PERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

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

Important: Read the instructions on pages 1 - 7.	•	
PROPERTY OWNER INFORMATION	toriosamica company Lac	
BUILDING OWNER'S NAME IN OF INDIAN ROCKS BERNON A - PROPERTY OWNER INFORMATION  CARL SILEGY BUILDING DEPT.	Polor Number	
	AND THE PROPERTY OF THE PROPER	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bidg. No.) OR P.O. ROUTE AND BOX NO.	COMPANIE NAME A	
<u>3 7TH. AVENUE</u>		
CITY STATE	ZIP CODE	
TNOIAN ROCKS BEACH PROPERTY DESCRIPTION (Lot and Block Numbers, Tex Percel Number, Legal Description, etc.)  FLORIDA  FLORIDA		
TOTA AND THE N US AR LAT O PLACE I HAVE BEEN A PARTY.		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.)	, 21	
RESIDENTIAL		
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE:     GPS (Type):		
(## - ## or ## ##### ) NAD 1927 NAD 1983 USGS Quad Maj	Other:	
. SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	V .	
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER   B2. COUNTY NAME		
and the second s	B3. STATE	
	FLORION	
NI BIOED BO. PEOOD	BO. BASE FLOOD ELEVATION(S)	
20NE(S)	(Zone ^ 'see depth of flooding)	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.	<u> </u>	
B11. Indicate the elevation datum used for the BFE in B9:  X  NGVD 1929   NAVD 1988   Other (D	escribe):	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Ar Designation Date:	ea (OPA)? LYes XNo	
	•	
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIR	RED)	
Building elevations are based on: ⊠Construction Drawings* □Building Under Construction*		
A new Elevation Certificate will be required when construction of the building is complete.	IFInished Construction	
C2. Building Diagram Number 6 (Select the building diagram most similar to the building for which this		
pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)	certificate is being completed - see	
C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A		
Complete Items C3z-i below according to the huilding diagram enceited in item co. Chief. H	1-A30, AR/AH, AR/AO	
Complete Items C3a-i below according to the building diagram specified in item C2. State the datum up the datum used for the REE in Section 8, convert the datum to the datum used for the REE in Section 8.	sed. 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.  Conversion/Comments		
CONVENSION CONTRIBUTES		
Elevation reference mark used <u>SEE COMMENTS</u> Does the elevation reference mark used appe	ar on the FIRM? LYes X No	
□ a) Top of bottom floor (including basement or enclosure) STORAGE 8.5 ft (m) ₹ □ b) Top of next higher floor 18.0 (m) \$	Laure R. Pany	
78 . O (m) 6		
c) Bottom of lowest horizontal structural member (V zones only)	## 7.00 ·	
O d) Attached garage (top of slab)	7-1-02	
e) Lowest elevation of machinery and/or equipment	3-1-02	
servicing the building NOT SHOWN		
U I) Lowest adjacent grade (LAG)		
g) Highest adjacent grade (HAG)		
h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade N/A		
i) Total area of all permanent openings (flood vents) in C3h		
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICAT	ION	
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify that the information is Section 4. Report Constitution in Section 4. Report Constitution 4. Report Constitution in Section 4.	o certify elevation information	
The state of the s		
CERTIFIE IS NAVE TO THE STATE STATE OF THE PROPERTY OF THE PRO	ection 1001.	
LAUREN R. PENNY UCENSE NUMBER		
TILE COMPANY NAME	4931	
ADDRESS	ASSOC., INC.	
SIGNATURE SEMINOLE, FLOR	RIDA ZIP CODE	
Janua R. Cerry DATE 3-1-02 TELEPH	(727) 398-4360	
FEMA Form 81.31 ALIG 90	PLACES ALL PREVIOUS EDITIONS	
// SEE BEVERSE SILIE FOR CONTINUATION DE		

IMPORTANT: In these spaces, copy the corresp BUILDING STREET ADDRESS (Including Annal Including		
CHICAGO (HICHORING ADI., UNIT SUIM	and/or Bldg No.) OP B O POUTE AN	
STH. AVENUE		ID BOX NO.
INDIAN ROCKS BEACH	STATE	ZIP CODE, Company NAIC Kurber
Велен	FLORIDA	200
SECTION D - SURVEYOR	ENGINEER OF FROM	4
Copy both sides of this Elevation Certificate for (1)	, ENGINEER, OR ARCHITECT CE	RTIFICATION (CONTINUED).
Copy both sides of this Elevation Certificate for (1) of COMMENTS	community official, (2) insurance age	ent/company, and (3) building owner.
BENCHMARK: PINELLAS	COUNTY DISK # /	70
		78
ELEUATION: 6.575		and the second s
SECTION E - BUILDING ELEVATION INFORM or Zone AO and Zone A (without BFE), complete Ite	ATION (SURVEY NOT REQUIRED	Check here if attachments
or Zone AO and Zone A (without BFE), complete Iter formation for a LOMA or LOMR-F, Section C must b	ms E1 through E3. If the Flevation	Codificate (a interstant of the A (WITHOUT BFE)
formation for a LOMA or LOMR-F, Section C must b	e completed.	Ceruicale is intended for use as supporting
Building Diagram Number (Select the build see pages 6 and 7. If no diagram accurately representations are provided to the second control of the	ing diagram most similar to the build	ding for which this cortificate is helps
see pages 6 and 7. If no diagram accurately repri-	esents the building, provide a sketch	h or photograph.)
(check one) the highest adjacent grade	circlesque) of the pullding is	t.(m)   lin.(cm)   labove or   libelow
For Zone AO only: If no flood depth number is an		balow
floodplain management ordinance? Yes	No. ( Links are The bottom floor	elevated in accordance with the community's
SECTION F - PROPERTY O	WHEN OR OWNERS BESTER	cial must certify this information in Section G.
he property owner or owner's authorized representa-	tive who as a labor of the wholese	NTATIVE) CERTIFICATION
he property owner or owner's authorized representa ommunity-issued BFE) or Zone AO must sign here.	ave who completes Sections A, B, a	and E for Zone A (without a FEMA-issued or
ROPERTY OWNER'S OR OWNER'S AUTHORIZED REP	RESENTATIVE'S NAME	
DDRESS	CITY	
GNATURE		STATE ZIP CODE
	DATE	TELEPHONE
OMMENTS		
		1 Charles to the land
SECTION G	- COMMUNITY INFORMATION (OF	Check here if attachments
local official who is authorized by law or ordinance tions A, B, C (or E), and G of this Elevation Certifical	to administer the community's flood	plain management and
tions A, B, C (or E), and G of this Elevation Certifica  The information in Section C was taken from of	ite. Complete the applicable item(s)	and sign below
The information in Section C was taken from ot engineer, or architect who is authorized by state	her documentation that has been sig	gned and embossed by a licensed supraves
elevation data in the Comments and halos	and orderiols little	unitation, (indicate the source and date of the
A community official completed Section E for a Zone AO.	hours the last of	and date of the
Zone AO.	building located in Zone A (without a	a FEMA-issued or community-issued BFE) or
The following information (Items G4-G9) is prov	ided for community floodalsis	
PERMIT NUMBER G5. DATE PERMIT	locuse Community loodplain mana	gernent purposes.
	W. DAIE	CERTIFICATE OF COMPLIANCE/OCCUPANCY
This permit has been issued for: New Constru		· ·
Elevation of as-built lowest floor (including become	A TALL S S S S S S S S S S S S S S S S S S	
at the building	3 site is:	ft.(m) Datum:
AL OFFICIAL'S NAME .	τιπε	ft.(m) Datum:
MUNITY NAME		_
NATURE	TELEPHONE	
	DATE	
IMENTS		
Form 81.31 ALIG 99		Check here if attachments
<del></del>		REPLACES ALL PREVIOUS EDITIONS