FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD 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 BUILDING OWNER'S NAME		For Insurance Company Use:		
Ronald E. & Patricia L. Cholas	Policy Number			
BUILDING STREET ADDRESS (Including Apl., Unit, Sulle, and 17817 Lee Avenue	Company NAIC Number			
CITY	STATE	ZIP CODE		
Town Of Redington Shores	FL FL			
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 38, Second Addition to Harbor Shores Subdivision				
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) Residential				
	AL DATUM: SOURCE: GPS (Type):_ NAD 1983	lap I I Other:		
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION				
Bi. NFIP COMMUNITY NAME & COMMUNITY NUMBER Redngtn.Shrs., Twnof125141#	B2.COUNTY NAME Pinellas	B3. STATE FL		
B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX	B7. FIRM PANEL B8. FLOOD	B9. BASE FLOOD ELEVATION(S)		
NUMBER DATE 125141.0001 B 3.2.83	EFFECTIVE/REVISED DATE ZONE(S) 3.2.83 A12	(Zone AO, use depth of flooding)		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.				
IFIS Profile				
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 Resource	s System (CBRS) area or Otherwise Protected A	rea (OPA)? Yes <u>*</u> No		
Designation Dete:				
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 cor				
2. Building Diagram Number 6 (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 C3e-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.				
Datum Cohversion/Comments See reverse comments (Section D)				
Elevation reference mark used Does the elevation reference mark used appear on the FIRM? Yes * No				
a) Top of bottom floor (Including basement or enclo		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
b) Top of next higher floor	15 22 0 () 0	A		
C) Bottom of lowest horizontal structural member (\	zones only) NA . fl.(m) 2 8	100		
U c) Boltom of lowest horizontal structural member (V zones only) U d) Attached garage (lop of slab) D (1) Attached garage (lop of slab)				
d e) Lowest elevation of machinery and/or equipment				
servicing the building	14.5_ft.(m) 🖁 🖥			
1) Lowest adjacent grade (LAG)	4.9 ft.(m)	The second secon		
g) Highest adjacent grade (HAG)	5.6_ft.(m) 👑			
D h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 12 RLS#3035 6. 12.00				
U I) Total ered of all permanent openings (flood vents) in C3h 5,656 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.				
l understand that any falsa statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. CERTIFIER'S NAME LICENSE NUMBER				
Philin C. Stock				
President COMPANY NAME Target Land Surveying Inc.				
ADDRESS CITY STATE ZIP CODE				
P.O. Box 663 SIGNATURE	Dunedin FL	34697		
	6,12,00 (727)784			
Brily C Stock	0.12.00 (727)704	. 0.3 / 3		

IMPORTANT: In these spaces,	copy the corresponding information fro	ım Section A.	For Insurance Company Use	
BUILDING STREET ADDRESS (Inclu 17817 Lee Avenue	uding Apt., Unit, Suite, and/or Bidg, No.) OR P.O	D. ROUTE AND BOX NO.	Policy Number	
Town Of Redington	STATE	ZIP CODE	Company NAIC Number	
	n Shores FL ND-SURVEYOR, ENGINEER, OR ARCH	ITECT CERTIFICATION (CON	TINUED)	
	Certificate for (1) community official, (2) In			
COMMENTS			·	
9/1205.09 B	enchmark= B.M.D. "120	мар#199 E1.=	-3.032'	
			1 4 4 4 4 4 4 4	
SECTION E : BIHI DING ELE	EVATION INFORMATION (SURVEY NOT	REQUIRED FOR ZONE AS A	Check here if attachments	
	BFE), complete Items E1 through E4. If the			
Information for a LOMA or LOMR-I	F, Section C must be completed.			
	(Select the building diagram most simil ram accurately represents the building, pro		certificate is being completed –	
	cluding basement or enclosure) of the build		i.(cm) above or below	
E3. For Building Diagrams 6-8 with	h openings (see paga 7), the next higher fic	oor or elevated floor (elevation b) of the building is	
ft.(m) lin.(cm) ab	pove the highest adjacent grade. depth number is available, is the lop of the			
!iloodplain management ordina	ance? Yes No Unknown.	The local official must certify this	s information in Section G.	
SECTION	N F - PROPERTY OWNER (OR OWNER'S	S REPRESENTATIVE) CERTIFI	ICATION	
The property owner or owner's au community-issued BFE) or Zone /	uthorized representative who completes Se AO must sign here.	ections A, B, and E for Zone A (w	vithout a FEMA-issued or	
PROPERTY OWNER'S OR OWNER'S	'S AUTHORIZED REPRESENTATIVE'S NAME			
ADDRESS	CITY	STATE	ZIP CODE	
SIGNATURE	DATE	TELEPHO	DNE	
COMMENTS				
	Name of the second seco	1	Check here if attachments	
	SECTION G - COMMUNITY INFO			
Sections A, B, C (or E), and G of thi	by law or ordinance to administer the com- ils Elevation Certificate. Complete the app	olicable Item(s) and sign below.	•	
G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the				
elevation data in the Comm	ments area below.)			
G2. A community official comple	menis area below.) leted Section E for a building located in Zoi	ne A (without a FEMA-issued or	community-issued BFE) or	
Zone AO.				
G3. The following information (I G4. PERMIT NUMBER	Items G4-G9) is provided for community for I G5. DATE PERMIT ISSUED			
OTHER POMBER	93. UNIC PERMIT ISSUED	G6. DATE CERTIFICATE OF C	CONTLIANCE/OCCUPANCY	
G7. This parmit has been issued for		itiel Improvement		
	r (Including basement) of the building is:		fl.(m) Dalum:	
G9. BFE or (in Zone AO) depth of fit LOCAL OFFICIAL'S NAME			_fl.(m) Datum:	
		TILE		
COMMUNITY NAME		ELEPHONE		
SIGNATURE	D	ATE		
COMMENTS				
	·			
			Check here if attachments	
FFMA Form 81-31 AUG 99		REPI AC	ES ALL PREVIOUS EDITIONS	