FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: Policy Number BUILDING OWNER'S NAME KAREN E KAMP JOHN A KAMP JR. BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number STREET EAST 17555 2NO STATE ZIP CODE FLORIDA REDINGTON SHORES PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PG. 44-45 PB 38 LOT 27, BLOCK 3. FIFTH ADDITION TO HARBOR SHORES SUB BUILDÍNG USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: J GPS (Type): (##° - ##' - ##.##" or ##.####°) | NAD 1927 NAD 1983 USGS Quad Map I Other: SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME B3. STATE** TOWN OF REDINGTON SHORES 125141 PINELLAS FLORIDA **B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX B7. FIRM PANEL** B8, FLOOD B9. BASE FLOOD ELEVATION(S) NUMBER EFFECTIVE/REVISED DATE DATE ZONE(S) (Zone AO, use depth of flooding) 0001 3-2-83 3-2-83 10' A-12 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. |X | FIRM Community Determined I FIS Profile Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: | NGVD 1929 | NAVD 1988 | Other (Describe): B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? | | Yes Designation Date: SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C4 Building elevations are based on: | || |Construction Drawings* |Building Under Construction* X |Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number __7__ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) C3. 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 C3.a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion. Conversion/Comments Elevation reference mark used SEE Commercial Does the elevation reference mark used appear on the FIRM? |Yes |≻|No ☐ a) Top of bottom floor (including basement or enclosure) 54 ft.(m) □ b) Top of next higher floor **∂**Y ft.(m) ロ c) Bottom of lowest horizontal structural member (V zones only) <u>ル/か</u> ft.(m) d) Attached garage (top of slab) ft.(m) e) Lowest elevation of machinery and/or equipment 46 ft.(m) servicing the building (Describe in a Comments area.) ☐ f) Lowest adjacent (finished) grade (LAG) ft.(m) g) Highest adjacent (finished) grade (HAG) ft.(m) ☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade i) Total area of all permanent openings (flood vents) in C3.h 534 sq. in. (sq. cm) 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 in Sections A, B, and C 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. CERTIFIER'S NAME LICENSE NUMBER 4931 LAUREN R. PENNY TITLE COMPANY NAME LAND SURVEYOR PENNY Assoc. **DDRESS** STATE FLORIDA 10730 - 102 ND. AVENUE NORTH SEMINOLE, SIGNATURE 12-17-02 398-4360 FEMA Form 81-31, JUL 00 SEE REVERSE SIDE FOR CONTINUATION REPLACES ALL PREVIOUS EDITIONS

MPORTANT: In these spaces, cop			For Insurance Company Use:
UILDING STREET ADDRESS (Including 7555 2ND STREET E	g Apt., Unit, Suite, and/or Bldg. No.) OF ミタンア	P.O. ROUTE AND BOX NO.	Policy Number
TY	STATE	ZIP CODE	Company NAIC Number
EDINGTON SHORES		ORIOA	
SECTION D	- SURVEYOR, ENGINEER, OR A	RCHITECT CERTIFICATION (CO	NTINUED)
opy both sides of this Elevation Cer	rtificate for (1) community official, (2) insurance agent/company, and	(3) building owner.
DMMENTS BENCHMARK:	MAP # 200 PINELLAS	COUNTY DISK	
DESIGNATION:	MAP # 200 PINELLAS "REDINGTON B" N.	RIM GI @ 144 /	STH. AVE.
SECTION E PUIL DING ELEVA	TION INFORMATION (SUBVEY)	NOT REQUIRED FOR ZONE AO	Check here if attachments
or Zone AO and Zone A (without BF	ATION INFORMATION (SURVEY I		
formation for a LOMA or LOMR-F, Sol. Building Diagram Number see pages 6 and 7. If no diagram 2. The top of the bottom floor (include)	Section C must be completed. (Select the building diagram most in accurately represents the building ding basement or enclosure) of the tigrade. (Use natural grade, if avail	similar to the building for which thig, provide a sketch or photograph. building is _ ft.(m) _able.)	s certificate is being completed –) _in.(cm) above or below
_ ft.(m) _in.(cm) abov 4. For Zone AO only: If no flood de	re the highest adjacent grade. Con epth number is available, is the top	nplete Items C3.h and C3.i on from of the bottom floor elevated in acc	t of form. ordance with the community's
	ce? Yes No Unkno		
The property owner or owner's auth		······································	
(without a FEMA-issued or communithe best of my knowledge. PROPERTY OWNER'S OR OWNER'S			ions A, B, C, and E are correct to
ADDRESS		CITY STAT	E ZIP CODE
SIGNATURE		DATE TELE	PHONE
COMMENTS	1		
			Check here if attachments
	SECTION G - COMMUNITY	INFORMATION (OPTIONAL)	
The local official who is authorized bections A, B, C (or E), and G of this G1. The information in Section C engineer, or architect who i elevation data in the Comm G2. A community official comple Zone AO. G3. The following information (life)	s Elevation Certificate. Complete the Comple	ne applicable item(s) and sign belotion that has been signed and embocertify elevation information. (Inc	ow. consect by a licensed surveyor, dicate the source and date of the ed or community-issued BFE) or
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE	OF COMPLIANCE/OCCUPANCY
G7. This permit has been issued for	r: New Construction S	Substantial Improvement	
38. Elevation of as-built lowest floor	·	•	ft.(m) Datum:
G9. BFE or (in Zone AO) depth of flo	ooding at the building site is:		ft.(m) Datum:
LOCAL OFFICIAL'S NAME	· , , , , , , , , , , , , , , ,	TITLE	
COMMUNITY NAME		TELEPHONE	
SIGNATURE		DATE	
COMMENTS			
	· · · · · · · · · · · · · · · · · · ·		
1			
			Check here if attachmen