U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: July 31, 2015 IMPORTANT: Follow the instructions on pages 1-9. National Flood Insurance Program **SECTION A - PROPERTY INFORMATION** FOR INSURANCE COMPANY USE A1. Building Owner's Name Taylor Morrison of Florida, Inc Policy Number: A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 86 The Cove Way (Building 4) Company NAIC Number: ZIP Code 33785 City Indian Rocks Beach A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
Lot 24 Cove at Indian Rocks Beach, PB 139 Pages 43-45 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residental A5. Latitude/Longitude: Lat. N.27° 53' 11.1" Long. W 82° 50' 56.8" Horizontal Datum: NAD 1927 ■ 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 Z A8. For a building with a crawlspace or enclosure(s): A9. For a building with an attached garage: 549 a) Square footage of crawlspace or enclosure(s) N/A sq ft a) Square footage of attached garage sq ft b) No. of permanent flood openings in the crawispace or Number of permanent flood openings in the attached garage 7879 enclosure(s) within 1.0 foot above adjacent grade within 1.0 foot above adjacent grade 2823 c) Total net area of flood openings in A8.b sa in Total net area of flood openings in A9.b N/A sa in d) Engineered flood openings? Engineered flood openings? ☑ No SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number City of Indian Rocks Beach 125117 B2. County Name B3. State Florida Pinellas B4. Map/Panel Number B5. Suffix **B6. FIRM Index Date** B7. FIRM Panel Effective/ B8. Flood Zone(s) B9. Base Flood Elevation(s) (Zone Revised Date AO, use base flood depth) 12103C0113 G 08/18/2009 09/03/2003 ΑE 10' B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: FIS Profile ☑ FIRM ☐ Community Determined ☐ Other/Source: B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 X NAVD 1988 ☐ Other/Source: B12.Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date: n/a / ____ CBRS ☐ OPA SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: ☐ Building Under Construction* ☐ Construction Drawings* ▼ 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: Box cut on CI NE Lot 12 Elev= 3.69' Vertical Datum: NAVD 1988 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) 6 2 🔀 feet meters 16 9 b) Top of the next higher floor X feet meters N/A c) Bottom of the lowest horizontal structural member (V Zones only) ☐ feet ☐ meters N/A d) Attached garage (top of slab) ☐ feet ☐ meters e) Lowest elevation of machinery or equipment servicing the building 11 5 X feet ☐ meters (Describe type of equipment and location in Comments) 5 6 Lowest adjacent (finished) grade next to building (LAG) **⊠** feet ☐ meters 5 8 g) Highest adjacent (finished) grade next to building (HAG) **⊠** feet meters N/A h) Lowest adjacent grade at lowest elevation of deck or stairs, including ☐ feet meters structural support 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 P.S.M. no. 634

I understand that any false statement may be punishable by t	epresents my best eπort fine or imprisonment und	s to interpret the d der 18 U.S. Code, S	lata available. Section 1001.
☑ Check here if comments are provided on back of form. ☑ Check here if attachments.	Were latitude and lo	-	A provided by a ☐ No
Certifier's Name Thomas Michael Rooks Jr.		License Num 6347	nber
Title Florida Registered Surveyor	Company Name Landmark Engineering & Surveying Corporation		
Address 8515 Palm River-Road	City Tampa	State FL	ZIP Code 33619
Signature /	Date 07/31/2015	Telephone (813) 621-	7841

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ELEVATION CERTIFICATE, page 2

IMPORTANT: In these spaces, copy the co	orresponding information from	Section A.		FOR INSURANCE	E COMPANY LICE
IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No.		FOR INSURANCE COMPANY USE Policy Number:			
86 The Cove Way (Building 4)					
Indian Rocks Beach	State FL	ZIP Code 33785		Company NAIC N	umber:
SECTION D -	- SURVEYOR, ENGINEER,	OR ARCHITECT CE	RTIFICATION (CONTINUED)	
Copy both sides of this Elevation Certificate	of (1) community official, (2)	insurance agent/comp	pany, and (3) buildi	ng owner.	
Comments Not valid without the signature Latitude and Longitude obtaine Venting 4 Smart Vents (model wall and 72 Vents 4" x 1/4" in the signature Latitude and Longitude obtained Venting 4 Smart Vents (model wall and 72 Vents 4" x 1/4" in the longitude of the lo	ed with a hand held GPS device 1540-510) in the enclosure's w	e. The equipment refe ralls, certified to handle	renced in C2e is the 200 square feet;	ne water heater, lo 7803 Vents 1/4" x	cated inside the stru
Signature /		Date 07/31/2	2015		
	ON INFORMATION (SURV				
For Zones AO and A (without BFE), complete For Items E1–E4, use natural grade, if availa	ible. Check the measurement (used. In Puerto Rico oi	nly, enter meters.		
 Provide elevation information for the foll grade (HAG) and the lowest adjacent gra 	ide (LAG).		her the elevation i	s above or below t	he highest adjacent
a) Top of bottom floor (including baseme			☐ feet ☐ met		below the HAG.
b) Top of bottom floor (including baseme			☐ feet ☐ met		Delow the LAG.
2. For Building Diagrams 6–9 with permane		Section A Items 8 and,			
the next higher floor (elevation C2.b in th	e diagrams) of the building is		☐ feet ☐ met		below the HAG.
3. Attached garage (top of slab) is			☐ feet ☐ met	ers above or	below the HAG.
Top of platform of machinery and/or equ			☐ feet ☐ met	ers 🗆 above or	Delow the HAG.
5. Zone AO only: If no flood depth number is ordinance? Yes	s available, is the top of the bo wn. The local official must certi	ottom floor elevated in ify this information in S	accordance with the Section G.	ne community's flo	odplain managemer
	PROPERTY OWNER (OR C				
ne property owner or owner's authorized repone AO must sign here. The statements in soperty Owner or Owner's Authorized Repres	sections A, B, and E are correc	t to the best of my kn	owledge.		minumy issued BrE
ddress		City	St	ate ZIP C	ode
gnature		Date	Te	lephone	
omments			*		
				☐ Check	k here if attachment
	SECTION G - COMMUNI	TY INFORMATION	(OPTIONAL)		THOSE IT DECEMBER
e local official who is authorized by law or or of this Elevation Certificate. Complete the ap	dinance to administer the comp	nunity's floodolain man	agement ordinance	can complete Sec	tions A, B, C (or E), a
L. The information in Section C was tall who is authorized by law to certify el	ken from other documentation	that has been signed	d and spaled by a	licensed summer	and a second to
2. A community official completed Secti	on E for a building located in Z	one A (without a FEM	A-issued or commu	inity-issued BFE) of	r Zone AO.
. The following information (Items G4-	G5. Date Permit Issued			Compliance/Occu	
		GO. 1		Compilarice/ Occu	pancy issued
- · · · - · - · · - · · · · · · · · · ·		antial Improvement			
. Elevation of as-built lowest floor (including			☐ feet ☐ mete		
. BFE or (in Zone AO) depth of flooding at t	ne building site:		feet mete		
O. Community's design flood elevation:			☐ feet ☐ mete	rs Datum	
cal Official's Name		Title			
mmunity Name		Telephone			
nature		Date			
nments					
				☐ Check	here if attachments
A Form 086-0-33 (7/12)				Peniano	s all previous edition

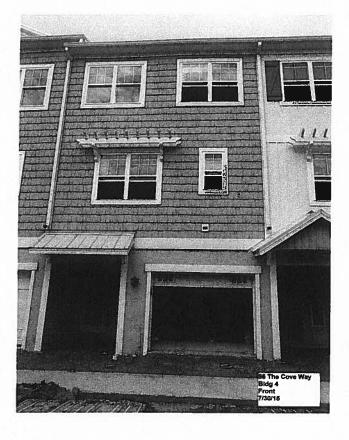
ELEVATION CERTIFICATE, page 3

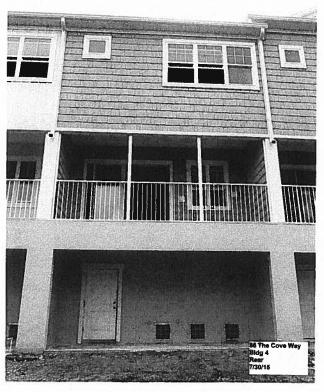
BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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 PO. Route and Box No. 86 The Cove Way (Building 4)		Policy Number:		
City Indian Rocks Beach	State FL	ZIP Code 33785	Company NAIC Number:	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.





ELEVATION CERTIFICATE, page 4

BUILDING PHOTOGRAPHS

Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
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City Indian Rocks Beach	State FL	ZIP Code 33785	Company NAIC Number:	

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

