

U.S. DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
National Flood Insurance Program

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008
Expiration Date: July 31, 2015

1310.2684EC

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name James Hoy		FOR INSURANCE COMPANY USE
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 15805 3RD STREET E		Policy Number:
City REDINGTON BEACH		Company NAIC Number:
State FLORIDA		ZIP Code 33708
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL ID: 04-31-15-52560-017-0050		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL		
A5. Latitude/Longitude: Lat. 27 48 36.2 N Long. 82 48 34.2 W Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 1A		
A8. For a building with a crawlspace or enclosure(s):		
a) Square footage of crawlspace or enclosure(s) 0 sq ft		
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 0		
c) Total net area of flood openings in A8.b 0 sq in		
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
A9. For a building with an attached garage:		
a) Square footage of attached garage 384 sq ft		
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0		
c) Total net area of flood openings in A9.b 0 sq in		
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. FIRM Community Name & Community Number TOWN OF REDINGTON BEACH 125140		B2. County Name PINELLAS		B3. State FLORIDA	
B4. Map/Panel Number 12103C - 0191	B5. Suffix G	B6. FIRM Index Date 8/18/2009	B7. FIRM Panel Effective/ Revised Date 09/03/03	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 10 & 11
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: ____ / ____ / ____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

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 Federal Flood Maps, enter meters.

Benchmark Utilized: **L-NET GPS NETWORK** Vertical Datum: **NAVD88**

Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source: _____

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.	feet	meters
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	4 . 55	<input type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	_____	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	4 . 05	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	4 . 48	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	3 . 70	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	4 . 20	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

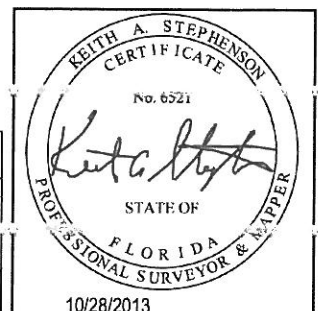
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

☒ Check here if comments are provided on back of form.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☐ Yes ☒ No

☐ Check here if attachments.

Certifier's Name KEITH A. STEPHENSON		License Number LS 6521	
Title PROFESSIONAL SURVEYOR AND MAPPER		Company Name EXACTA LAND SURVEYORS, INC.	
Address 11940 FAIRWAY LAKES DRIVE SUITE 1		City FT. MYERS	State FL
Signature <i>Keith A. Stephenson</i>		ZIP Code 33913	Telephone P: (813) 549-4947
Date 10/28/2013			



ELEVATION CERTIFICATE, page 2

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
15805 3RD STREET E			
City REDINGTON BEACH	State FL	ZIP Code 33708	Company NAIC Number:

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments NOTE: C2.E = AC UNIT PAD. NOTE: THIS ELEVATION CERTIFICATE IS ONLY VALID FOR THE PERSON OR PERSONS NAMED ON THIS CERTIFICATE. THIS CERTIFICATE IS FOR FLOOD INSURANCE PURPOSES ONLY. THE INFORMATION ON THIS CERTIFICATE SHOULD NOT BE USED FOR CONSTRUCTION OR PLANNING.

Signature *Kate Albright* Date 10/28/2013 CENTERLINE ROAD ELEVATION: 3.47

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–E5, use natural grade, if available. Check the measurement used in Items E1–E5. 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 8–9 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 a flood depth number is available in the top of the bottom floor elevation is accordance with the community's floodplain management ordinance? ☐ Yes ☐ 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 _____ State _____ ZIP Code _____

Signature _____ Date _____ Telephone _____

Comments _____

☐ Check here if attachments.**SECTION G – COMMUNITY INFORMATION (OPTIONAL)**

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 Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.G3. ☐ The following information (Items G4–G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
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G7. This permit has been issued for: ☐ New Construction ☐ Substantial ImprovementG8. Elevation of as-built lowest floor (including basement) of the building: _____ ☐ 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 _____

☐ Check here if attachments.

ELEVATION CERTIFICATE, page 3

Page 3 of 3 not valid without all three pages

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

1310.2684EC

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 15805 3RD STREET E			Policy Number:
City REDINGTON BEACH	State FL	ZIP Code 33708	Company NAIC Number:

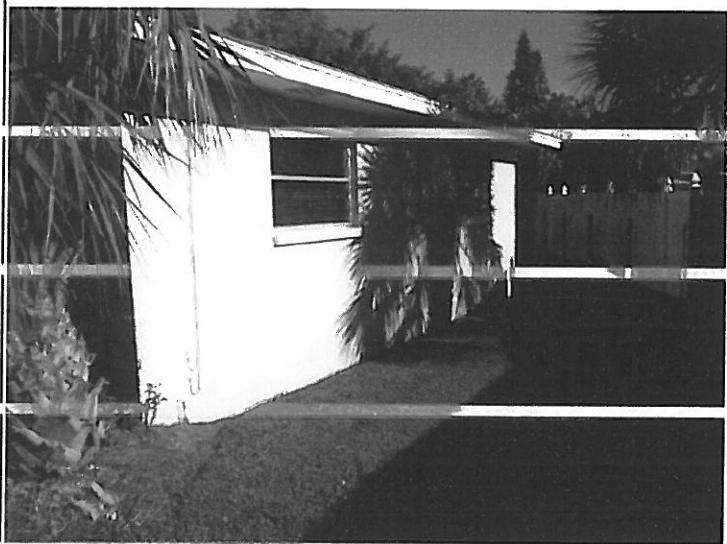
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken, front view and rear view, and, if required, right side view and left side view. When applicable, photographs 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.



FRONT PROPERTY PICTURE 10/25/2013



REAR PROPERTY PICTURE 10/25/2013



RIGHT PROPERTY PICTURE 10/25/2013



LEFT PROPERTY PICTURE 10/25/2013

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:
City	State	ZIP Code	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.