U.S. DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency National Flood Insurance Program 446944

OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

CB15-08106

Copy all pages of this				•	aai, (2) insurance a		ny, and (3) building owner.
SECTION A – PROPERTY INFORMATION A1. Building Owner's Name						RANCE COMPANY USE	
A1. Building Owner's Name ROBERT & LORETTA EVANS Policy Number:					ibei.		
A2. Building Street Box No. 109 15TH STREET		cluding Apt., Unit, Suite	, and/o	r Bldg. No.) or P.O.	Route and	Company N	NAIC Number:
City				State		ZIP Code	
BELLEAIR BE	ACH			Florida		33786	
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT E, BLOCK 16, BELLEAIR BEACH UNIT D, PUBLIC RECORDS OF PINELLAS COUNTY, FL						
	_	tial, Non-Residential, A					
		/*-55'-15.7"	_				1927 <u> X</u> NAD 1983
1		ns of the building if the	Certific	ate is being used to	o obtain flood insur	ance.	
A7. Building Diagra		pace or enclosure(s):					
_		space or enclosure(s)	,	1.786 sq ft			
		ood openings in the cra			ithin 1.0 foot above	adiacent or	ade 12
	•	penings in A8.b 3,0	•	, -	100000000000000000000000000000000000000		
	_	gs? ☐ Yes ☒ No					
A9. For a building							
		ed garage					
		ood openings in the atta		_	ot above adjacent (grade	
		penings in A9.b		sq in			
d) Engineered	l flood openin	gs?	0				
	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Commun	*	•		B2. County Name			B3. State
PINELLAS COUNT	Y 12	2103C		PINELLAS			Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date		IRM Panel ffective/	B8. Flood Zone(s)		se Flood Elevation(s) ne AO, use Base
12103C/0112	G	09/03/2003	R	evised Date 08/18/2009	AE	Flo	od Depth)
12100070112		03/30/2000	<u> </u>	00,10,2000	,		
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 🕱 NAVD 1988 📋 Other/Source:							
R12 Is the building	n located in a	Coastal Barrier Resou	rnee Si	vetem (CRPS) area	or Otherwise Prote	octed Area ((DDA)2 T Vac TV No
}	B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Tyes X No Designation Date: CBRS DOPA						
Doorgradion			DONO				

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IMPORTANT: In these spaces, copy the correspondi	FOR INSURANCE COMPAN	VY USE			
Building Street Address (including Apt., Unit, Suite, and 109 15TH STREET	Policy Number:				
 ;	itate Iorida	ZIP Code 33786	Company NAIC Number		
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					
C1. Building elevations are based on: Construction Drawings* Building Under Construction* X Finished Construction					
*A new Elevation Certificate will be required when					
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: HALL-A Vertical Datum:					
Indicate elevation datum used for the elevations in		below.			
☐ NGVD 1929 🔀 NAVD 1988 ☐ Othe					
Datum used for building elevations must be the sa	ime as that used for	the BFE.	Check the measurement	used.	
 a) Top of bottom floor (including basement, crawled) 	space, or enclosure	floor)6. <u>1</u>	0 x feet meters	}	
b) Top of the next higher floor		<u> </u>	50 🗶 feet 🗌 meters	ŝ	
c) Bottom of the lowest horizontal structural mem	ber (V Zones only)	N/A		i	
d) Attached garage (top of slab)		N/A	x feet meters	3	
 e) Lowest elevation of machinery or equipment so (Describe type of equipment and location in Co 	ervicing the building mments)	<u> </u>	0 X feet meters	;	
f) Lowest adjacent (finished) grade next to building	ng (LAG)	05. 2	! x feet	3	
g) Highest adjacent (finished) grade next to build	ng (HAG)	05. 9	x feet meters	;	
 h) Lowest adjacent grade at lowest elevation of d structural support 	eck or stairs, includir	ng <u>05</u> . <u>0</u>	X feet meters	;	
SECTION D - SURVEYO	R, ENGINEER, OR	ARCHITECT CER	TIFICATION		
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 here if attachme	ents.	
Certifier's Name Mohammad B. Far	License Number 5545				
Title					
Professional Land Surveyor					
Company Name			Place	ŀ	
Mohammad B. Far			Seal Here		
Address 8131 Meadowview Place			175.5		
City Trinity	State Florida	ZIP Code 34655		:	
Signature Mahannad B. Fall	Date 07/16/2016	Telephone (727) 375-174	40	·	
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)					
				ļ	

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IMPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSURANCE COMPANY USE	
109 15TH ST	et Address (including Apt., Unit, Suite, ar REET	nd/or Bldg. No.) or P	O. Route and Box No.	Policy Number:	
City BELLEAIR B	EACH	State Florida	ZIP Code 33786	Company NAIC Number	
SECTION E BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)					
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.					
E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).a) Top of bottom floor (including basement,					
	space, or enclosure) is		X feet met	ers 🕱 above or 🗌 below the HAG.	
	f bottom floor (including basement, space, or enclosure) is		X feet met	ers 🗵 above or 🗌 below the LAG.	
E2. For Build	ing Diagrams 6-9 with permanent flood	openings provided in	n Section A Items 8 and/o	or 9 (see pages 1–2 of Instructions),	
the next the diagr	higher floor (elevation C2.b in ams) of the building is		X feet met	ers 🗵 above or 🗌 below the HAG.	
E3. Attached	garage (top of slab) is		X feet met	ers 🗵 above or 🗌 below the HAG.	
E4. Top of pl servicing	atform of machinery and/or equipment the building is		X feet	ers ⊠ above or ⊡ below the HAG.	
E5. Zone A0 floodplair	only: If no flood depth number is availal n management ordinance?	ole, is the top of the l	bottom floor elevated in a n. The local official mus	ccordance with the community's toertify this information in Section G.	
	SECTION F - PROPERTY OW	NER (OR OWNER)	S REPRESENTATIVE) (ERTIFICATION	
The property community-is	owner or owner's authorized representat sued BFE) or Zone AO must sign here.	ive who completes 5	Sections A. B. and E for Z	one A (without a FFMA-issued or	
	er or Owner's Authorized Representative		, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	
Address City State ZIP Code					
		Cit		itate ZIP Code	
Signature		Da	te T	elephone	
Comments					
				i	
				G.	
				☐ 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 109 15TH STREET	x No. Policy Number:				
City BELLEAIR BEACH	State ZIP Code Florida 33786	Company NAIC Number			
SECTION	ON G - COMMUNITY INFORMATION (OPT	IONAL)			
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 Sect or Zone AO.	ion E for a building located in Zone A (withou	ut a FEMA-issued or community-issued BFE)			
G3. The following information (Items G4-	-G10) is provided for community floodplain n	nanagement 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 Improve	ment			
G8. Elevation of as-built lowest floor (including of the building:	g basement)	🔀 feet 🗌 meters Datum			
G9. BFE or (in Zone AO) depth of flooding at	the building site:	x feet meters Datum			
G10. Community's design flood elevation:		x feet meters Datum			
Local Official's Name	Title				
Community Name	Telephone				
Signature	Date				
Comments (including type of equipment and location, per C2(e), if applicable)					
		Check here if attachments.			

BUILDING PHOTOGRAPHS

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See Instructions for Item A6.

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City BELLEAIR BEACH	State Florida	ZIP Code 33786	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



Photo Two

Photo Two Caption REAR VIEW

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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iMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Ap 109 15TH STREET	Policy Number:		
City BELLEAIR BEACH	State Florida	ZIP Code 33786	Company NAIC 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 One

Photo One Caption LEFT SIDE VIEW



Photo Two

Photo Two Caption RIGHT SIDE VIEW