OCT 2 7 2000

FFMA Form 81-31 ALIG 99

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

nortant: Read the instructions on pages 1 - 7

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

	Important: Re	ead the instructions on pag	es 1 - 7.		
CITY OF INDIAN ROCKS BEACH	SECTION A - F	PROPERTY OWNER INFORMA	TION	For Insurance Company Use:	
The Lehigh Group, In	c• 1			Policy Number	
BUILDING STREET ADDRESS (Including 514 Harbor Dr. N.		or Bidg. No.) OR P.O. ROUTE AND	BOX NO.	Company NAIC Number	
CITY Indian Rocks Beach		STATE FL		ZIP CODE 33785	
PROPERTY DESCRIPTION (Lot and Bloc Lot 6, BROWN'S ADDIT	k Numbers, Tax Parce ION TO RE-R	el Number, Legal Description, etc.) EVISED MAP OF INDI	AN BEACH	A.	
BUILDING USE (e.g., Residential, Non-res Residential	idential, Addition, Acc	essory, etc. Use Comments section	if necessary.)	17.74.5.5	
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.##" or ##.####")	HORIZONTA	AL DATUM: SOURCE: L. NAD 1983	J GPS (Type): J USGS Quad Mar	O Other:	
SEC	TION B - FLOOD I	NSURANCE RATE MAP (FIRM	INFORMATION		
B1. NFIP COMMUNITY NAME & COMMU City of Indian Rocks Bea		B2. COUNTY NAME Pinellas		B3. STATE FL	
B4. MAP AND PANEL B5. SUFFIX NUMBER 125117 0002	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) (Zone AO, use depth of flooding) 10.0' & 11.0'	
B10. Indicate the source of the Base FI				10.0 & 11.0	
FIS Profile X FIRM		y Determined Other (Des		_	
B11. Indicate the elevation datum used					
B12. Is the building located in a Coasta		System (CBRS) area or Otherw	ise Protected Are	ea (OPA)? L Yes L No	
Designation Date: unknown					
SECTI	ON C - BUILDING E	LEVATION INFORMATION (S	JRVEY REQUIR	ED)	
Building elevations are based on: _ Construction Drawings* _ Building Under Construction* X Finished Construction					
*A new Elevation Certificate will be required when construction of the building is complete.					
C2. Building Diagram Number 7 (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 NGVD 1929 Conversion/Comments					
Elevation reference mark used N		_		r on the FIRM? Yes X No	
a) Top of bottom floor (including	basement or enclo		6 ft.(m) ਜ਼		
b) Top of next higher floor Settem of levest hadrontel a		$\frac{18}{\sqrt{\Lambda}}$.	/ (L.(III) - 1		
☐ c) Bottom of lowest horizontal structural member (V zones only) N/A ft.(m)					
e) Lowest elevation of machine			m e		
servicing the building	,		ft.(m) ft.(m)		
f) Lowest adjacent grade (LAG)		7 .	ft.(m) ft.(m) signature.		
g) Highest adjacent grade (HAC	•	<u> </u>	4 ft/m) %		
h) No. of permanent openings (W Indian In	
i) Total area of all permanent op	enings (flood vents)) in C3h <u>1341</u> sq. in	(sq. cm)	10/26/00	
SECT	ION D - SURVEYO	R, ENGINEER, OR ARCHITEC	CERTIFICATION	ON 4	
This certification is to be signed and s					
I certify that the information in Section					
TIFIER'S NAME			<u>8 U.S. Code, Sec</u> NSE NUMBER		
Edward C.	Elliott			3983	
TITLE Professional Surveyor & Mapper Overbeck & Elliott, Inc.					
ADDRESS 3089) Roosevelt	Blvd.	CITY Clearwate	STATE	FL ZIP CODE 33760	
SIGNATURE /		DATE 10/26/00	TELEPHO	ONE (727) 524-9666	

SEE REVERSE SIDE FOR CONTINUATION

7		77 9 7 7 7 1 6 5 7 7.
IMPORTANT: In these spaces, copy the corresponding info	ormation from Section A.	For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bid		Policy Number
CITY ST/	ATE ZIP C	ODE Company NAIC Number
		on the desires an interpretation and being a place of the second
SECTION D - SURVEYOR, ENGINEE		
Copy both sides of this Elevation Certificate for (1) community of	official, (2) insurance agent/company, a	and (3) building owner.
COMMENTS		r
		Check here if attachment
SECTION E - BUILDING ELEVATION INFORMATION (SU		
or Zone AO and Zone A (without BFE), complete Items E1 thro formation for a LOMA or LOMR-F, Section C must be complete 1. Building Diagram Number (Select the building diagram see pages 6 and 7. If no diagram accurately represents the 2. The top of the bottom floor (including basement or enclosure	ed. m most similar to the building for which building, provide a sketch or photogra	n this certificate is being completed ph.)
(check one) the highest adjacent grade. 3. For Building Diagrams 6-8 with openings (see page 7), the r ft.(m)	-	ation b) of the building is
4. For Zone AO only: If no flood depth number is available, is to floodplain management ordinance? Yes No		
SECTION F - PROPERTY OWNER (O	R OWNER'S REPRESENTATIVE) CE	ERTIFICATION
The property owner or owner's authorized representative who ocmmunity-issued BFE) or Zone AO must sign here.	completes Sections A, B, and E for Zor	ne A (without a FEMA-issued or
PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTA	TIVE'S NAME	
ADDRESS	CITY ST	ATE ZIP CODE
SIGNATURE		LEPHONE
COMMENTS		
		Check here if attachment
SECTION G - COMMI	UNITY INFORMATION (OPTIONAL)	Check here it attachment
ne local official who is authorized by law or ordinance to admini		ement ordinance can complete
ections A, B, C (or E), and G of this Elevation Certificate. Comp		
1. The information in Section C was taken from other docu		
engineer, or architect who is authorized by state or loca	I law to certify elevation information. (I	indicate the source and date of the
elevation data in the Comments area below.) 2. A community official completed Section E for a building l	ocated in Zone A (without a FEMA-iss	ued or community-issued BFE) or
Zone AO	community floodolain management pur	rposes.
64. PERMITNIMBER GS. DATE PERMIT ISSUED		TE OF COMPLIANCE/OCCUPANCY
7. This permit has been issued for SII New Construction	Substantial Improvement	
3. Elevation of as built lowest floor (including basement) of the		ft.(m) Datum:
D. BFE or (in Zone AO) depth of flooding at the building site is:	May 19 19 19 19 19 19 19 19 19 19 19 19 19	ft.(m) Datum:
OCAL OFFICIAL'S NAME	TITLE	
OMMUNITY NAME	TELEPHONE	
IGNATURE	DATE	
COMMENTS		
,		1 106-115 2 4 4 4
		Check here if attachments

FEMA Form 81-31, AUG 99

REPLACES ALL PREVIOUS EDITIONS