CB18-03074

\*U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008

Expiration Date: November 30, 2018

# **ELEVATION CERTIFICATE**

Important: Follow the instructions on pages 1-9.

4/11/19 CB18-0307

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 INSURANCE COMPANY USE A1. Building Owner's Name Policy Number: Joseph Martinez A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: Box No. 422 Belle Isle Avenue City State ZIP Code Belleair Beach Florida 33786 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 81, Belle Isle Parcel ID #30-29-15-07317-000-0810 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat, 27°55'54,8" N Long. 82°50'04.7" W Horizontal Datum: NAD 1927 X NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 7 A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawispace or enclosure(s) 2843.00 sq ft b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 14 c) Total net area of flood openings in A8.b 1792.00 sq in A9. For a building with an attached garage: a) Square footage of attached garage N/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 N/A sq in SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name B3. State City of Belleair Beach 125089 Pinellas (Independent City) Florida B4. Map/Panel B9. Base Flood Elevation(s) B5. Suffix B6. FIRM Index **B7. FIRM Panel** B8, Flood Number Date Effective/ Zone(s) (Zone AO, use Base Flood Depth) **Revised Date** 12103C0112 08-18-2009 09-03-2003 AE 10.0 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 NAVD 1988 Other/Source: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? | Yes | No Designation Date: CBRS OPA

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OMB No. 1660-0008 Expiration Date: November 30, 2018 IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE Building Street Address (including Apt., Unit, Suite, and/or Bidg, No.) or P.O. Route and Box No. Policy Number:

22 Belle Isle Avenue			Tolloy Namber.		
		<sup>2</sup> Code 786	Company NAIC Number		
SECTION C – BUILDING E	LEVATION INFORMA	TION (SURVEY RE	EQUIRED)		
C1. Building elevations are based on: ☐ Construction Drawings* ☑ Building Under Construction* ☐ Finished Construction *A new Elevation Certificate will be required when construction of the building is complete.  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 Ricc only, enter meters.  Benchmark Utilized: "HALL C" PID AG0554 Vertical Datum: NAVD 1988					
Indicate elevation datum used for the elevations in  ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other.	***	γγ,			
Datum used for building elevations must be the sar		BFE.			
a) Top of bottom floor (including basement, crawls	pace, or enclosure floor	)	Check the measurement used.  6.6  feet  meters		
b) Top of the next higher floor			17.6 🗵 feet 🗌 meters		
c) Bottom of the lowest horizontal structural memb	er (V Zones only)		N/A feet meters		
d) Attached garage (top of slab)		<u></u>	N/A feet meters		
<ul> <li>e) Lowest elevation of machinery or equipment set (Describe type of equipment and location in Cor</li> </ul>	rvicing the building nments)		N/A  feet  meters		
f) Lowest adjacent (finished) grade next to building	g (LAG)		5.9 X feet meters		
g) Highest adjacent (finished) grade next to buildin	g (HAG)	***	6.2 X feet  meters		
h) Lowest adjacent grade at lowest elevation of de structural support	ck or stairs, including	With the state of	N/A  feet  meters		
SECTION D – SURVEYOR	, ENGINEER, OR ARC	CHITECT CERTIFIC	CATION		
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 li	censed land surveyor?	⊠Yes □ No	Check here if attachments.		
Certifier's Name	License Number		Wat Pools		
Dennis J. Eyre	2865		- 54 6		
Title Professional Surveyor and Mapper			10.30		
Company Name			EZ:0 .77 9:53		
Geodata Services, Inc.			語にの音音器		
Address 1166 Kapp Drive			Harov		
Clearwater	State Florida	ZIP Code 33765	rolession		
Signature	Date 04-10-2019	Telephone (727) 447-1763	Ext.		
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) A5. Determined with GL program "Google Earth". A8.a) Ground floor enclosure. B6. Panel effective date. Revised on 08-02-2018 by FEMA LOMA, Case No. 18-04-6386A. C2.a) 1st floor, ground floor enclosure. C2.b) 2nd floor, lowest living floor.					

OMB No. 1660-0008 **ELEVATION CERTIFICATE** Expiration Date: November 30, 2018 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. Policy Number: 422 Belle isle Avenue City State ZIP Code Company NAIC Number Belleair Beach Florida 33786 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, crawlspace, or enclosure) is feet meters above or below the HAG. b) Top of bottom floor (including basement, crawlspace, or enclosure) is feet meters above or below the LAG. E2. For Building Diagrams 6-9 with permanent flood openings provided 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 feet meters above or below the HAG. E3. Attached garage (top of slab) is feet meters above or below the HAG. E4. Top of platform of machinery and/or equipment servicing the building is feet meters above or below the HAG. E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Tyes No Unknown. The local official must certify this information in Section G. SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge. Property Owner or Owner's Authorized Representative's Name Address City ZIP Code State Signature Date Telephone Comments

Check here if attachments.

# **ELEVATION CERTIFICATE**

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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. 422 Belle Isle Avenue			to. Policy Number:
City Belleair Beach	State Florida	ZIP Code 33786	Company NAIC Number
SECTI	ON G - COMMUNITY	INFORMATION (OPTION	NAL)
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, e	n Certificate, Complete nter meters.	the applicable item(s) an	d sign below. Check the measurement
data in the Comments area below.)	zed by law to certify ele	evation information. (Indic	ned and sealed by a licensed surveyor, ate the source and date of the elevation
or zone AO.			FEMA-issued or community-issued BFE)
G3. The following information (Items G4-	-G10) is provided for c	ommunity floodplain mana	agement purposes.
G4. Permit Number	G5. Date Permit Iss	ued	36. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	New Construction	] Substantial Improvemer	ıt
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:		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 loc	ation, per C2(e), if app	licable)	
			Check here if attachments.

### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

See Instructions for Item A6.

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Belleair Beach	Florida	33786	

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 04-04-2019

Clear Photo One



Rear View 04-04-2019

Clear Photo Two

FEMA Form 086-0-33 (7/15)

Photo Two Caption

Replaces all previous editions.

Form Page 5 of 6

#### **BUILDING PHOTOGRAPHS**

Continuation Page

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City	State	ZIP Code	Company NAIC Number
Belleair Beach	Florida	33786	

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 Caption Right Side View 04-04-2019

Clear Photo Three



Photo Four Caption Left Side View 04-04-2019

Clear Photo Four