JOB #06-0243

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires December 31, 2005

ELEVATION CERTIFICATE

		PROPERTY OWNER IN		N.	Forlagemen Co			
BUILDING OWNER'S NAME	For Insurance Company Use:	algerians i						
REDINGTON SHORES CAPI	Policy Number	STANCE!						
STREET ADDRESS 150 174TH TERRACE	Company NAIC Number							
CITY REDINGTON SHORES		STATE FLOR	RIDA	ZIPCO	DDE 33708			
PROPERTY DESCRIPTION (Lot and Block No.	imbers, Tax Parcel f	Number, Legal Description,	etc.)	٦	•			
BUILDING USE (e.g., Residential, Non-residen RESIDENTIAL	tial, Addition, Access	ory, etc. Use a Comments	area, if neo	essary.)				
LATITUDE/LONGITUDE (OPTIONAL) NAD 1927 NAD 19		VTAL DATUM: ☐ USGS Quad	SOU Map	RCE: GPS (Ty	oe):			
SEC	TION B - FLOOD II	SURANCE RATE MAP	FIRM) INFO	ORMATION				
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER REDINGTON SHORES 125141		B2. COUNTY NAME PINELLAS			33. State Florida			
	B6. FIRM INDEX DATE	B7. FIRM PANEL EFFECTIVE/REVISED I	DATE	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION (Zone AO, use depth of flooding			
12/03 co179 G	9/3/03	9/3/03		AG	11.0			
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. FIS Profile Community Determined Other (Describe):								
☐ FIS Profile ☐ Community Determined ☐ 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 Resou	urces System (CBRS)				Designation Date			
SECTIO	N C - BUILDING E	LEVATION INFORMATIO	N (SURVE	Y REQUIRED)	and the second s			
C1. Building elevations are based on: Construction	n Drawings*	Building Under Construction	. A Fin	ished Construction				
*A new Elevation Certificate will be required wher		ilding is complete.		•				
2. Building Diagram Number (Select the building d	iagram most similar to	the building for which this cert	ificate is bein	g completed - see pa	ges 6 and 7. If no diagram			
accurately represents the building, provide a sket								
C3. Elevations – Zones A1-A30, AE, AH, A (with BFE)								
Complete Items C3a-i below according to the bu								
Section B, convert the datum to that used for the	the second second		on calculation	n. Use the space pro	vided or the Comments area of			
Section D or Section G, as appropriate, to docum					A SECULAR SE			
Datum — Conversion/Comments — Does the e	loyation reference may	truced appear on the EIDM2	****] No	1-1			
o a) Top of bottom floor (including basement or e		Bace 524ft (m)	Дісь Г	_i	FREDERICK S. BACHMAN	IN		
o b) Top of next higher floor	Levar In	Bock 5.74-ft.(m)		ွိုင္မေ	LS#5174	9000		
o c) Bottom of lowest horizontal structural memb		N/14 ft.(m)		nbossed d Date	ALY	N.		
o d) Attached garage (top of slab)	Ci (V Zorioo Cinj)	<u>\$</u> 74ft.(m)	1	9 P	- N//			
o e) Lowest elevation of machinery and/or equip	ment				10 10	1		
servicing the building (Describe in a Comm	nents area)	etale 1/2/ft.(m)		Number Signaturo				
o f) Lowest adjacent (finished) grade (LAG)		5. ₹ ft.(m)	4, 1, 4	Nem	V 1/2/1			
o g) Highest adjacent (finished) grade (HAG)		5.6 ft.(m)				.1 1		
o h) No. of permanent openings (flood vents) with	hin 1 ft. above adiacen			igense de	Manch 35.2	á ·		
o i) Total area of all permanent openings (flood v			i i i i i i i i i i i i i i i i i i i			7 Sec. 1		
		R, ENGINEER, OR ARCH	TECT CER	TIFICATION	**************************************			
This certification is to be signed and sealed by a					rmation	53 ₁ 137		
I certify that the information in Sections A, B, an	nd C on this certificat	e represents my best effort	s to interpre	the data available.				
I understand that any false statement may be po	unishable by fine or i	mprisonment under 18 U.S	. Code, Sec	tion 1001.	V production to the partit	w.330		
CERTIFIER'S NAME FREDERICK S. BACHMANN LICENSE NUMBER PLS 5174								
	The second second second			Sparre				
TITLE PROFESSIONAL LAND SURVEYOR	AND MAPPER	COMPANY	VAME SI	JRVEY PROS, INC.		1.1.1.1. 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.		
ADDRESS		CITY	DMATER	STATE	ZIP CODE	* 12 TA		
1425 GULF TO BAY BOULEVARD	,		RWATER	FL	33755			
SIGNATURE		DATE		TELEPI	10NE 27-449-9010			
Gustin State		7/25/00			21 773-30 10			

IMPORTANT: In these space	For Insurance Company Use:			
BUILDING STREET ADDRESS (Included 150 174TH TERRACE DRIVE E	ing Apt., Unit, Suite, and/or Bldg. No.) OR P.O. RC :AST	UTE AND BOX NO.	• •	Policy Number
CITY REDINGTON SHORES		STATE FL	ZIP CODE 33708	Company NAIC Number
	SECTION D - SURVEYOR, ENGINEE	R, OR ARCHITECT CE	RTIFICATION (CONTINU	JED)
, both sides of this Elevation Co	ertificate for (1) community official, (2) insurar	nce agent/company, and (3	3) building owner.	
COMMENTS BOTTOM	FLOOR IS PARKE	NG & StoRA	e65.	
			e de la compansión de la c	☐ Check here if attachments
	ING ELEVATION INFORMATION (SU			
	E), complete Items E1 through E4. If the Ele	evation Certificate is intend	ed for use as supporting infor	mation for a LOMA or LOMR-F,
represents the building, provide a	ect the building diagram most similar to the b a sketch or photograph.) ling basement or enclosure) of the building is			
natural grade, if available).				
grade. Complete items C3.h and				ε_I
E4. The top of the platform of machine natural grade, if available).	ery and/or equipment servicing the building in	s ft.(m)in.(cm) [_] a	above or below (check or	ne) the highest adjacent grade. (Use
•	oth number is available, is the top of the botton. The local official must certify this information	r	ance with the community's floo	odplain management ordinance?
	SECTION F - PROPERTY OWNER (C		ENTATIVE) CERTIFICAT	ION A LANGE TO THE REAL PROPERTY OF THE REAL PROPER
	orized representative who completes Section here. The statements in Sections A, B, C, a			without a FEMA-issued or community-
PPOPERTY OWNER'S OR OWNER	ER'S AUTHORIZED REPRESENTATIVE'S	NAME		
AUDRESS	- 1, 1 to 1 to 1	CITY	ST	ATE ZIP CODE
SIGNATURE	en e	DATE	TE	LEPHONE
COMMENTS	·			
	we the second		A South Control of the Control of th	
		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	uria) urbouris	☐ Check here if attachments
· ·	SECTION G - COMM	UNITY INFORMATION	(OPTIONAL)	Waste that year
Certificate. Complete the applicable it G1. The information in Section C or local law to certify elevatio G2. A community official complete G3. The following information (Iter	was taken from other documentation that ha in information. (Indicate the source and date ed Section E for a building located in Zone A ms G4-G9) is provided for community floodp	s been signed and embose of the elevation data in the (without a FEMA-issued o lain management purpose	sed by a licensed surveyor, er Comments area below.) r community-issued BFE) or Z s.	ngineer, or architect who is authorized by s
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	(Marian) .	36. DATE CERTIFICATE OF CO	IMPLIANCE/OCCUPANCY ISSUED
	□ New Construction □ Substantial Impr ncluding basement) of the building is: ding at the building site is:	ovement	ft.(m) ft.(m)	Datum: Datum:
LOCAL OFFICIAL'S NAME		TITLE		
COMMUNITY NAME		TELE	PHONE	And the Ewister's
O'GNATURE		DATE	t the second of the second	1
JOMMENTS		energy of the second	1.11	particular wat of Harrist
		as ing his si		
	147		· · · · · · · · · · · · · · · · · · ·	Check here if attachments