ELEVATION CERTIFICATE OMB

U.S. DEPARTMENT OF HOMELAND SECURITY

OMB No. 1660-0008

Federal Emergency Management Agency Expires February 28, 2009 National Flood Insurance Program Important: Read the instructions on pages 1-8.

		1 1	SEC	TION A - PF	OPERTY INFO	RMATION	For insurance Company Use:
	A1. Building Owner's Name	SUNCOASTEQUE	TY PARTNER	S			Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) of 513 HARBOR DRIVE					O. Route and B	ox Na.	Company NAIC Number
	City BELLEAIR BEACH	State FL ZIP			······································		CB67-10970
	A3. Property Description (Lot LOT 20 BLOCK A, BELLEAIR	and Block Numbers	Tax Parcel N	lumber, Legal	Description, etc.)	0.0011174	
				- COUGE NO. CHINA			8-15-0
	A4. Building Use (e.g., Reside A5. Latitude/Longitude: Lat. 27 A6. Attach at least 2 photograp A7. Building Diagram Number A8. For a building with a crawl a) Square footage of crawl	<u>'DEG 54.827N</u> Loohs of the building in <u>7</u> space or enclosure of space or enclosure of space or enclosure of space or enclosure or en	ng. <u>82DEG 50</u> f the Certificate (s), provide	SBSW	d to obtain flood in A9. For a)	Horizontal nsurance. r a building with an at Square footage of at	Datum: NAD 1927 NAD 1983 tached garage, provide: tached garage N/A sq ft
	 No. of permanent flood enclosure(s) walls with 	in 1.0 foot above ac	awi space or fjacent grade	12	b)	No. of permanent flo	od openings in the attached garage
-	c) Total net area of flood	openings in A8.b		2816 sq	п с)	Total net area of floo	above adjacent grade N/A d openings in A9.b N/A sq in
-		SECTION	- FLOOD I	NSURANCE	RATE MAP (F	IRM) INFORMATIO	NO
	B1. NFIP Community Name & C 125089 BELLEAIR BEACH, CI	ommunity Number IY OF		B2. County Na PINELLAS	me		B3. State FLORIDA
Γ	B4. Map/Panel Number E	5. Suffix B6.	FIRM Index		FIRM Panel	B8, Flood	B9. Base Flood Elevation(s) (Zone
	125089-0012	G	Date 6/30/99	9	e/Revised Date /03/2003	Zone(s) AE	AO, use base flood depth)
В	110. Indicate the source of the B	ase Flood Elevation	(BFE) data or	r base flood d	epth entered in Ite	em B9.	10
	☐ FIS Profile ☑ !	-IKM LICOM	⊾munity Detern	nined	Other (Descrit		
В	12, is the building located in a C Designation Date <u>NA</u>	oastal Barrier Reso	ag: ∐ NG ources System	VD 1929 (CBRS) area ☐ CBRS	☑ NAVD 1988 or Otherwise Pro ☐ OPA	☐ Other (Describ ptected Area (OPA)?	e) ∐Yes ⊠No
		SECTION C - B	UILDING EL	EVATION II	FORMATION	(SURVEY REQUI	REDI
	Building elevations are based *A new Elevation Certificate w Elevations – Zones A1-A30, A below according to the building Benchmark Utilized COUNTY Conversion/Comments NONE	on: Cons ill be required wher E, AH, A (with BFE diagram specified HALL C Vertical i	ruction Drawi construction VE, V1-V30 in Item A7	ngs* of the building , V (with BFE)	☐ Building Und	er Construction* NE, AR/A1-A30, AR/A	☑ Finished Construction H, AR/AO. Complete Items C2.a-g
1)	Top of bottom floor (including in		2		10	Check the measurer	nent used.
 Top of bottom floor (including basement, crawl space, or enclosure to) Top of the next higher floor Bottom of the lowest horizontal structural member (V Zones on d) Attached garage (top of slab) Lowest elevation of machinery or equipment servicing the build (Describe type of equipment in Comments) Lowest adjacent (finished) grade (LAG) 				only) -	14.7	meters (Puent me	to Rico (nity)
2 100	g) Highest adjacent (finished)	grade (HAG)			<u>4.2</u> ⊠ fe	et meters (Puert	P Rico only)
		SECTION D - SI	JRVEYOR, E	NGINEER.	OR ARCHITEC	T CERTIFICATIO	M .
u	is certification is to be signed and ormation. I certify that the inform inderstand that any false stateme. Check here if comments are pro-	ation on this Certifi nt may be punishal	eurveyor, engir cate represent de by fine or in	neer, or archit	ect authorized by	law to certify elevation	
Cer	rtifier's Name JOHN H. REHFEL	T		1			THE HOUSE OF THE SECOND SECOND
ith				-	cense Number L	S3566	
	E LAND SURVEYOR	Com	pany Name			S3566	
do	e LAND SURVEYOR dress 5202 RAWLS ROAD		pany Name	C&J SURVE	ring, inc.	S3566 ode 33624	

		2.40		US NOT
IMPORTANT: In these spa	ces, copy the corresponding i	nformation from Section A		For Insurance Company Use:
513 HARBOR DRIVE	ng Apt., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.		Policy Number
City BELLEAIR BEACH State	FL ZIP Code 33786			Company NAIC Number
SEC	TION D - SURVEYOR, ENGINE	ER, OR ARCHITECT CERT	TFICATION (CON	TINUED)
	Certificate for (1) community official			
Comments .				
AS-D THERE ARE TWO "SMAI	RT VENTS", 8"x16" AND 10 - 16"x"	16" VENTS	8	(4)
DAY BY SHELL		•		2
Signature JOHN REHFELT	re U	Date 8/03/08		
SECTION E - BUILDING	ELEVATION INFORMATION (S	URVEY NOT REQUIRED) F	OR ZONE AO AN	Check here if attachme D ZONE A (WITHOUT BFE)
and C. For items E1-E4, use na	E), complete Items E1-E5. If the Ce tural grade, if available. Check the n	runcate is intended to support a reasurement used. In Puerto R	LOMA or LOMR-Fire	equest, complete Sections A, B,
E1. Provide elevation information	on for the following and check the an	propriate boxes to show whether	r the elevation is abo	wa ar balow the bishest selection
grade (1 Into) and the lones	decident ulaue (EAG).			
a) Top of bottom floor (incli	iding basement, crawl space, or end	osure) is fe	et 🗌 meters 🗍 ab	ove or T below the HAG
b) Top of bottom moor (mail	dud passilett class space of eucl	OSUTE) 15 . I Te	et Impeters I sh	DUB OF Delow the 1 AC
E.2. For Building Diagrams 6-8	with permanent flood openings provid	ted in Section A Items 8 and/or	Q feed name Q of last	minimal Ab All 1
ferensition or nuttie made	anis) of the building is	feet meters labour	e or helow the HA	AG.
E3. Attached garage (top of sla	b)isfeet □r	neters above or below	the HAG.	£
E4. Top of platform of machine	y and/or equipment servicing the bui	lding is feet	☐ meters ☐ above	or Delow the HAG.
E5. Zone AO only: If no flood d	epth number is available, is the top o	f-the bottom floor elevated in ac	cordance with the co	mmunity's floodplain manageme
ordinance? ☐ Yes ☐	No Unknown. The local official	must certify this information in \$	Section G.	,,
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SECT	ION F - PROPERTY OWNER (C	OR OWNER'S REPRESENT	ATIVE) CERTIFIC	ATION
The property owner or owner's au	thorized commontative when a secolat	0 5 1 1 1 1 1 1		
or Zone AO must sign here. The	thorized representative who complet statements in Sections A, B, and E a	S Sections A, B, and E for Zoni	e A (without a FEMA-	issued or community-issued BFI
Property Owner's or Owner's Auth	prized Representative's Namo	o deliver to dis sect of the follow	wicoge,	
	- Tropicocinuavo o Maine	9 *		4
Address	9	City	State	ZIP Code
ignature		Date	Telephone	
comments				
	OFOTONIO PONTI			☐ Check here if attachme
local official who is authorized b	SECTION G - COMMI	JNITY INFORMATION (OP)	TIONAL)	
G of this Elevation Certificate.	y law or ordinance to administer the complete the applicable item(s) and s	community's floodplain manage sign below. Check the measure	ment ordinance can o ment used in Items 0	complete Sections A, B, C (or E)
 The information in Section 	C was taken from other documentatify elevation information. (Indicate ti	ion that has been signed and as	aning has a linear and a	
☐ A community official comp	eted Section E for a building located	in Zone A (without a FEMA-iss	ued or community-iss	sued RFF) or Zone AO
☐ The following information (Items G4G9.) is provided for comm	unity floodplain management pu	rposes.	add bi Lj oi zolie Ao.
4. Permit Number	G5. Date Permit Issued	G6. Date Ce	rtificate Of Complian	ce/Occupancy Issued
This permit has been issued for:	☐ New Construction ☐	Substantial Improvement		<u> </u>
	including basement) of the building:			المرابع والمرابع
			ers (PR) Datum	-
BFE or (in Zone AO) depth of floo	oding at the building site:		ers (PR) Datum	
cal Official's Name		Title		TO A STATE OF THE PARTY OF THE
mmunity Name		Telephone		
nature		Date		The state of the s
maarie				
mments				
				かと、新生