

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires August 31, 20*

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name Janet Robertson		For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 437 18TH Avenue		Policy Number
City Indian Rocks Beach State Florida ZIP Code 33785		Company NAIC Number

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
Parcel ID 063015421020000100

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A5. Latitude/Longitude: Lat 27°53'57"N Long. 82°50'35"W 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 1A

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s) no access

b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade no access

c) Total net area of flood openings in A8.b no access

d) Engineered flood openings? Yes No

A9. For a building with an attached garage:

a) Square footage of attached garage no access sq ft

b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade no access

c) Total net area of flood openings in A9.b no access

d) Engineered flood openings? Yes No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number 125117 City of Indian Rocks Beach		B2. County Name Pinellas		B3. State Florida	
B4. Map/Panel Number 12103C 0114G	B5. Suffix G	B6. FIRM Index Date 09/03/2003	B7. FIRM Panel Effective/Revised Date 09/03/2003	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zones AO, use base flood depth) 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 (Describe) _____

B11. Indicate elevation datum used for BFE in Item 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 _____ CBRS OPA

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 below according to the building diagram specified in Item A7. Use the same datum as the BFE.
Benchmark Utilized county Vertical Datum NGVD 1929
Conversion/Comments Conversions when needed use the program Corpscon from The Army Corp of Engineers

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 5.62 feet

b) Top of the next higher floor n/a feet

c) Bottom of the lowest horizontal structural member (V Zones only) n/a feet

d) Attached Garage (top of slab) 4.94 feet

e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 4.97 feet

f) Lowest adjacent (finished) grade next to building (LAG) 4.77 feet

g) Highest adjacent (finished) grade next to building (HAG) 4.87 feet

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support n/a feet

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

Certifier's Name	Garland L. Harman	License Number	3947 State Of Florida
Title	Professional Land Surveyor	Company Name	LakeRidge Surveying & Mapping, LLC
Address	17711 Sugar Pine Way	City	Montverde
		State	Florida
		ZIP Code	34756
Signature		Date	3-28-2012
		Telephone	407-385-3151

Garland L. Harman
PLS #3947
State Of Florida

PLACE SEAL HERE

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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. 437 18TH Avenue Policy Number City Indian Rocks Beach State Florida ZIP Code 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 Job #12-0590 C2e=A/C unit Latitude and Longitude provided by Google Earth

Signature [Handwritten Signature] Date 8-28-2012 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.

- 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, crawlspace, or enclosure) is ___ feet ___ above or ___ below the HAG.
b) Top of bottom floor (including basement, crawlspace, or enclosure) is ___ feet ___ above or ___ below the LAG.
E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2 b in the diagrams) of the building is ___ feet ___ above or ___ below the HAG.
E3. Attached garage (top of slab) is ___ feet ___ above or ___ below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is ___ feet ___ 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

- G7. This permit has been issued for: ___ New Construction ___ Substantial Improvement
G8. Elevation of as-built lowest floor (including basement) of the building: ___ feet ___ Datum ___
G9. BFE or (in Zone AO) depth of flooding at the building site: ___ feet ___ Datum ___
G10. Community's design flood elevation ___ feet ___ Datum ___

Local Official's Name Title Community Name Telephone Signature Date

Comments Check here if attachments