

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

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

14-308

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <u>Taylor Morrison of Florida, Inc</u>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>210 Haven Beach Court</u>		Company NAIC Number:
City <u>Indian Rocks Beach</u>	State <u>FL</u>	ZIP Code <u>33785</u>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>Lot 1 Cove at Indian Rocks Beach, PB 139 Pages 43-45</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>N 27° 53' 13.6"</u> Long. <u>W 82° 50' 59.8"</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) <u>696</u> sq ft		a) Square footage of attached garage <u>N/A</u> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>127</u>		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>
c) Total net area of flood openings in A8.b <u>1637</u> sq in		c) Total net area of flood openings in A9.b <u>N/A</u> sq in
d) Engineered flood openings? <input checked="" 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 <u>City of Indian Rocks Beach 125117</u>		B2. County Name <u>Pinellas</u>		B3. State <u>Florida</u>	
B4. Map/Panel Number <u>12103C0113</u>	B5. Suffix <u>G</u>	B6. FIRM Index Date <u>08/18/2009</u>	B7. FIRM Panel Effective/ Revised Date <u>09/03/2003</u>	B8. Flood Zone(s) <u>AE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>11'</u>
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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: <u>n/a</u> / _____ / _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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: <u>Box cut on curb inlet Lot 12 Elev= 3.69'</u> Vertical Datum: <u>NAVD 1988</u> Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <u>6.1</u> b) Top of the next higher floor <u>17.3</u> c) Bottom of the lowest horizontal structural member (V Zones only) <u>N/A</u> d) Attached garage (top of slab) <u>N/A</u> e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <u>11.4</u> f) Lowest adjacent (finished) grade next to building (LAG) <u>5.6</u> g) Highest adjacent (finished) grade next to building (HAG) <u>5.9</u> h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support <u>N/A</u>	Check the measurement used. <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> feet <input type="checkbox"/> meters <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> feet <input type="checkbox"/> meters

RECEIVED
 Building Department
 FEB 19 2015
 City of Indian Rocks Beach

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Check here if attachments.			
Certifier's Name <u>Scott R. Fowler</u>	License Number <u>5185</u>		
Title <u>Florida Registered Surveyor</u>	Company Name <u>Landmark Engineering & Surveying Corporation</u>		
Address <u>8515 Palm River Road</u>	City <u>Tampa</u>	State <u>FL</u>	ZIP Code <u>33619</u>
Signature <u>Scott R. Fowler</u>	Date <u>01/27/2015</u>	Telephone <u>(813) 621-7841</u>	

License #5185
 PLACE SEAL HERE
 1/27/15
Scott R. Fowler

ELEVATION CERTIFICATE, page 2

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. 210 Haven Beach Court			Policy Number:	
City Indian Rocks Beach	State FL	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 Not valid without the signature and original seal of a Florida Registered Surveyor and Mapper. Date of Field Work: 01/26/2015.
Latitude and Longitude obtained with a hand held GPS device. The equipment referenced in C2e is the water heater, located inside the structure.
Venting 4 Smart Vents (model 1540-510) in the enclosure's walls, certified to handle 200 square feet; 51 Vents 1" x 15" in the enclosure's wall and 72 Vents 4" x 1/4" in the garage door. Note: A portion of the enclosure has an area with a floor elevation of 6.40'.

Signature *Scott Rowler* Date 01/27/2015

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, crawlspace, or enclosure) is _____ . _____ feet meters above or below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ . _____ feet meters 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 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 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–G10. In Puerto Rico only, enter meters.

- 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 Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ . _____ feet meters Datum _____
- G10. Community's design flood elevation: _____ . _____ feet meters Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

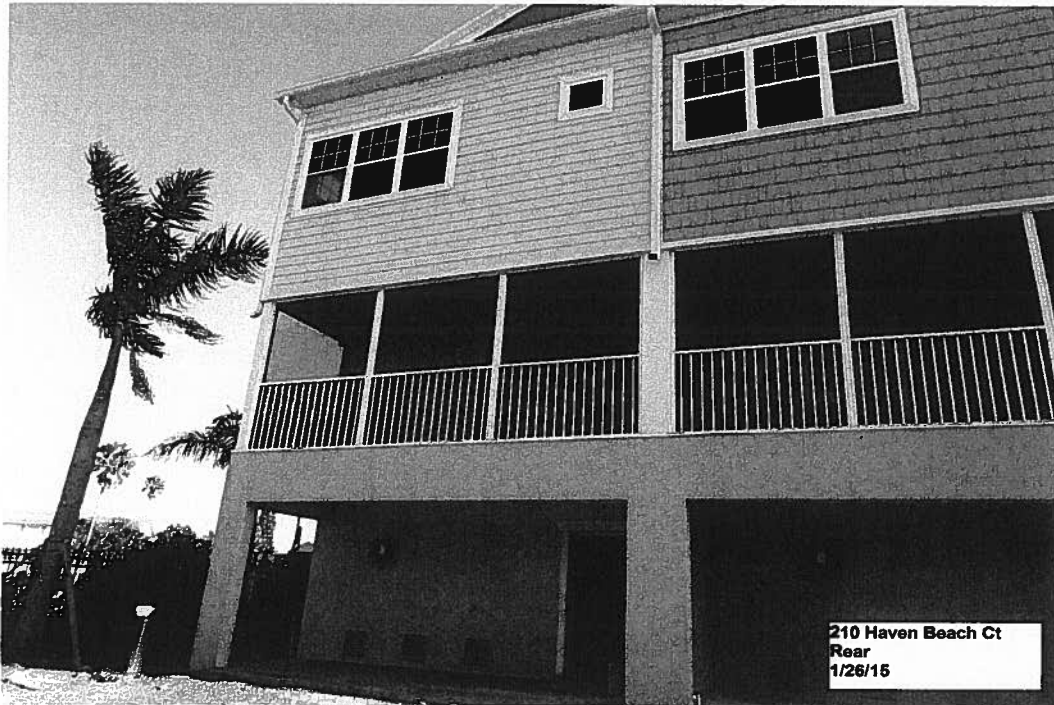
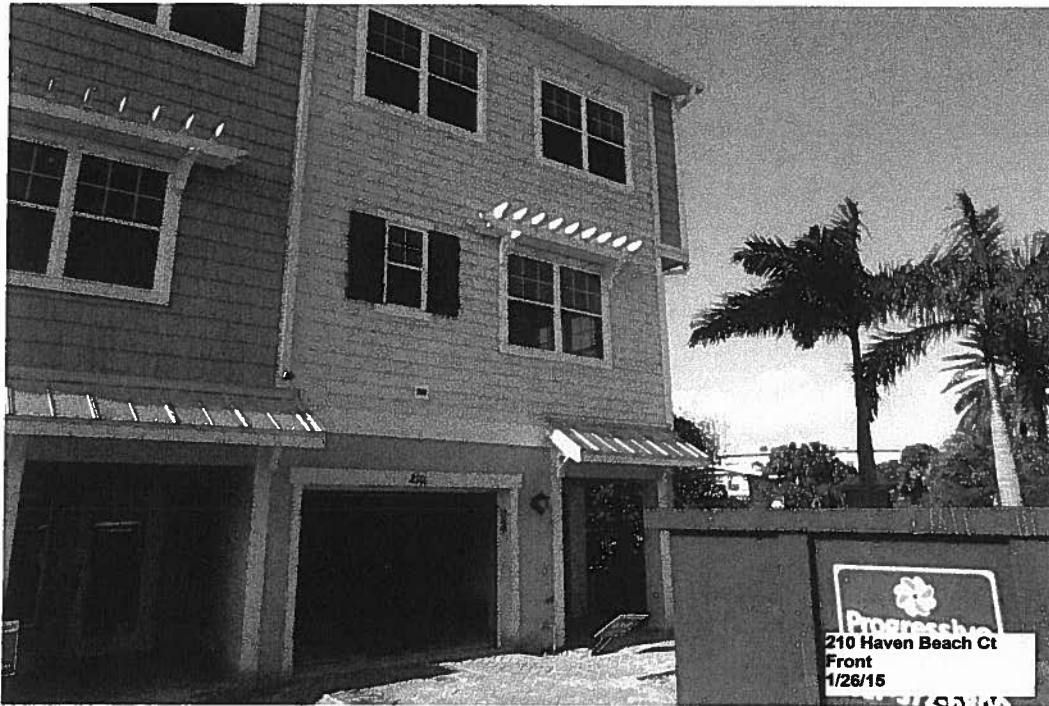
Comments _____

Check here if attachments.

See Instructions for Item A6.

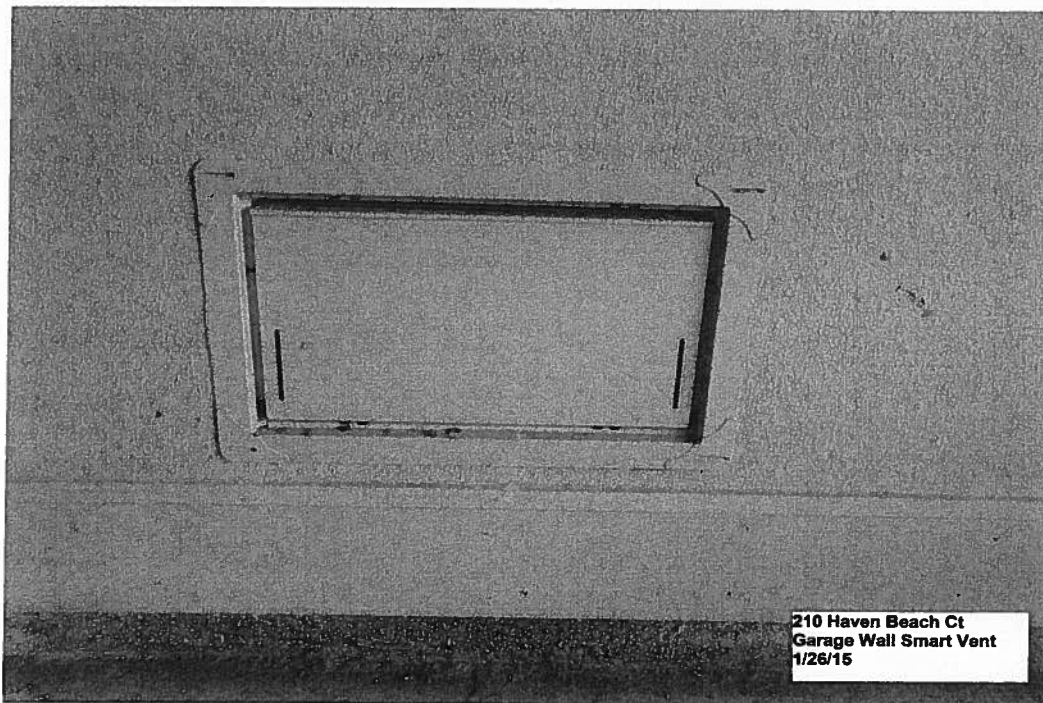
IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 210 Haven Beach Court			Policy Number:
City Indian Rocks Beach	State FL	ZIP Code 33785	Company NAIC 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.



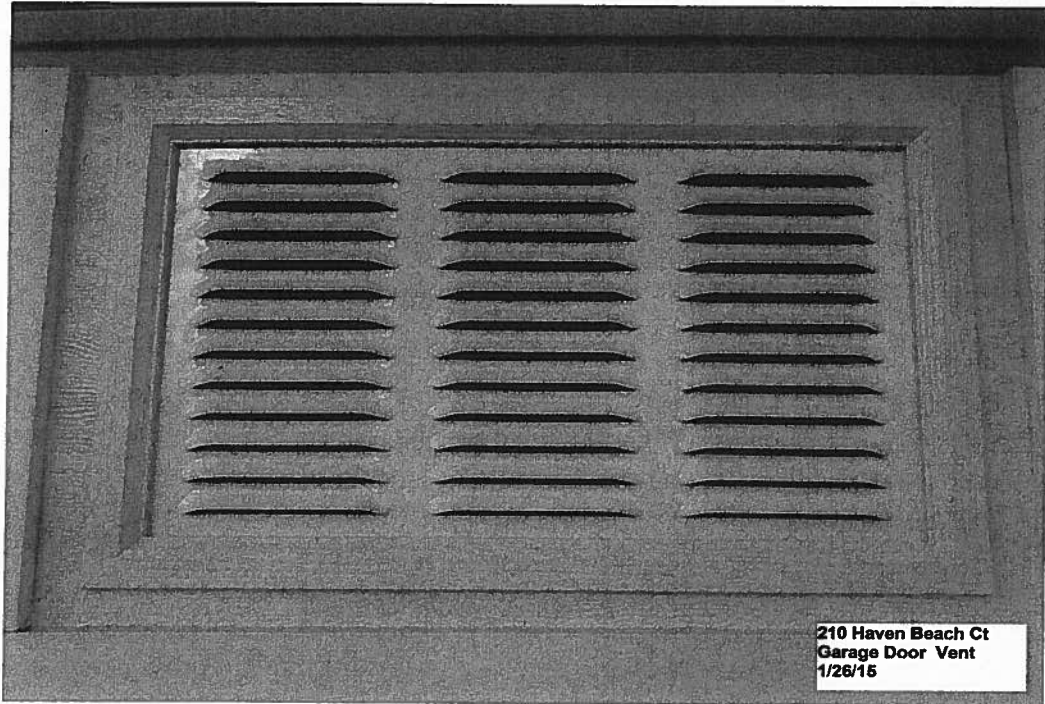
IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
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City Indian Rocks Beach	State FL	ZIP Code 33785	Company NAIC Number:

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.



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. 210 Haven Beach Court			Policy Number:
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.



DESCRIPTION: LOT 5, COVE AT INDIAN ROCKS BEACH AS RECORDED IN PLAT BOOK 139, PAGES 43 - 45, OF THE PUBLIC RECORDS OF PINELLAS COUNTY, FLORIDA.

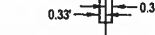
THE PROPERTY DESCRIBED HEREON IS LOCATED IN FLOOD ZONE "AE" (BASE FLOOD ELEV. = 11' [NAVD 88]) PER FLOOD INSURANCE RATE MAP NUMBER 12103C 0113G, EFFECTIVE DATE SEPTEMBER 03, 2003. COMMUNITY No. 125117C PANEL 0113 G.

BOUNDARY & AS-BUILT SURVEY

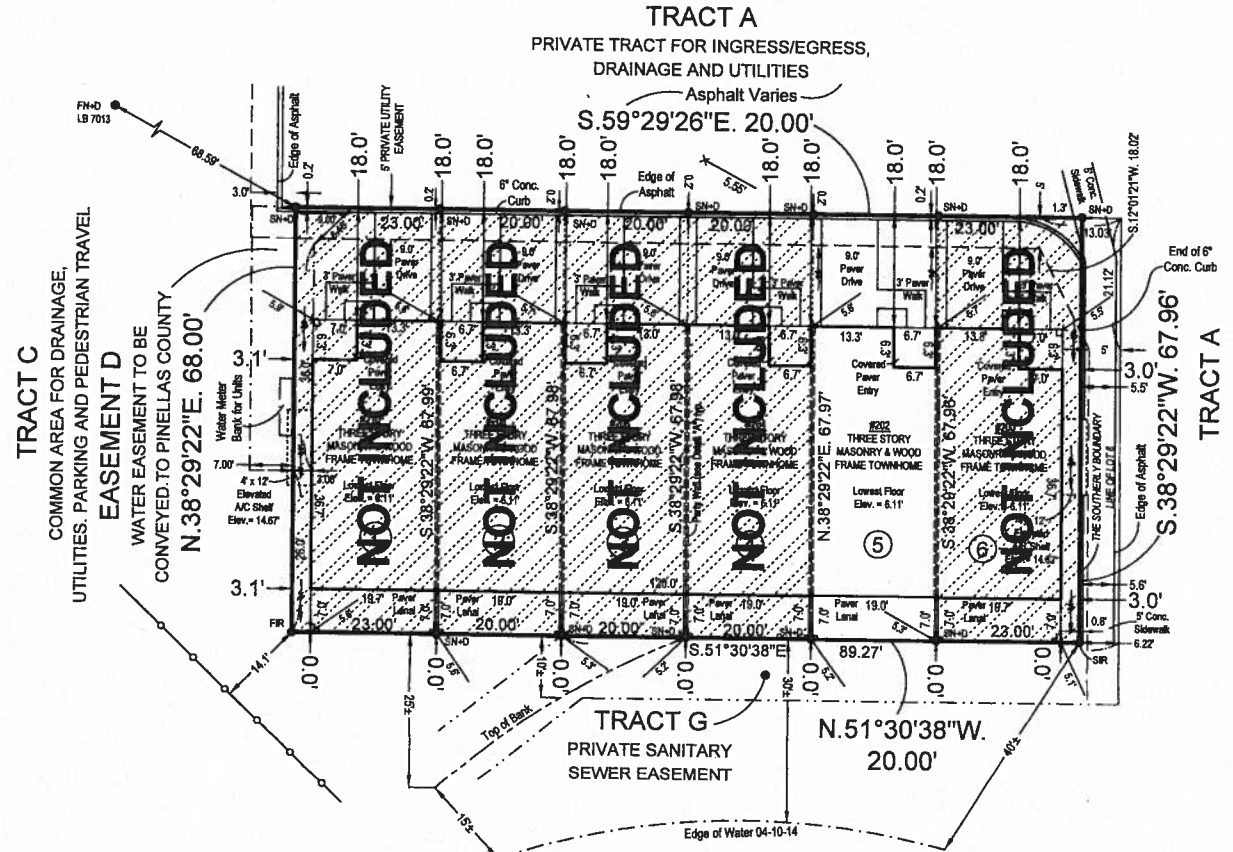
BASIS OF BEARINGS:
THE SOUTHERLY BOUNDARY LINE OF LOT 6 BEARS S.38°29'22"W. PER PLAT.

① = Lot Number

0.67' Party Wall (Typ.) Lot Line is Centerline of Party Wall



Detail "A" Not to Scale

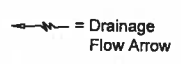


- LEGEND:**
- A = ARC
 - ▲ = 1/4\"/>

- NOTES:**
1. NO UNDERGROUND INSTALLATION OR IMPROVEMENTS HAVE BEEN LOCATED EXCEPT THOSE SHOWN HEREON.
 2. LANDMARK ENGINEERING & SURVEYING CORPORATION'S CERTIFICATE OF AUTHORIZATION NUMBER TO PROVIDE SURVEYING SERVICES IS LA3913.
 3. THIS DRAWING NOT VALID WITHOUT THE SIGNATURE AND ORIGINAL SEAL OF A FLORIDA REGISTERED SURVEYOR & MAPPER.
 4. AS USED ON THIS DRAWING, CERTIFY MEANS TO STATE OF DECLARE A PROFESSIONAL OPINION OF CONDITIONS REGARDING THOSE FACTS OR FINDINGS WHICH ARE THE SUBJECT OF THE CERTIFICATION AND DOES NOT CONSTITUTE A WARRANTY OR GUARANTEE, EITHER EXPRESSED OR IMPLIED. THIS CERTIFICATION IS ONLY FOR THE LANDS AS DESCRIBED. IT IS NOT A CERTIFICATE OF TITLE, CONVEYANCE OR FREEDOM OF ENCUMBRANCES.
 5. NO INSTRUMENTS OF RECORD REFLECTING EASEMENTS, RIGHTS-OF-WAY AND/OR OWNERSHIP WERE FURNISHED THIS SURVEYOR EXCEPT AS SHOWN HEREON.
 6. THE PURPOSE OF THE ELEVATIONS AND DRAINAGE FLOW ARROWS SHOWN HEREON IS TO PROVIDE THE CITY OF ST. PETERSBURG WITH THE AS-BUILT INFORMATION FOR THE LOT GRADING.

Total Lot Area in Square Feet ±
1359

VERTICAL DATUM NOTE:
THE ELEVATIONS SHOWN HEREON ARE REFERENCED TO (NAVD 88).



This Survey Certified To : **Kim A. Nelson & Maureen O. Nelson;**
First American Title Insurance Company

REVISIONS				
Description	Date	Dwn.	Ck'd	Order No.
Lot & Building Stakeout	5/13/14	WEN	BDD	21413519
Form Board Tie-In	6/25/14	JAR	BDD	21413871
Final Survey	2/10/15	TJW	CJA	21510411

SURVEYORS CERTIFICATE
This survey represented hereon conforms to the requirements of Chapter 5J-17, Florida Administrative Code in effect on the Survey Date shown.
Scott R. Fowler
SCOTT R. FOWLER DATE OF SIGNATURE
FLORIDA REGISTERED LAND SURVEYOR NO. 5185



Tampa (813) 621-7841
Fax (813) 664-1832
Web Page: www.lesc.com

LANDMARK
ENGINEERING & SURVEYING CORPORATION
8515 Palm River Road, Tampa, Florida 33619
CERTIFICATE OF AUTHORIZATION NO. LB 3913

Drawn: C. Zang April 12, 2014 Client No: 2012
Checked: CJA
Original No.: 21412813 Current No.: 21510411

Survey Date: 01/26/15

Plat page: 2 Grading page: C-40