U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program CITY MGR'S OFFICE

Wo # 5993

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the institutions 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.

SECTION A - PROPERTY INFORMATION					FOR INSUF	RANCE COMPANY USE		
A1. Building Owner's Name					Policy Num	ber:		
	John M. Perruccio							
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.319 Harbor Drive				Company N	AIC Number:			
City				State		ZIP Code		
Indian Rocks Be	each			Florida		33785		
• •		nd Block Numbers, Ta 17th Addition (Pinella				,		
A4. Building Use (e.	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential							
A5. Latitude/Longitude: Lat. 27°54'28.9" N Long. 82°50'33.6" W Horizontal Datum: \(\backsquare{N} \) NAD 1927 \(\backsquare{N} \) NAD 1983								
	****	hs of the building if the					oz. <u>M</u> o.	
A7. Building Diagran	-	_		· · · · · · · · ·-				
		pace or enclosure(s):						
		space or enclosure(s)		1	879.74 sq ft			
b) Number of pe	ermanent flo	ood openings in the cr	awispace	e or enclosure	 e(s) within 1.0 foot	above adjacent gra	ide 10	
c) Total net area		-		280.00 sq in		,		
			······	•				
-								
A9. For a building wit				AL/A 6				
a) Square footage of attached garageN/A sq ft								
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A								
c) Total net area of flood openings in A9.b sq in								
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 "independent city"			Florida	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel	B8. Flood Zone(s)	B9. Base Flood El (Zone AO, use	evation(s) Base Flood Depth)	
12103C0112	G	08-18-2009	Revised Date 09-03-2003 AE 10.0		10.0 & 11.0).0 & 11.0		
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 X NAVD 1988 Other/Source:								
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Tyes X No								
Designation Date: CBRS CPA								

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

LEEVATION OERTH TOAT				Lхрва	JOH Date. 1	November 30, 20
IMPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSURANCE COMPANY USE		
Building Street Address (including A 319 Harbor Drive	.pt., Unit, Suite, and/or	Bldg. No.) or P.O. Rou	te and Box No.		Number:	
City	Star		Code	Comp	any NAIC I	Number
Indian Rocks Beach	Flor	ida 3378				
SECTIO	N C – BUILDING EL	EVATION INFORMAT	ION (SURVEY R	EQUIRI	ED)	
C1. Building elevations are based *A new Elevation Certificate w		n Drawings*	•	uction*	⊠ Finis	hed Construction
C2. Elevations – Zones A1–A30, A Complete Items C2.a–h belov	AE, AH, A (with BFE), v according to the build	VE, V1–V30, V (with BF ding diagram specified i	E), AR, AR/A, AR n Item A7. In Puerl	/AE, AR to Rico (/A1–A30, / only, enter	AR/AH, AR/AO. meters.
Benchmark Utilized: "HALL C	* PID AG0554	Vertical Datum:	NAVD 1988			
Indicate elevation datum used	for the elevations in it	ems a) through h) below	v.			
☐ NGVD 1929 ☐ NGVD 1929	AVD 1988 🔲 Other/S	Source:				
Datum used for building eleva	tions must be the sam	e as that used for the B	FE.	OL		
a) Tax of bottom floor (includ				5.0	eck the me	easurement used. meters
a) Top of bottom floor (includ		ace, or enclosure noor)				
b) Top of the next higher floo				15.8	⊠ feet	∐ meters
c) Bottom of the lowest horizon		er (V Zones only)		N/A	feet	∐ meters
d) Attached garage (top of sl	ab)			N/A	feet	☐ meters
 e) Lowest elevation of maching (Describe type of equipme 	nery or equipment serv nt and location in Com	ricing the building ments)		12.4		meters
f) Lowest adjacent (finished)	grade next to building	(LAG)		4.4		meters
g) Highest adjacent (finished)	grade next to building	(HAG)		5.0		meters
h) Lowest adjacent grade at l structural support	owest elevation of dec	k or stairs, including		4.4	⊠ feet	meters
SECTION	ON D - SURVEYOR,	ENGINEER, OR ARC	HITECT CERTIF	ICATIO	N	
This certification is to be signed an I certify that the Information on this statement may be punishable by fi	: Certificate represents	my best efforts to inten	pret the data avails	/ law to able. I ur	certify elev	ration information that any false
Were latitude and longitude in Sec	-	· ·		×	Check hen	e if attachments.
Certifier's Name		License Number				No More
Dennis J. Eyre		2865				
Title Professional Surveyor and Mapper						WW.
Company Name Geodata Services, Inc.				18		X
Address 1166 Kapp Drive				1		
City		State	ZIP Code		W.	
Clearwate	4	Florida	33765		TEU	UM EYRE
Signature		Date	Telephone	Ext.		
Copy all pages of this Elevation Copt	ficate and all attachme	12-19-2019 ints for (1) community off	(727) 447-1763 icial, (2) insurance	agent/co	mpany, an	d (3) building own
Comments (including type of equip A5. Determined with Gip program C2.a) Ground floor enclosure. C2. Additional equipment elevations: E A This elevation certificate includes a	"Google Earth". A8. Gr b) 2nd floor (1st living t lectric meter, located a ir conditioner and wate	round floor enclosure da floor). C2.e) Elevator eq it right side of building, o er heater located on roo	juipment, located in elevation = 13.6 fe f: Elevations not de	nside rig et.	jht side gai	ent data. rage.

ELEVATION CERTIFICATE

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MPORTANT: In these spaces, copy the c	corresponding information	on from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Un 319 Harbor Drive	it, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
Indian Rocks Beach	Florida	33785	
SECTION E - BU		FORMATION (SURVEY NO DNE A (WITHOUT BFE)	T REQUIRED)
For Zones AO and A (without BFE), complete Sections A, B,and C. For Items E enter meters.			
E1. Provide elevation information for the for the highest adjacent grade (HAG) and	ollowing and check the app the lowest adjacent grade	propriate boxes to show wheth (LAG).	ner the elevation is above or below
 Top of bottom floor (including base crawlspace, or enclosure) is 	ment,		ers above or below the HAG.
 b) Top of bottom floor (including base crawlspace, or enclosure) is 	ment,		ers above or below the LAG.
E2. For Building Diagrams 6-9 with perma		ded in Section A Items 8 and/	or 9 (see pages 1–2 of Instructions),
the next higher floor (elevation C2.b in the diagrams) of the building is			ers above or below the HAG.
E3. Attached garage (top of slab) is		feet	ers above or below the HAG.
E4. Top of platform of machinery and/or ed servicing the building is	quipment	feet _ met	ers above or below the HAG.
E5. Zone AO only: If no flood depth number floodplain management ordinance?	er is available, is the top of Yes No Unk	f the bottom floor elevated in a known. The local official mus	accordance with the community's at certify this information in Section G.
SECTION F PROP	PERTY OWNER (OR OWI	NER'S REPRESENTATIVE) (CERTIFICATION
The property owner or owner's authorized rommunity-issued BFE) or Zone AO must s Property Owner or Owner's Authorized Rep	sign here. The statements	etes Sections A, B, and E for 2 in Sections A, B, and E are o	Zone A (without a FEMA-issued or orrect to the best of my knowledge.
Address		City	State ZIP Code
Signature		Date 1	elephone
Comments			
			Check here if attachments.

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IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, S 319 Harbor Drive	No. 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 of Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, er	Certificate. Comp	ster the community's floodpl lete the applicable item(s) a	ain management ordinance can complete nd sign below. Check the measurement				
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 Sect or Zone AO.	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 f	or community floodplain ma	nagement purposes.				
G4. Permit Number	G5. Date Permit	Issued	G6. Date Certificate of Compliance/Occupancy Issued				
G7. This permit has been issued for:	New Constructio	n Substantial Improvement	ent .				
G8. Elevation of as-built lowest floor (includin 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 meters Datum				
Local Official's Name		Title					
Community Name		Telephone					
Signature		Date					
Comments (including type of equipment and lo	cation, per C2(e), i	f applicable)					
			Check here if attachments.				

BUILDING PHOTOGRAPHS

See instructions for Item A6.

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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. 319 Harbor Drive

Policy Number:

Indian Rocks Beach

ELEVATION CERTIFICATE

State

ZIP Code 33785

Florida

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.

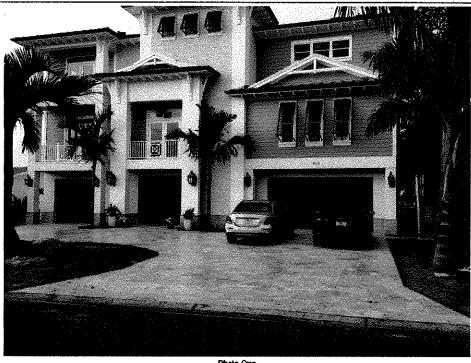


Photo One

Photo One Caption Front View 12-17-2019

Clear Photo One



Photo Two Caption Rear View 12-17-2019 Clear Photo Two

BUILDING PHOTOGRAPHS

Continuation Page

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IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Ap 319 Harbor Drive	t., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
City	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, 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

Photo Three Caption Right Side View 12-17-2019

Clear Photo Three



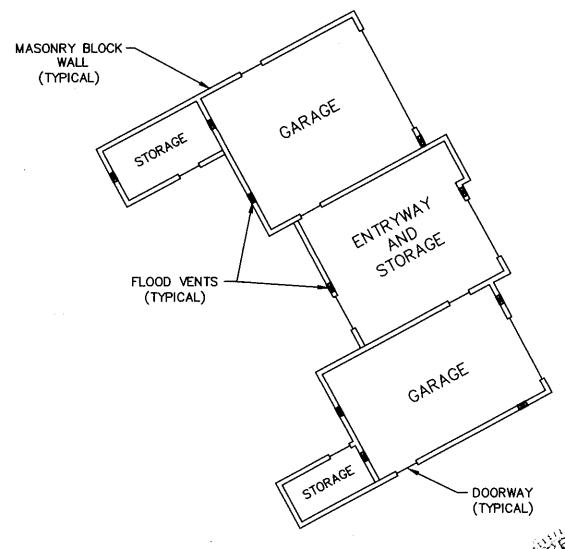
Photo Four

Photo Four Caption Left Side View 12-17-2019

Clear Photo Four

Elevation Certificate Attachment

Ground Floor Enclosure Diagram and Flood Vent Data 319 Harbor Drive, Indian Rocks Beach FL 33785 Date: 12-19-2019



Engineered Flood Vents: "Smart Vent" Model 1540-520.

10 vents providing a total of 2000 square feet of flood coverage (200 per vent).

8 exterior venting within 12 inches of outside ground grade.

2 interior venting within 12 inches of inside floor grade.

SURVEYOR CERTIFICATION

This 1 page attachment was prepared under my direction and supervision. Licensed by the State of Florida to practice surveying and mapping.

Dennis J. Eyre PSM 28

Geodata Services, Inc.

1166 Kapp Dr.

Clearwater, FL 33765