): **Residential**
 LATITUDE/LONGITUDE (OPTIONAL): _____
 HORIZONTAL DATUM: GPS (Type): _____
 USGS Quad Map Other: _____
 SOURCE: NAD 1927 NAD 1983
 B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER: **Indian Rocks Beach 125117**
 B2. COUNTY NAME: **Pinellas**
 B3. STATE: **FLORIDA**

B4. MAP AND PANEL NUMBER: 125117-0003	B5. SUFFIX: B	B6. FIRM INDEX DATE: 3/2/83	B7. FIRM PANEL EFFECTIVE/REVISED DATE: 3/2/83	B8. FLOOD ZONE(S): ALL	B9. BASE FLOOD ELEVATION(S) (Zone AO-use/depth of flooding): 10 FEET
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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: NAVD 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: _____ (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, ARA, AR/AE, AR/A1-A30, AR/AH, AR/AA, Complete items C3a-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 (NGVD29) Conversion/Comments: **VACANT LOT NO ELEV. ON PLANS**
 Elevation reference mark used **NARROW "D"** Does the elevation reference mark used appear on the FIRM? Yes No

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: **HARRY W. MARLOW**
 TITLE: **Registered Land Surveyor**
 COMPANY NAME: **HARRY W MARLOW, INC**
 ADDRESS: **3941 68th Ave N**
 CITY: **Pinellas Park**
 STATE: **FL**
 ZIP CODE: **33781**
 DATE: **10-30-00**
 TELEPHONE: **727-525-6945**

License Number, Embossed Seal, Signature, and Date

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