

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name PIPER, JOHN S., SR.		FOR INSURANCE COMPANY USE	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 526 HARBOR DRIV E NORTH		Policy Number:	
City INDIAN ROCKS BEACH		Company NAIC Number:	
State FL		ZIP Code 33785	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 12, BROWN'S ADDITION TO RE-REVISED MAP OF INDIAN BEACH.			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>			
A5. Latitude/Longitude: Lat. <u>27.54'25"</u> Long. <u>82.50'07"</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983			
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.			
A7. Building Diagram Number <u>7</u>			
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:	
a) Square footage of crawlspace or enclosure(s) _____ sq ft		a) Square footage of attached garage <u>544</u> sq ft	
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>5</u>	
c) Total net area of flood openings in A8.b _____ sq in		c) Total net area of flood openings in A9.b <u>701</u> sq in	
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number INDIAN ROCKS BEACH 125117		B2. County Name PINELLAS		B3. State FL	
B4. Map/Panel Number 12103C0112	B5. Suffix G	B6. FIRM Index Date 9-03-03	B7. FIRM Panel Effective/Revised Date 9-03-03	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 10.0
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

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. 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 C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.
 Benchmark Utilized: HALL "B" ELEV. 4.59 Vertical Datum: NAVD'88
 Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 NAVD 1988 Other/Source: _____
 Datum used for building elevations must be the same as that used for the BFE.

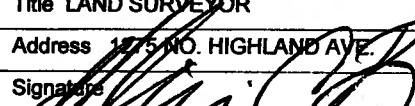
Check the measurement used.

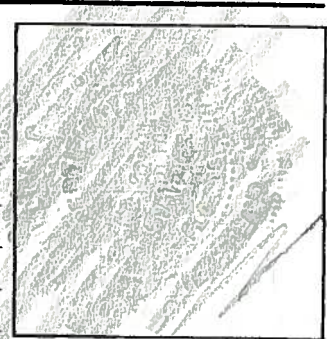
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>7.25</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	<u>10.49</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>7.25</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>17.0</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>7.0</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>7.3</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>7.2</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters

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 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.

Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No
 Check here if attachments.

Certifier's Name WILLIAM C. KEATING		License Number 1528	
Title LAND SURVEYOR	Company Name ALLIED SURVEYING		
Address <u>1275 NO. HIGHLAND AVE.</u>	City CLEARWATER	State FL	ZIP Code 33755
Signature 	Date 5-20-14	TEL 727-446-1263	



IMPORTANT: In these spaces, copy the corresponding information from Section A.		For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 526 HARBOR DRIVE NO.		Policy Number
City INDIAN ROCKS BEACH	State FL ZIP Code FLORIDA 33785	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

LINE C2-e = AIR CONDITIONER PAD = ELEV. 17.0

MAY 20, 2014

Signature

Date

Check here if attachments

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

For Zones AO and A (without BFE), complete items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
 - a) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the HAG.
 - b) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the LAG.
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.
- E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.
- E5. 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. *The statements in Sections A, B, and E are correct to the best of my knowledge.*

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. Check the measurement used in items G8 and G9.

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by 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
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G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters (PR) Datum _____

G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments

Check here if attachments

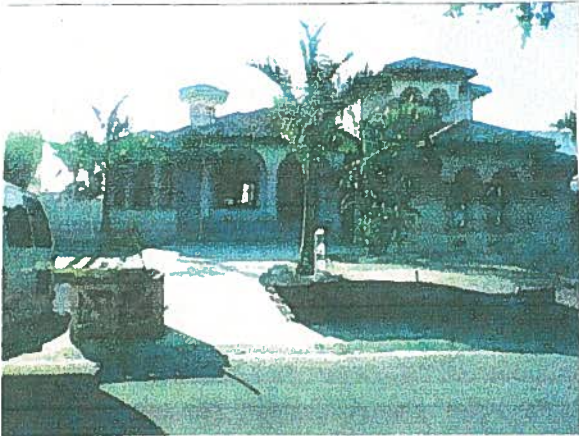
Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 526 HARBOR DRIVE NORTH				For Insurance Company Use: Policy Number	
City	State	FL	ZIP Code	Company NAIC Number	
INDIAN ROCKS BEACH	FLORIDA		33785		

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.

FRONT



REAR



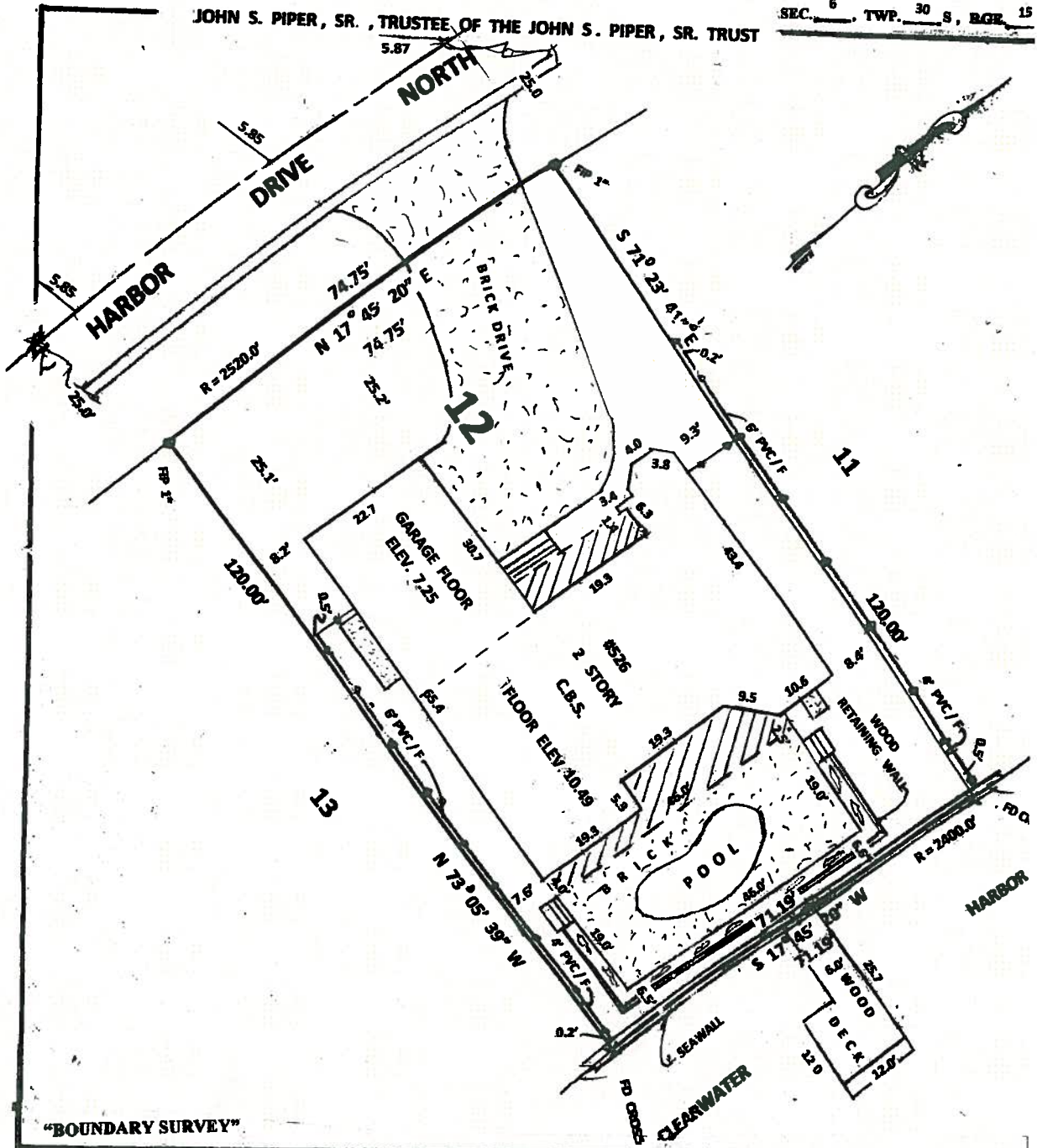
PICTURES TAKEN :

MAY 20 , 2014

COMMON LAND TITLE INSURANCE CO.

JOHN S. PIPER, SR., TRUSTEE OF THE JOHN S. PIPER, SR. TRUST

SEC. 6, TWP. 30 S, RGE. 15



"BOUNDARY SURVEY"

LEGEND : FIR-FOUND IRON ROD; FCIR-FOUND CAPPED IRON ROD; SCIR-SET CAPPED IRON ROD; FIP-FOUND IRON PIPE; FCIP-FOUND CAPPED IRON PIPE; FND-FOUND NAIL & DISC; SND-SET NAIL & DISC; FCM-FOUND CONCRETE MONUMENT; FRM-PERMANENT REFERENCE MONUMENT; PCP-PERMANENT CONTROL POINT; PE-POINT OF INTERSECTION; R/W-RIGHT-OF-WAY; ELEV-ELEVATION; C.B.S.-CONCRETE BLOCK STRUCTURE; CONC-CONCRETE; ASPH-ASPHALT; PAVT-PAVEMENT; COV-COVERED; D-DEED; SEC-SECTION; TWP-TOWNSHIP; RGE-RANGE; P-PLAT; M-MEASURED; ESMT-EASEMENT; R-RADIUS; A-ARC; CB-CHORD BEARING; STY-STORY; CLF-CHAIN LINK FENCE; WF-WOOD FENCE; POB-POINT OF BEGINNING; POC-POINT OF COMMENCEMENT

A SURVEY OF: LOT 12, BROWN'S ADDITION TO RE-REVISED MAP OF INDIAN BEACH,

AS RECORDED IN PLAT BOOK 58, PAGE 80, OF THE PUBLIC RECORDS OF PINELLAS COUNTY, FLORIDA

WILLIAM C. KEATING, THE SURVEYOR IN RESPONSIBLE CHARGE, CERTIFY THAT THE SURVEY REPRESENTED HERON, AS MEETING THE MINIMUM TECHNICAL STANDARDS SET FORTH BY THE FLORIDA BOARD OF LAND SURVEYORS AND MAPPERS, PURSUANT TO SECTION 472.027 OF THE FLORIDA STATUTES AS PRESCRIBED IN CHAPTER 63-17, DEPARTMENT OF PROFESSIONAL REGULATION.

ELEVATION STATEMENT : THIS IS TO CERTIFY THAT WE HAVE OBTAINED ELEVATIONS SHOWN HERON, OF THE ABOVE DESCRIBED LAND. THESE ELEVATIONS SHOWN HERON ARE BASED ON THE NORTH AMERICAN VERTICAL DATUM, 1988. BENCH MARKS PER PINELLAS COUNTY ENGINEERING DEPARTMENT OR FRMA MAPS. FLOOD ZONE DISTINCTIONS ARE BASED UPON THE FEDERAL EMERGENCY MANAGEMENT AGENCY MAPS ISSUED TO US. DUE TO INCONSISTENCIES FOUND IN THESE MAPS, THE ZONES ARE AN APPROXIMATE ESTIMATION TO THE BEST OF OUR ABILITY.

COMMUNITY 125117	PANEL 0112 G	MAP DATE 9-03-03	APPEARS TO BE IN FLOOD ZONE AE	BASE FLOOD ELEVATION 10.0
DRAWN BY K.W.	DATE 5-20-14	ALLIED SURVEYING APPROVED BY 1275 NO. HIGHLAND AVENUE CLEARWATER, FLORIDA 33755 TEL. 727-446-1263 FAX 727-461-4822 WILLIAM C. KEATING, RLS #1528, LB #6223		
CHECKED BY W.K.	SCALE 1" = 20'			