

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

OMB 3067-0077 Expires: July 1984

593-117

This form is to be used for: 1) New/Emergency Program construction in Special Flood Hazard Areas; 2) Pre-FIRM construction after September 30, 1982; 3) Post-FIRM construction; and, 4) Other buildings rated as Post-FIRM rules.

BUILDING O	OWNER'S		Carolyn		ADDRESS	y Blv	/d., [Belleair	Beach	, F1.	33535
			eair Beac		3535	100	76+6	Ctuant	D-11-	ada Da	
					*2			Street,		air Bea	ach, FL.
I certify that	the information	n on this	ir Beach certificate repr	esents my be	est efforts t	o interp	ret the	data availabl	e. I unde	erstand tha	at any false
statement ma	ay be punishal	ole by fine	or imprisonment of CATION (Com	ent under 18	U.S. code, cal Commu	Section	1001.	100			27 (9
COMMUNITY N	O PANEL NO	SUFFIX	DATE OF FIRM	FIRM ZONE	DATE OF C	ONSTR	BASE (In AO	FLOOD ELEV Zone, use depth)	BUILDI		
125089	0002	В	3/2/83	A11	Aug.	1981	1 7.0	10		☐ Pre	w/Emergency -FIRM Reg st-FIRM Reg
YES NO It is intended that the building described above will be constructed in compliance with the community's flood plain ordinance. The certifier may rely on community records. The lowest floor (including basement) will be at an elevation offt, NGVD. Failure to construct the building at this elevation may place the building in violation of the community's flood plain management ordinance.											
YES NO The building described above has been constructed in comptiance with the community's flood plain management ordinance based on elevation data and visual inspection or other reasonable means. If NO is checked, attach copy of variance issued by the community.											
YES NO The mobile home located at the address described above has been tied down (anchored) in compliance with the community's flood plain management ordinance, or in compliance with the NFIP Specifications.											
MOBILE	HOME MAKE		MODEL	YR. C	F MANUF	ACTUF	RE	SERIAL	NO.		X SIONS
(Community	Permit Officia	or Regis	tered Professio	nal Engineer	, Architect,	or Sur	veyor)			E .	
NAME Ja	mes W. Ma	cfarla	ne, P.E.		ADDRESS	263	30 We	st Bay D	rive		
TITLE Pro	foccional	Engin	eer city,	Doldonin	D1££_						- 00540
THE FIU	A L	Cily III	6.//	berieair	BIUTTS		STA	ATE Fla		ZII	P 33540
SIGNATURE	James .	10. 0	Maefail	Soc .	DATE 4	/18/8	34	PHONE 8	13-581	-1500	
SECTION IL	ELEVATION	CERTIFI	CATION (Cert			nity Per	mit Offi	cial or a Reg	istered P	rofessiona	I Engineer,
			Archi	tect, or Survi	eyor.)						
FIRM ZONE	A1-A30: I ce	rtify that t	he building at	the property	location de	escribed	above	has the lowe	est floor	(including	basement)
- c	ata	n elevatio elevation c		feet, NGV feet, NGVD.	D (mean 3	ca ieve	i, and t	ne average g	laue at	ine ballalli	ig site is at
					Lowes	T FIC	or 1	Finish	ed_Gar	age SI	ab)
FIRM ZONES V, V1-V30: I certify that the building at the property location described above has the bottom of the lowest floor beam at an elevation offeet, NGVD (mean sea level), and the average grade at the building site is at an elevation offeet, NGVD.											
FIRM ZONES A, A99, AO, AH, and EMERGENCY PROGRAM: I certify that the building at the property location described above has the lowest floor elevation offeet, NGVD. The elevation of the highest adjacent grade next to the building isfeet, NGVD.											
SECTION III	FLOODPRO	OFING C	ERTIFICATION	(Certification	on by a Reg	gistered	l Profes	sional Engine	eer or Ar	chitect)	
I certify to the best of my knowledge, information, and belief, that the building is designed so that the building is watertight, with walls substantially impermeable to the passage of water and structural components having the capability of resisting hydrostatic and hydrodynamic loads and effects of buoyancy that would be caused by the flood depths, pressures velocities, impact and uplift forces associated with the base flood.											
YES 🗆 🏃	(Hur	nan interv	f flooding, will rention means asures are take	that water wi	Il enter the	buildin	d when	floods up to	the base	e flood lev	el oc
If the answer	NO □ Will to both question	the buildi	ng be occupied b, the floodprod plete both the	ofing cannot	be credited	I for rat fing cer	ing pur	poses and the	e actual	lowest floc	or must be
FIRM ZONES	A, A1-A30, V1	-V30, AO	and AH:		Cert	ified Fl	oodprod	ofed Elevation	n is	feet	t, (NGVD).
THIS CERTIF	ICATION IS F	OR DA SEC	CTION II	вотн ѕест	TIONS II AN	ND III (I	Check (One)			
CERTIFIER'S	NAME			COMPANY I	NAME			L	ICENSE	NO. (or Af	fix Seal)
James W.	Macfarlan	<u>e</u>	Frankli	in Engine	ering.	Limi	ted		P.E.	7317-	25
TITLE				ADDRESS						ZIP	
Partner	2630	West Ba	ay/Drive,	Belleai	r Bluff	s.	F	la.	33540)	
SIGNATURE	11, 6/		DATE	CITY		152		STATE		PHONE	
13-581-1500 813-581-1500											
The insurance agent should attach the original copy of the completed form to the flood insurance policy application, the second copy should be supplied to the policyholder and the third copy retained by the agent INSURANCE AGENTS MAY ORDER THIS FORM 593-1											