2001188.1 DECEIVE

EL

ONAL FLOOD INSURANCE PROGRAM	O.M.B. No. 3067-0077 Expires December 31, 200
EVATION CERTIFICATE	=xp::00 D000mbc: 01, 200

.min 1 8 2003 Impo	rtant: Read the instructions on pages 1 -	7.		
SEC	TION A - PROPERTY OWNER INFORMATION	For Insurance Company Use:		
BUILDING OWNER'S NAME ROBERT BASHAM		Policy Number		
BUILDING STREET ADDRESS (Including Apt., Unit, 2718 GIII.F. BOUL EVARD, COTTA	Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO	Company NAIC Number		
CITY	STATE	. ZIP CODE		
INDIAN ROCKS BEACH	EI ORTO	; ZIF CODE		
PROPERTY DESCRIPTION (Lot and Block Numbers	Tax Parcel Number, Legal Description, etc.)			
BUILDING USE (e.g., Residential, Non-residential, Ac RESIDENTIAL	AT BOOK 121, PAGES 94 AND 95 dition, Accessory, etc. Use a Comments area, if neces	PINELLAS COUNTY,		
	ORIZONTAL DATUM:			
/ M M O M M M M M M M M M M M M M M M M	D 1927 I NAD 1983 SOURCE: GPS (
, N	.G.V.D. 1929	Quad Map Other		
	FLOOD INSURANCE RATE MAP (FIRM) INFO	PMATION		
B1. NFIP COMMUNITY NAME & COMMUNITY NUM				
		B3. STATE		
CITY OF INDIAN ROCKS BEACH/125		FLORIDA		
1 1444555	4 TF	LOOD B9. BASE FLOOD ELEVATION(S)		
125117 0001 B 3/2/	00 1-1-1-	NE(S) (Zone AO, use depth of flooding)		
B10. Indicate the source of the Base Flood Eleval		11" 10.00'		
B11. Indicate the elevation datum used for the BF	community Determined Other (Describe):	01 (6 1)		
B12. Is the building located in a Coastal Barrier R	DESCUESCOS System (CRRS) and an Otherwise Book	Other (Describe):		
Designation Date:		ected Area (OPA)? Yes <u>K</u> No		
SECTION C - BU	ILDING ELEVATION INFORMATION (SURVEY	REQUIRED)		
C1. Building elevations are based on: _ Constr				
A new Elevation Certificate will be required v	when construction of the building is complete	uction Finished Construction		
C2. Building Diagram Number 1 (Select the I	ouilding diagram most similar to the building for w	high this contificate is being completed.		
pages 6 and 7. If no diagram accurately repr	esents the building, provide a sketch or photograph	sh)		
C3. 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 C3.a-i below according to the building diagram specified in Item C2. State the datum used. 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.				
Datum NGVD 1929 Conversion/Comment	s PLR 71A RESET (ELEVATION: 8.8	//)		
Elevation reference mark used PIR 71A	RESET Does the elevation reference mark us	ed appear on the FIRM? Yes X No		
 a) Top of bottom floor (including basement 	or enclosure) 12, 55 h (W	N = 1 A 10		
☐ b) Top of next higher floor	or enclosure)12 <u>55</u> h.(H	√ 🥉 GUY D. HALE		
 c) Bottom of lowest horizontal structural m 	ember (V zones only) N/A ft.(m	ິງ ສູ P.L.S. #4626		
d) Attached garage (top of slab)	9.49' ft.(y			
e) Lowest elevation of machinery and/or en	quipment			
servicing the building (Describe in a Co	mments area.) UNDER_CONSTRUCTION ft.(n	a) bet the second of the secon		
f) Lowest adjacent (finished) grade (LAG)	INDER CONSTRUCTION R.(II			
g) Highest adjacent (finished) grade (HAG)	INDER CONCERNICATION ft.(n			
 h) No. of permanent openings (flood vents) 	UNDER—CONSTRUCTION ft.(m) within 1 ft. above adjacent grade			
i) Total area of all permanent openings (flo	od vents) in C3.h 0 sq. in. (sq. cm)	JUNE 13, 2003		
SECTION D - SI	JRVEYOR, ENGINEER, OR ARCHITECT CERT	FICATION		
This certification is to be signed and sealed by a	and surveyor, engineer, or architect authorized b	y law to certify elevation information.		
I certify that the information in Sections A, B, and C 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.				
CERTIFIER'S NAME GUY D. HALE	LICENSE NUI	F.L.S. #4020		
PROFESSIONAL LAND SURVEY		LE, LAND SURVEYING		
ADDRESS 1110 OVERCASH DRIVE, SUI	TE "C" DUNEDIN, FLÒ	RIDA ZIP CODE 34698		
That Ih I	Mara to ocioe	ELEPHONE		
FEMA Form 81-31, January 2003	See reverse side for continuation.	734-4266 (FAX) 734-3228 Replaces all previous editions		

IMPORTANT: In these spaces	, copy the corresponding information from	n Section A.	For Insurance Company Use:
BUILDING STREET ADDRESS (Inc. 2718 GULF BOULEVA		ROUTE AND BOX NO.	Policy Number
CITY INDIAN ROCKS BEAC	STATE FLORIDA	ZIP CODE	Company NAIC Number
SECTIO	N D - SURVEYOR, ENGINEER, OR ARCHI	TECT CERTIFICATION (CON	ITINUED)
Copy both sides of this Elevation	Certificate for (1) community official, (2) insu	rance agent/company, and (3) building owner.
COMMENTS .			
A STATE OF THE STA			· · · · · · · · · · · · · · · · · · ·
CECTION E DINI DINO EL	EVATION NEODMATION (CURVEY NOT B	FOURTRY FOR ZONE AO A	Check here if attachments
	EVATION INFORMATION (SURVEY NOT RITED TO THE LITER TO THE	<u> </u>	
	F, Section C must be completed.	s Elevation Certificate is intent	area for use as supporting
	(Select the building diagram most similar	to the building for which this o	certificate is being completed -
see pages 6 and 7. If no diag	gram accurately represents the building, provi	de a sketch or photograph.)	•
	cluding basement or enclosure) of the buildin	ng is ft. (m) in.	(cm) above or below
	ent grade. (Use natural grade, if available.)		-
	th openings (see page 7), the next higher floo above the highest adjacent grade. Complete		
	chinery and/or equipment servicing the buildin		
	ent grade. (Use natural grade, if available.)	'y '0 ' ' (\\\\\ \\\\\\\\\\\\\\\\\\\\\\	(6.1.)
5. For Zone AO only: If no flood	depth number is available, is the top of the b		
	ance? Yes No Unknown. Th		
	N F - PROPERTY OWNER (OR OWNER'S I		
	uthorized representative who completes Section nunity-issued BFE) or Zone AO must sign her		
	'S AUTHORIZED REPRESENTATIVE'S NAME		
ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPHO	ONE
COMMENTS			•
			Check here if attachments
	SECTION G - COMMUNITY INFORM		
he local official who is authorized	by law or ordinance to administer the commu	unity's floodplain managemen	t ordinance can complete
ections A, B, C (or E), and G or to	his Elevation Certificate. Complete the applic n C was taken from other documentation that	able item(s) and sign below.	ed by a licensed surveyor
engineer, or architect who	o is authorized by state or local law to certify e	elevation information. (Indicate	te the source and date of the
elevation data in the Com	ments area below.)		`,
	pleted Section E for a building located in Zone	A (without a FEMA-issued or	community-issued BFE) or
Zone AO. 3.1 The following information.	(Items G4-G9) is provided for community floo	idolain management nurnoses	•
<u> </u>		•	
34. PERMIT NUMBER	G5. DATE PERMIT ISSUED	ISSUED	COMPLIANCE/OCCUPANCY
7. This permit has been issued for	or: New Construction Substantia	al Improvement	
Elevation of as-built lowest floor	or (including basement) of the building is:	·	_ ft. (m) Datum:
9. BFE or (in Zone AO) depth of	flooding at the building site is:	•	_ ft. (m) Datum:
OCAL OFFICIAL'S NAME	TIT	TE	
COMMUNITY NAME	TEI	LEPHONE	
SIGNATURE	DA	TE	
COMMENTS			
•		· · · · · · · · · · · · · · · · · · ·	Market Assessment of the Control of
			•

Check here if attachments