U.S. DEPARTMENT OF NUMERAND SECURIT ELEVATION CERTIFICATE FEDERAL EMERGENCY MANAGEMENT AGENCY OMB No. 1660-0008 National Flood Insurance Program Expiration Date: July 31, 2015 Important: Read the instructions on pages 1-9. SECTION A - PROPERTY INFORMATION FOR INSURANCE COMPANY USE A1. Building Owner's Name SCOTT G. DAVIS REVOCABLE LIVING TRUST Policy Number A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Company NAIC Number: 391 12TH AVENUE City INDIAN ROCKS BEACH State FL A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 2ND ADDN. TO RE-REVISED MAP OF INDIAN BEACH, LOTS 32-33, BLOCK 89, P.B. 23, PG. 72 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENIAL A5. Latitude/Longitude: Lat. N-27-53-50.1 Long. W-82-50-26.9 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 7 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>2634</u> sq ft a) Square footage of attached garage N/A sa ft b) Number of permanent flood openings in the crawlspace b) Number of permanent flood openings in the attached garage or enclosure(s) within 1.0 foot above adjacent grade within 1.0 foot above adjacent grade N/A Total net area of flood openings in A8.b Total net area of flood openings in A9.b N/A 2688 sq in sq in d) Engineered flood openings? ☐ Yes ☑ No d) Engineered flood openings? ☐ Yes ⊠ No SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B1. NFIP Community Name & Community Number B2.** County Name B3. State CITY OF INDIAN ROCKS BEACH 125117 **PINELLAS FLORIDA** B4. Map/Panel Number **B5. Suffix B6. FIRM Index Date B7. FIRM Panel** B9. Base Flood Elevation(s) (Zone B8. Flood 12103C0114 8/18/2009 Effective/Revised Date AO, use base flood depth) Zone(s) 9/3/2003 AE 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 ☑ NAVD 1988 Other/Source: 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: PIN CO DISK NARROW L Vertical Datum: <u>ELEV=13.79 NAVD1988</u> 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) 4.5 ☐ meters b) Top of the next higher floor <u>12.1</u> ☐ meters c) Bottom of the lowest horizontal structural member (V Zones only) N/A. ☐ feet ☐ meters d) Attached garage (top of slab) N/A. ☐ feet ☐ meters e) Lowest elevation of machinery or equipment servicing the building N/A. ☐ meters (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) <u>4.0</u> ✓ feet ☐ meters g) Highest adjacent (finished) grade next to building (HAG) 4.0 ☐ meters h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support N/A. ☐ feet ☐ meters SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

information. I certify that the information on I understand that any false statement may	this Certificate repre	esents my best efforts to inter	pret the data available.
☑ Check here if comments are provided		Were latitude and longitude	
		licensed land surveyor?	⊠ Yes □ No
Certifier's Name LAUREN PENNY, P.S.M.		License Nu	mber #4931
Title LAND SURVEYOR	Company Name	L. R. PENNY AND ASSOCIA	ATES, INC.
Address 10730 102 ND AVENUE NORTH	City SEMINOLE	State FL	ZIP Code 33778
Signature P	Date 10/09/2015	Telephone	727-398-4360

10-9-2015

Telephone 727-398-4360

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IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.					FOR INSURANCE CON	APANY USE
391 12 TH AVENUE City INDIAN ROCKS BEACH				W	Policy Number:	7
			ZIP Code		Company NAIC Number	
SECT	ION D – SURVEYOR, ENGINE	ER, OR ARCHI	TECT CEF	RTIFICATION	(CONTINUED)	
Copy both sides of this Elevation (Certificate for (1) community official,	(2) insurance age	ent/compan	, and (3) buildi	ng owner.	A ^V =
Comments C2.b): NEXT HIGHEI AQUIRED FROM GOOGLE EART	R FLOOR IS THE FOYER. THE NE TH. ELEVATIONS DETERMINED	EXT HIGER FLOO USING GPS MET	R IS THE F	ESIDENCE AT SY.	14.6'. LATITUDE LONG	ITUDE
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Signature		Date	10/09/2015			
SECTION E - BUILDING E	LEVATION INFORMATION (S	URVEY NOT R	EQUIRED	FOR ZONE	AO AND ZONE A (WITH	OUT BFE)
E1. Provide elevation information grade (HAG) and the lowest a a) Top of bottom floor (includi b) Top of bottom floor (includi clevation C2.b in the diagram 6–9 wi (elevation C2.b in the diagram Attached garage (top of slab) E3. Attached garage (top of slab) E4. Top of platform of machinery clevation C2.b in flood depordinance? Yes No	ing basement, crawlspace, or encloing basement, crawlspace, or encloing basement, crawlspace, or enclointh permanent flood openings provides) of the building is feet rand/or equipment servicing the building is the top of Unknown. The local official methods of the property owner (Corrized representative who complete	propriate boxes to sure) is ded in Section A II feet me meters above Iding is fthe bottom floor ust certify this info DR OWNER'S Fees Sections A. B.	show wheti	feet meter feet meter feet meter feet meter or 9 (see pages ove or below the HAG. meters caccordance with feet meters caccordance with feet meters f	meters. n is above or below the high s	est adjacent HAG. LAG. t higher floo
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ELEVATION CERTIFICATE, page 3

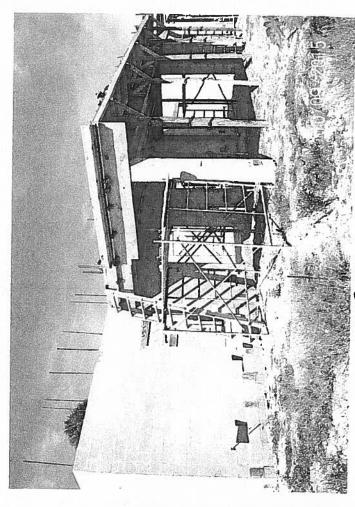
Building Photographs

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the co	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, 391 12 TH AVENUE	Policy Number	
City INDIAN ROCKS BEACH	State FL ZIP Code 33	3785 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.

indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page. SEE ATTACHED SHEET OF PHOTOGRAPHS



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