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

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

A1. Building Owner's Name FRANCIS CAMPBELL AND IRENE CAMPBELL A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2702 1st Street City State Indian Rocks Beach Florida A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, et	Policy Number: Company NAIC Number: ZIP Code 33785
Box No. 2702 1st Street City State Indian Rocks Beach Florida	ZIP Code
Indian Rocks Beach Florida	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, et	33703
LOt 8, Block 2 - Re-Revised Map of Indian Beach - Plat Book 5, Page 6 - Parcel #01-30-14-4	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential	ial n
A5. Latitude/Longitude: Lat. 27.90898°N Long82.84578°W Horizonta	al Datum: NAD 1927 X NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain floor	od insurance.
A7. Building Diagram Number 6	
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s) 332.00 sq ft	
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foo	ot above adjacent grade 2
c) Total net area of flood openings in A8.b 400.00 sq in	** ** ** *** *** *** *** *** *** *** *
d) Engineered flood openings? Yes No	
A9. For a building with an attached garage:	May me that
a) Square footage of attached garage sq ft	0 -007 88
b) Number of permanent flood openings in the attached garage within 1.0 foot above ad	ljacent grade 0 10 10 10 10 10 10 10 10 10 10 10 10 1
c) Total net area of flood openings in A9.b 0.00 sq in	THE COME NO
d) Engineered flood openings? ☐ Yes ☒ No	- W II VS - 200
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) IN	FORMATION
B1. NFIP Community Name & Community Number B2. County Name Indian Rocks Beach - 125117 B2. County Name	B3. State Florida
B4. Map/Panel Number B5. Suffix Date B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date B8. Flood Zone(s) 12103C0111 G 08-18-2009 09-03-2003 AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 11.0'
- Side (0 Digital Side (1982) 1 Digital Side	- 100 Aug 19
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered	d in Item B9:
FIS Profile X FIRM Community Determined Other/Source:	Towns of the same and the same
	Other/Source:
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988	
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise	ise Protected Area (OPA)? Yes N
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwin	ise Protected Area (OPA)? Tyes X N

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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. 2702 1st Street				Policy Number:			
	State Florida	ZIP Code 33785	Company NAIC	Number			
SECTION C - BUILDING	ELEVATION INFO	RMATION (SURVEY R	EQUIRED)	12			
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: Pinellas County Map #172 (Hall C) Vertical Datum: NAVD 1988							
Indicate elevation datum used for the elevations i	n items a) through h) below.					
☐ NGVD 1929 🖾 NAVD 1988 ☐ Othe		" DEE		·····			
Datum used for building elevations must be the sa	ame as that used to	rthe BFE.	Check the measurement used.				
 a) Top of bottom floor (including basement, craw 	Ispace, or enclosure	e floor)	3.9 × feet	meters			
b) Top of the next higher floor		4	14.8 X feet	meters meters			
c) Bottom of the lowest horizontal structural men	nber (V Zones only)		0.0 X feet	meters meters			
d) Attached garage (top of slab)			0.0 × feet	meters			
e) Lowest elevation of machinery or equipment s (Describe type of equipment and location in C			14.1 × feet	☐ meters			
f) Lowest adjacent (finished) grade next to build	ing (LAG)		3.6 × feet	meters meters			
g) Highest adjacent (finished) grade next to build	ling (HAG)		3.9	meters me			
h) Lowest adjacent grade at lowest elevation of c structural support	deck or stairs, includ	ing	3.9 × feet	☐ meters			
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.							
Were latitude and longitude in Section A provided by a			⊠ Check he	ere if attachments.			
Certifier's Name	License Numbe	er	00	35 (19)			
John O. Brendla	4601						
Title Surveyor			P	lace			
Company Name John C. Brendla & Associates, Inc.				Spal			
Address			Ai	Seal 4601			
4015 82nd Avenue North	=			lere "			
City Pinellas Park	State Florida	ZIP Code 33781	08	-03-2020			
Signature None	Date 08-03-2020	Telephone (727) 576-7546	Ext. None				
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.							
Comments (including type of equipment and location, per C2(e), if applicable) C2) a. Storage and Parking C2) b. The lowest living floor C2) e. The A/C Bracket located on th North side of the house.							
NOTE: There are 2 Smart Vents Model #1540-520 at 200 square inch per vent for a total of 400 square inches							
Benchmark: Pinellas County Map #172 (Hall C) Elev. 4.824' NGVD adjusted to Elev. 4.08' NAVD - MSL = 0.00							

ELEVATION CERTIFICATE

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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. 2702 1st Street				Policy Number:	
City Indian Rocks Beach	State Florida	ZIP Code 33785	е	Company NAIC	Number
SECTION E -	- BUILDING ELEVATION FOR ZONE AO AND	INFORMATION (S ZONE A (WITHO	URVEY NOT UT BFE)	REQUIRED)	
For Zones AO and A (without BFE), co complete Sections A, B,and C. For Iter enter meters.	implete Items E1–E5. If the ns E1–E4, use natural grad	Certificate is intend e, if available. Chec	ed to support a k the measurer	LOMA or LOMF ment used. In Pu	R-F request, uerto Rico only,
E1. Provide elevation information for the highest adjacent grade (HAG)	and the lowest adjacent gra	appropriate boxes to ade (LAG).	show whether	the elevation is	above or below
a) Top of bottom floor (including the crawlspace, or enclosure) is	NEW YORK CONTRACTOR AND A	osino ban 1711 - on	feet meters	s 🔲 above or	below the HAG.
 b) Top of bottom floor (including to crawlspace, or enclosure) is 	pasement,		feet meter	s 🔲 above or	below the LAG.
E2. For Building Diagrams 6–9 with petter the next higher floor (elevation C2	ermanent flood openings pro		Items 8 and/or	_	-2 of Instructions),
the diagrams) of the building is E3. Attached garage (top of slab) is	=0.		feet meter		below the HAG.
E4. Top of platform of machinery and/	or equipment		LĪ.	_	
servicing the building is	The comment serve as a		feet meter		below the HAG.
E5. Zone AO only: If no flood depth no floodplain management ordinance		or the bottom ποοι Unknown. The loc	al official must o	cordance with the certify this inform	nation in Section G.
SECTION E - E	PROPERTY OWNER (OR O	WNFR'S REPRES	ENTATIVE) CE	RTIFICATION	
The property owner or owner's authorized community-issued BFE) or Zone AO me Property Owner or Owner's Authorized	nust sign here. The statemen	nts in Sections A, B	, and E are con	rect to the best o	of my knowledge.
Address		City	Sta	ate	ZIP Code
Signature	State age. C	Date	Те	lephone	
Comments					
5.5		aliasi Santa Ja			
		chel section			
		alas arminis			
		1			
					here if attachments.

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, S 2702 1st Street	Policy Number:						
City Indian Rocks Beach	State Florida	ZIP Code 33785	Company NAIC Number				
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–G10) 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 of the building:	g basement)	fe	eet meters Datum				
G9. BFE or (in Zone AO) depth of flooding at	the building site:	fe	eet meters Datum				
G10. Community's design flood elevation:		fe	eet meters Datum				
Local Official's Name	Title	•					
Community Name	Tel	ephone	ia.				
Signature	Dat	е					
Comments (including type of equipment and lo	cation, per C2(e), if applicable	e)					
Commons (managers)		-,					
			S 2				
	4						
		7.5					
			Check here if attachments.				

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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IMPORTANT: In these spaces, copy the corresponding information from Section A.

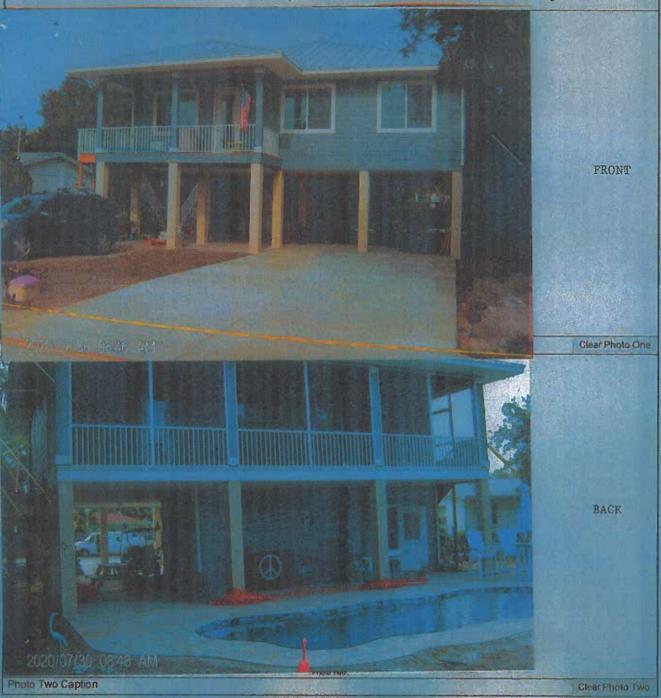
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

Policy Number:

City
State
ZIP Code
Indian Rocks Beach
Company NAIC Number

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.



FEMA Form 086-0-33 (12/19)

Replaces all previous editions.

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BUILDING PHOTOGRAPHS

Continuation Page

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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. Policy Number 2702 1st Street State ZIP Code Company NAIC Number Indian Rocks Beach Florida 33785

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, it required, "Right Side View," and "Left Side View." When applicable, photographs must show the roundation with representative examples of the flood openings or vents, as indicated in Section A8.

VENT

Clear Photo Three

Photo Four

Photo Four Caption

Clear Photo Four

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ELEVATION CERTIFICATE

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