U.S. DEPARTMENT OF HOMELAND SEC Federal Emergency Management Agency National Flood Insurance Program

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Copy all pages of this Elevation Certificate and

A. Building Street Address (Including Apt., Unit, Suite, and/or Bidg, No.) or P.O. Routs and Company NAIC Number: A. Building Street Address (Including Apt., Unit, Suite, and/or Bidg, No.) or P.O. Routs and Company NAIC Number: A. Building Street Address (Including Apt., Unit, Suite, and/or Bidg, No.) or P.O. Routs and Company NAIC Number: A. Building Street Address (Including Apt., Unit, Suite, and/or Bidg, No.) or P.O. Routs and Company NAIC Number: A. Building Street Address (Including Apt., Unit, Suite, and/or Bidg, No.) or P.O. Routs and Company NAIC Number: A. Proprior of Lot 27, Boschiption (Lot and Block Numbers, Tax Parcoal Number, Legal Description, etc.) A. Profit on full of 2, Residential, Addition, Accessory, etc.) Residential A. LatitudesLongitude: Lat 27*52*47.04* Lorg, 82*51*92.13* Horizontal Datum: NAD 1927 NAD 1927 NAD 1927 A. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential Routs of Residential Routs of Residential Addition, Accessory, etc.) Residential Routs of Routs of Residential Routs of Routs of Residential Rou)PA)? ☐ Yes ⊠ No	Protected Area ((area or Otherwise	sources System (CBRS) ☐ CBRS ☐ OPA	Coastal Barrier Re	located in a Date: N/A	B12. Is the building located in a Designation Date: N/A
SECTION A - PROPERTY INFORMATION Symen's Name man Street Address (including Apt., Unit, Suite, and/or Bidg, No.) or P.O. Route and breat Address (including Apt., Unit, Suite, and/or Bidg, No.) or P.O. Route and breat State Floride State State Floride State Floride State Floride Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 127, Block 2A Indian Rocks Beach 128 (e.g., Residential, Non-Residential, Addition, Accessory, etc.) 129, Residential, Non-Residential, Addition, Accessory, etc.) 120, 82*51'02.13** 120, 82*5'1'02.13** 120, 83*6* 120, 83*6* 120, 83*6* 120, 83*6* 120, 83*6* 120, 83*6* 120, 83*6* 120, 83*6* 120, 83*6* 120, 83*6* 120, 83*6* 120, 84*6*				☐ NGVD 1929	sed for BFE in Item B9:	ition datum u	B11. Indicate eleva
SECTION A - PROPERTY INFORMATION Share's Name man Street Address (Including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and evard Evard State State Florida Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) X27, Block 2A Indian Rocks Beach See, Residential, Non-Residential, Addition, Accessory, etc.) Long, 82°51'02.13" Long bez°51'02.13" Horizontal Datun least 2 photographs of the building if the Certificate is being used to obtain flood insur ligram Number T ding with a crawispace or enclosure(s): e footage of crawispace or enclosure(s) footage of flood openings in A8.b sered flood openings in A8.b footage of attached garage: N/A sq ft sered flood openings? Yes No SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORM Rocks Beach 125117 B2. County Name B3. FIRM Panel G B5. Suffix B6. FIRM Index Revised Date B7. FIRM Panel Revised Date B8. Flood B9. E 11'		n Item B9:	od depth entered ii	βFE) data or base flo ned ☐ Other/Sour	Base Flood Elevation (E	ource of the I	B10. Indicate the s ☐ FIS Profile
SECTION A - PROPERTY INFORMATION Share Share State Sta		11.)9-03-2003		ဂ	12103C0113
Building Owner's Name IE. Senseman Building Street Address (Including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Gulf Bloulevard City Froperty Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential Latitude/Longitude: Lat 27*52*47.04" Long, 82*51*02.13" Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insura Building Diagram Number Tor a building with a crawispace or enclosure(s): a) Square footage of crawispace or enclosure(s): b) Number of permanent flood openings in A8.b C) Total net area of flood openings in A8.b N/A sq ft b) Number of permanent flood openings in the attached garage within 1.0 foot above c) Total net area of flood openings in A9.b N/A sq ft b) Number of permanent flood openings in A9.b N/A sq ft b) Number of permanent flood openings in A9.b N/A sq ft b) Number of permanent flood openings in A9.b N/A sq ft b) Number of permanent flood openings in A9.b N/A sq ft b) Number of permanent flood openings in A9.b N/A sq ft b) Residential N/A sq ft b) Number of permanent flood openings in A9.b N/A sq ft b) Number of permanent flood openings in A9.b N/A sq ft b) Residential Residential N/A sq ft b) Number of permanent flood openings in A9.b N/A sq ft b) Number of permanent flood openings in A9.b N/A sq ft b) Residential Residential N/A sq ft b) Residential Residential Residential Residential Residential N/A sq ft b) Number of permanent flood openings in A9.b N/A sq ft b) Number of permanent flood openings in A9.b Residential Res	levation(s) Base Flood Depth)	B9. Base Flood E (Zone A0, us	B8. Flood Zone(s)	37. FIRM Panel Effective/ Revised Date	FIRM Index Date	B5. Suffix	B4. Map/Panel Number
Building Owner's Name Building Street Address (Including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Gulf Bloulevard City Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) ortion of Lot 27, Block 2A Indian Rocks Beach Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Building Diagram Number T Building Diagram Number T For a building with a crawispace or enclosure(s): a) Square footage of crawispace or enclosure(s) b) Number of permanent flood openings in A8.b C) Total net area of flood openings in A9.b N/A sq ft b) Number of permanent flood openings in A9.b N/A sq ft b) Number of flood openings in A9.b Section B - FLOOD INSURANCE RATE MAP (FIRM) INFORMA Section B - FLOOD INSURANCE RATE MAP (FIRM) INFORMA	ᅵᅙᅈ		Vame	B2. County N	ommunity Number 117	ty Name & Co s Beach 125	B1. NFIP Communi City of Indian Rocks
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Building Owner's Name IE. Senseman Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Gulf Bloulevard City Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) ortion of Lot 27, Block 2A Indian Rocks Beach Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Building Diagram Number 7 For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s): b) Number of permanent flood openings in A8.b b) Number area of flood openings in A8.b c) Total net area of flood openings? No State Florida State Florida Cliy Florida State Florida Cliy Florida State Florida Cliy Florida State Florida Cliy Florida State Florida State Florida Cliy Florida Cliy Florida Horizontal Datun Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insura Building Diagram Number 7 For a building with a crawlspace or enclosure(s): 918.00 sq ft b) Number of permanent flood openings in A8.b 1000.00 sq in d) Engineered flood openings? No				N/A sq ft	ed garage	age of attache	a) Square foots
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Building Owner's Name E. Senseman Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Gulf Bloulevard		33785		Florida		ach	Indian Rocks B
SECTION A - PROPERTY INFORMATION Building Owner's Name E. Senseman Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No.		ZID Codo		2			204 Gulf Bloulevard
SECTION A - PROPERTY INFORMATION Building Owner's Name E. Senseman	AIC Number:	Company N	P.O. Route and	and/or Bldg. No.) or	uding Apt., Unit, Suite,	Address (incl	A2. Building Street Box No.
SECTION A - PROPERTY INFORMATION		Policy Numi				's Name	A1. Building Owner Karl E. Senseman
	ANCE COMPANT OSE	Polici Nuor		HORMATION .	ON A - PROPERTY IT	SECT	

FEMA Form 086-0-33 (7/15)

CATE ges 1–9. (2) insurance agent/company, and (3 FOR INSURANCE of Policy Number: Company NAIC Number: ZIP Code 33785 intion, etc.) Residental Horizontal Datum: NAD 1927 [2] Horizontal Datum: NAD 1927 [3] horizontal Datum: NAD 1927 [3] Horizontal Datum: NAD 1927 [3] Base Flood Elevation od (20ne AO, use Base In Item B9: the entered in Item B9: To 1988 Other/Source: To 1988 Other/Source: To Otherwise Protected Area (OPA)? [4]		
SYATION CERTIFICATE INTORIC Fidors by a microbrons to page from 15th building owner, authorise field, the introduces to preferencing and (5) building owner, attachment by (1) community office. (2) insurance specification and owner, and the first fill owner, and the	JRITY	OMB No. 1660-0008 Expiration Date: November 30, 2018
SECONDANTON CONTRIBUTION ACT CONTRIBUTION ACT CONTRIBUTION RESULT INFORMATION CONTRIBUTION CONTRIBUTION RESULT CONTRIBUTION RESULT CONTRIBUTION CONTRIBUTION RESULT CONTRIBUTION RESULT CONTRIBUTION CONTRIBUTION	EVATION CERTIFICATE portant: Follow the instructions on pages 1-9.	
IN Sales, marilor (Bidg, No.) or P.O. Route and Company MAC Number: Right State	attachments for (1) community official, (2) insurance	agent/company, and (3) building owner.
Sinte Sint	PERTY INFORMATION	FOR INSURANCE COMPANY USE Policy Number:
State Stat	nit, Suite, and/or Bldg. No.) or P.O. Route and	Company NAIC Number:
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Servision, Accessory, etc.) Recribental Long 8275/102.13* Horizontal Datum: NAD 1927 NAD 1923 Ing if the Certificate is being used to obtain flood insurance. June(s): June(s): SERVIN 44 ft In the attlached garage within 1.0 foot above adjacent grade NAD NAD NAD NAD NAD NAD NAD NAD	-	
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Sund State	ing if the Certificate is being used to obtain flood ins	wrance.
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mber B2. County Name Pinellas B3. State Pinellas B8. Flood Elevation(s) Effective Revised Date Revised Date Object One(s) (Zone AO, use Base Flood Depth) Revision (BFE) data or base flood depth entered in Item B9: 111 In Item B9: NGVD 1929 NAVD 1988 Other/Source: 111 Ter Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No CBRS OPA Replaces all previous editions. Form Page 1 of 6	LOOD INSURANCE RATE MAP (FIRM) INFOR	_
dex B7, FIRM Panel Effective! Revisited Date Revisited Date Revised Date Re		B3. State Florida
Revised Date AE	B7. FIRM Panel B8. Flood Effective/ Zone(s)	Base Flood Elevation(s) (Zone AO, use Base Flood Depth)
levation (BFE) data or base flood depth entered in Item B9: y Determined	AE	
ier Resources System (CBRS) area or Otherwise Protected Area (OPA)?	levation (BFE) data or base flood depth entered in li	tem 89:
er Resources System (CBRS) area or Otherwise Protected Area (OPA)?	X NAVD 1988 □	Other/Source:
☐ OPA all previous editions.	er Resources System (CBRS) area or Otherwise Pi	
	_ □ CBRS □ OPA	
	Replaces all previous editions.	Form Page 1 of 6

OMB No. 1660-0008 Expiration Date: Novemb

Form Page 2 of 6	Replaces all previous editions.	FEMA Form 086-0-33 (7/15) Repli
	12.63*	A/C is on cantilever platform elevation = 16.53' Hot water heater installed on side of building elevation = 1
d by the FEMA form.	C2(e), if applicable) decimal place, as this is automatically add meter box.	Columb(ty) (including type of equipment and location, per C2(e), if applicable) Data in C2.f-h is only accurate to 0.1'; ignore the second decimal place, as this is automatically added by the FE C2(e) = Lowest machinery servicing building is the power meter box.
gent/company, and (3) building owner.	nts for (1) community official, (2) insurance	Copy all this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company,
Ext.	Date Telephone 11-09-2019 (727) 831-1990	Signature of My Signature is
	State ZIP Code Florida 34689	City TARPON SPRINGS
call 新日本	**************************************	Address 1708 WATER OAK DRIVE
MU Nisday	Bar-1	Company Name INITIAL POINT LAND SURVEYING, LLC.
A BOOM		Title PLS
9/100 1000	License Number #7123	Certifier's Name JEFF M. HARTLEY
law to certify elevation information. Je. I understand that any false Check here if attachments.	weyor, engineer, or architect authorized by my best efforts to interpret the data availader 18 U.S. Code, Section 1001. ensed land surveyor? ⊠Yes □ No	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. Were latitude and longitude in Section A provided by a licensed land surveyor? ⊠ Yes □ No □ Check here if attachments.
CATION	SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION	SECTION D - SURVEYOR, I
5.80 ⊠ feet	or stairs, including	 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support
5.80 X feet meters	(HAG)	g) Highest adjacent (finished) grade next to building (HAG)
5.70 X feet meters	(LAG)	f) Lowest adjacent (finished) grade next to building (LAG)
11.30 X feet meters		 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)
6.13 X feet meters		
∑ [C) Roftom of the lowest horizontal structural member (V Zones only)
6.13 × feet meters	•	
neck the measur	as that used for the BFE.	
	ource:	Indicate elevation datum used for the elevations in items a) through n) below.
	Vertical Datum: NAVD 88 (3.14')	Benchmark Utilized: NARROW RM 3
E, AR/A1-A30, AR/AH, AR/AO. Rico only, enter meters.	/E, V1–V30, V (with BFE), AR, AR/A, AR/ ing diagram specified in Item A7. In Puerto	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, Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.
tion* X Finished Construction	n Drawings*	C1. Building elevations are based on: Construction Drawings* Building Under Construction of the building is complete.
QUIRED)	SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	SECTION C - BUILDING ELE
Company NAIC Number	ZIP Code da 33785	City State Indian Rocks Beach Florida
Policy Number:	Bidg. No.) or P.O. Route and Box No.	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No 204 Gulf Bloulevard
FOR INSURANCE COMPANY USE	nformation from Section A.	IMPORTANT: In these spaces, copy the corresponding information from Section A.
Expiration Date: November 30, 2018		ELEVATION CERTIFICATE

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Check here if attachments.	= ⁻		
	- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10		Comments
•	Telephone	Date	Signature
ZIP Code	State	City	Address
without a FEMA-issued or the best of my knowledge.	ns A, B, and E for Zone A (v s A, B, and E are correct to t	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	The property owner community-issued B Property Owner or C
CATION	PRESENTATIVE) CERTIFIC	SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION	
□ above or □ below the HAG. ance with the community's fy this information in Section G.	☐ feet ☐ meters ☐ n floor elevated in accordance local official must certify the	Top of platform of machinery and/or equipment ☐ feet ☐ meters ☐ above or ☐ below the HA0 servicing the building is 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	E4. Top of platform servicing the bu E5. Zone AO only: I floodplain mana
above or below the HAG.	☐ feet ☐ meters ☐	Attached garage (top of slab) is	E3. Attached garage
ee pages 1–2 of Instructions), ☐ above or ☐ below the HAG.	ion A Items 8 and/or 9 (see	For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages the next higher floor (elevation C2.b in the diagrams) of the building is	E2. For Building Dia the next higher the diagrams) o
	☐ meters [Top of bottom floor (including basement, crawlspace, or enclosure) is	b) Top of botton crawlspace,
elevation is above or below above or below the HAG.	xes to show whether the eld	Provide elevation information for the following and check the appropriate boxes to show whether the elevation the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement,	E1. Provide elevation the highest adjact a) Top of botton crawlspace,
or LOMR-F request, sed. In Puerto Rico only,	ntended to support a LOMA Check the measurement us	For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LON complete Sections A, B,and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In enter meters.	For Zones AO and A complete Sections A enter meters.
IRED)	ON (SURVEY NOT REQUITHOUT BFE)	SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)	
Company NAIC Number	xde	State ZIP Co Florida 33785	City Indian Rocks Beach
Policy Number:	Box No.	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 204 Gulf Bloulevard	Building Street Address 204 Gulf Bloulevard
FOR INSTIRANCE COMPANY LISE		se spaces conv the corresponding information from Sec	INPORTANT: In these spaces conv

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Form Page 3 of 6	e if attachments.			ZIP Code	AA-issued or y knowledge.	ommunity's on in Section G.	below the HAG.	below the HAG.	below the LAG. f Instructions),	below the HAG.	ove or below	request, o Rico only.	mber	8 vember 30, 2018 COMPANY USE	
															The second second

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		Expiration Date. NOVember 30, 40 ro
MPORTANT: In these spaces, copy the corresponding information from Section A.	sponding information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apr., Oill, So 204 Gulf Bloulevard	204 Gulf Bloulevard	rolly Number.
City Indian Rocks Beach	State ZIP Code Florida 33785	Company NAIC Number
SECTION G	N G - COMMUNITY INFORMATION (OPTIONAL)	.)
The local official who is authorized by law or ord Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, ent	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.	nanagement ordinance can complete ign below. Check the measurement
G1. The information in Section C was take engineer, or architect who is authorize data in the Comments area below.)	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.)	the source and date of the elevation
G2. A community official completed Section or Zone AO.	A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.	:MA-issued or community-issued BFE)
G3. The following information (Items G4-4	The following information (Items G4–G10) is provided for community floodplain management purposes	ement 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 ☐ 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	eet meters Datum
Local Official's Name	Title	
Community Name	Telephone	
Signature	Date	
Comments (including type of equipment and location, per C2(e), if applicable)	cation, per C2(e), if applicable)	
	Q .	Check here if attachments
		Check here if attachments.

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Check here if attachments. Form Page 4 of 6		s Datum	s Datum	cate of /Occupancy Issued	community-issued BFE)	y a licensed surveyor, nd date of the elevation	ordinance can complete eck the measurement	NAIC Number

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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Policy Number:

Company NAIC Number	ZIP Code	State	City
			204 Gulf Bloulevard
Policy Number:	or P.O. Route and Box No.	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number:	Building Street Address
FOR INSURANCE COMP	n from Section A.	IMPORTANT: In these spaces, copy the corresponding information from Section A.	IMPORTANT: In these

Indian Rocks Beach

Florida

33785

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.



Photo One Caption Front View

Clear Photo One



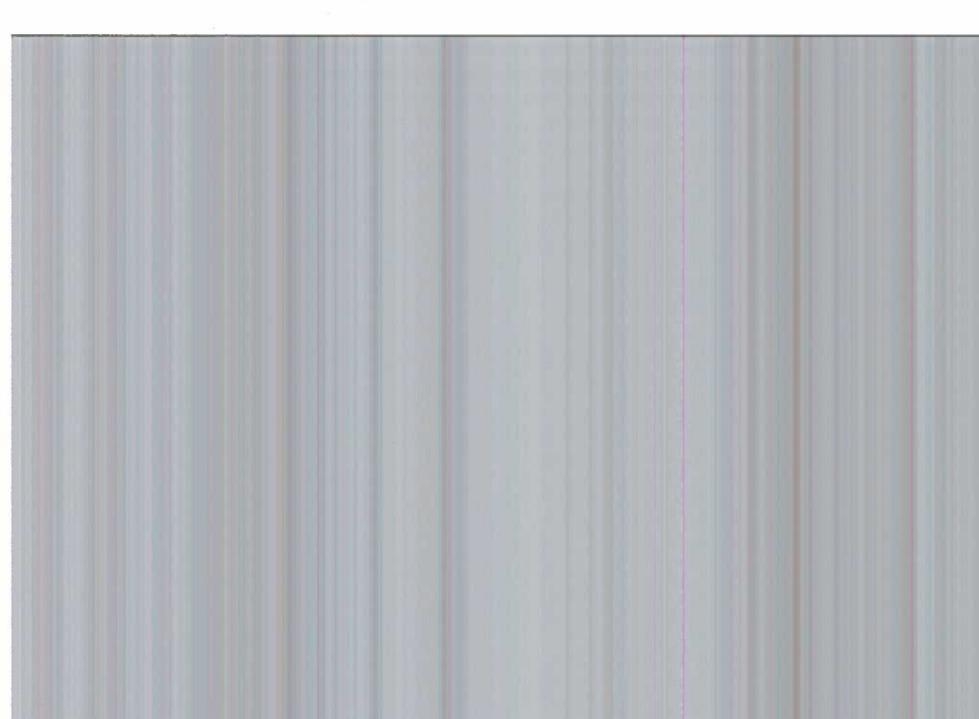
Photo Two Caption Rear View

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Clear Photo Two



Indian Rocks Beach

State Florida

BUILDING PHOTOGRAPHS

Continuation Page

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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.
204 Gulf Bloulevard ZIP Code 33785 Company NAIC Number FOR INSURANCE COMPANY USE Policy 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.



Photo Three Caption Right View

Clear Photo Three



Photo Four Caption Left View

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Clear Photo Four

