U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

# **ELEVATION CERTIFICATE**

OMB No. 1660-0008

National Flood Insurance Program	lood Insurance Program IMPORTANT: Follow the instructions on pages 1–9.		Expiration Date: July 31, 2015	
SECTION A – PROPERTY INFORMATION			FOR INSURANCE COMPANY USE	
A1. Building Owner's Name Taylor Morrison of Florida, Inc				Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or R0. Route and Box No. 93 The Cove Way (Building 5)			Company NAIC Number:	
City Indian Rocks Beach State FL				ZIP Code 33785
A3. Property Description (Lot and Block Numbers, Tay Page 1997)	arcel Number, Legal De	scription, etc.)		33/83
Lot 32 Cove at Indian Rocks Beach PB 139  A4. Building Use (e.g., Residential, Non-Residential, Add		Posidontal		
A5. Latitude/Longitude: Lat, N 2/ 53 12.0"	Long. W 82° 5	0' 56.6"	Horizontal	Datum: □ NAD 1927 ■ NAD 19
A6. Attach at least 2 photographs of the building if the CA7. Building Diagram Number _7	Certificate is being used	to obtain flood ins	urance.	MAD 1327 MINAD 13
A7. Building Diagram Number		AO For a b	silding with an ast	
<ul> <li>a) Square footage of crawlspace or enclosure(s)</li> </ul>	549 so		uilding with an att are footage of att	N/A
<ul> <li>No. of permanent flood openings in the crawlsparenclosure(s) within 1.0 foot above adjacent grade</li> </ul>	ce or 79	b) Num	ber of permanen	flood openings in the attached gard
c) Total net area of flood openings in A8.b	1346 45	with	in 1.0 foot above	adjacent grade N/A
d) Engineered flood openings?   ☐ Yes ☐ No			ineered flood ope	
SECTION B - FLO	OOD INSURANCE R	ATE MAP (FIRM	) INFORMATIO	N magazin sa ja
B1. NFIP Community Name & Community Number City of Indian Rocks Beach 125117	B2. Count			B3. State Florida
B4. Map/Panel Number   B5. Suffix   B6. FIRM Inde		Panel Effective/	B8. Flood Zone(s	
12103C0113 G 08/18/2		d Date /03/2003	AE	AO, use base flood depth)
B10. Indicate the source of the Base Flood Elevation (BFE)				0 - 78 - 69 10' - 8 9 9
☐ FIS Profile ☑ FIRM ☐ Community Determine	ed Other/Source:		D9.	
311. Indicate elevation datum used for BFE in Item B9:			Other/Source:	
312. Is the building located in a Coastal Barrier Resources	System (CBRS) area of	r Otherwise Protect	ed Area (OPA)?	☐ Yes
Designation Date: n/a // C	BRS DOPA		ca Alba (Ol A):	Lifes Zino
CENTION OF CHILD	1010			
SECTION C – BUILD				ED) Diente en en en en en en
<ol> <li>Building elevations are based on:            Constructions are based on:          Constructions are based on:          Construction are based on:          Constructions are based on:          Construction</li></ol>	on Drawings*	Building Under Cons	struction* [	▼ Finished Construction
<ol> <li>Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, C2.a–h below according to the building diagram specified.</li> </ol>	V1-V30, V (with BFE), A	IR, AR/A, AR/AE, AR	R/A1-A30, AR/AH	. AR/AO. Complete Items
Benchmark Utilized: Box cut CL E of Lot 12 Elev		tical Datum: NAVI		
Indicate elevation datum used for the elevations in ite	**************************************			7.04
Datum used for building elevations must be the same	as that used for the B	FE.		
a) Top of bottom floor (including basement, crawlspace		6 3		asurement used.
b) Top of the next higher floor	e, or enclosure moor)	17 2	_ ⊠ feet	meters
c) Bottom of the lowest horizontal structural member	(V Zones only)	N/A	_ <b>⊠</b> feet	meters
d) Attached garage (top of slab)	(V Lorics only)	N/A	_	☐ meters ☐ meters
e) Lowest elevation of machinery or equipment servici	ng the building	11 4	_ Kreet	meters
(Describe type of equipment and location in Comme			VELVALENCE	
f) Lowest adjacent (finished) grade next to building (LAG)		5.8	X feet	meters meters
<ul> <li>g) Highest adjacent (finished) grade next to building (HAG)</li> <li>h) Lowest adjacent grade at lowest elevation of deck or stairs, including</li> </ul>		6 . <u>0</u>	_ 🔀 feet	meters
structural support	or stairs, including	N/A_ ,	_ ☐ feet	meters
SECTION D - SURV	EYOR, ENGINEER.	OR ARCHITECT	CERTIFICATIO	N FOR THE RESIDENCE OF THE SECOND
s certification is to be signed and sealed by a land surveyor	or, engineer, or architec	t puthorized by law	to certify elevation	
ormation. I certify that the information on this Certificate rei	presents my best effort	s to interpret the da	ta available	
nderstand that any false statement may be punishable by fi				License # 5185
Check here if comments are provided on back of form.  Check here if attachments,	Were latitude and los			
	licensed land survey		No	ahet priterm
ortifier's Name	. 10.11	License Numb	er	90.3)25 2000
le	Company Name			TATE OF
orida Registered Surveyor  dress	Landmark Engine	ering & Surveying State	g Corporation  ZIP Code	10-8-10
15 Palm River Road	Tampa	FL	33619	C 40 2 0
gnature Lttl?	Date 10/08/2015	Telephone	0.44	1 State Branch

## **ELEVATION CERTIFICATE**, page 2

IBADADTA AIT. In Abana and an annual				
	the corresponding Information from Se			FOR INSURANCE COMPANY USE
93 The Cove Way (Building			•	Policy Number:
Indian Rocks Beach	State FL	ZIP Code 33785		Company NAIC Number:
SECTIO	ON D – SURVEYOR, ENGINEER, OR	ARCHITECT C	ERTIFICATION (	CONTINUED)
Copy both sides of this Elevation Cer	rtificate for (1) community official, (2) ins	urance agent/con	npany, and (3) buildi	ng owner.
enclosure's walls, each certi	ure and original seal of a Florida Registered S he equipment referenced in C2e is the water h iffied to handle 200 square feet; 3 Flood Soluti g, and 72 Vents 4" x 1/4" in the garage door. I	one IIC Vente (mod	tel ES.1616) in the and	doguests well seek seekfield to a comment
Signature Sett 200	der	Date 10/08	/2015	
SECTION E - BUILDING ELI	<b>EVATION INFORMATION (SURVEY</b>	NOT REQUIRE	D) FOR ZONE AC	AND ZONE A (WITHOUT REF)
For Zones AO and A (without BFE), cor	mplete Items E1-E5. If the Certificate is	intended to supp	ort a LOMA or LOME	F request, complete Sections A, B,and C.
Tor items Ex-E4, use natural grade, it	the following and check the appropriate t	a. In Puerto Rico i	only, enter meters.	
			□foot □ mot	ore Clabour or Child is use
	annual an		= =	
	ermanent flood openings provided in Sec		d/or 9 (see pages 8	-9 of Instructions)
the next higher floor (elevation C2.			feet met	
E3. Attached garage (top of slab) is				
				ers Dabove or Dhelow the HAG
E5. Zone AO only: If no flood depth nur ordinance?  Yes  No L	mber is available, is the top of the botton Unknown. The local official must certify t	m floor elevated in his information in	accordance with th	ne community's floodplain management
SECTION	F-PROPERTY OWNER (OR OW	NER'S REPRES	SENTATIVE) CER	TIFICATION
he property owner or owner's authorize	red representative who completes Sections in Sections A, B, and E are correct to	ne A B and E for	Zono A (without a F	EMA-issued or community-issued BFE) or
Property Owner or Owner's Authorized F	Representative's Name			
ddress		City	Sta	ate ZIP Code
ignature		Date	Tel	ephone
omments		P		
	5. 6.			☐ Check here if attachments.
	SECTION G - COMMUNITY	INFORMATION	(OPTIONAL)	
ne local official who is authorized by law	v or ordinance to administer the communi			
1.   The information in Section C w	the applicable item(s) and sign below. Ch yas taken from other documentation that rtify elevation information. (Indicate the	eck the measurer	nent used in Items G	8-G10. In Puerto Rico only, enter meters,
2. A community official completed	Section E for a building located in Zone is G4–G9) is provided for community flo	A (without a FEM	A-issued or commu	ta in the Comments area below t
4. Permit Number	G5. Date Permit Issued	G6.	Date Certificate Of (	Compliance/Occupancy Issued
7 This permit has been issued for:	☐ New Construction ☐ Substantia	al Improvement		
B. Elevation of as-built lowest floor (inc	_		☐ feet ☐ meter	s Datum
BFE or (in Zone AO) depth of floodin			☐ feet ☐ meter	
O. Community's design flood elevation:	<u> </u>		☐ feet ☐ meter	s Datum
cal ଦିfficial's Name		Title		
mmunity Name		Telephone		
nature		Date		
mments				
				Fig. 1.
				Check here if attachments.

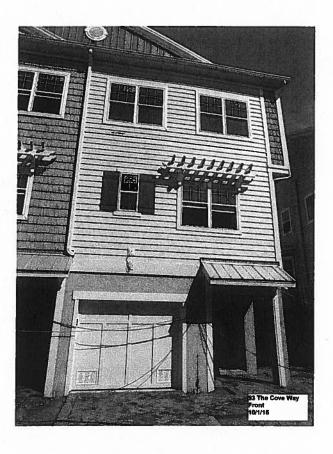
## **ELEVATION CERTIFICATE, page 3**

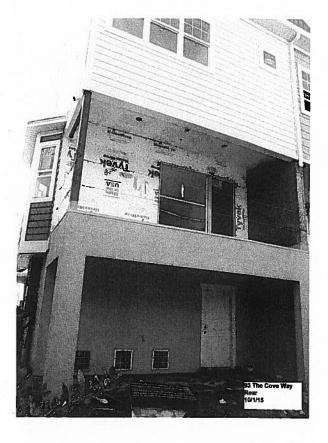
#### **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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 PO. Route and Box No. 93 The Cove Way (Building 5)			Policy Number:	
City Indian Rocks Beach	State FL	ZIP Code 33785	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.





## **ELEVATION CERTIFICATE**, page 4

### **BUILDING PHOTOGRAPHS**

**Continuation Page** 

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.  93 The Cove Way (Building 5)			FOR INSURANCE COMPANY USE Policy Number:	
Indian Rocks Beach	FL	33785	MI TO THE PARTY OF	

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.

