

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28, 2009

Revised: 11/20/2007 Important: Read the instructions on pages 1-8.

## SECTION A - PROPERTY INFORMATION

For Insurance Company Use:

A1. Building Owner's Name <b>Donald Cuervo; Rosa A. Cuervo</b>	Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>19918 Gulf Boulevard #7</b>	Company NAIC Number

City **Indian Shores** State **Florida** ZIP Code **33785**

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
Subdivision **49212 Lot 0038**

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **Residential**

A5. Latitude/Longitude: Lat. \_\_\_ Long. \_\_\_ Horizontal Datum:  NAD 1927  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 **6**

A8. For a building with a crawl space or enclosure(s), provide:  
 a) Square footage of crawl space or enclosure(s) **798** sq ft  
 b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade **6**  
 c) Total net area of flood openings in A8.b **864** sq in

A9. For a building with an attached garage, provide:  
 a) Square footage of attached garage **0** sq ft  
 b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade **0**  
 c) Total net area of flood openings in A9.b **0** sq in

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>125118 Town of Indian Shores</b>		B2. County Name <b>Pinellas</b>		B3. State <b>Florida</b>	
B4. Map/Panel Number <b>12103C 0176</b>	B5. Suffix <b>G</b>	B6. FIRM Index Date <b>9/3/2003</b>	B7. FIRM Panel Effective/Revised Date <b>9/3/2003</b>	B8. Flood Zone(s) <b>AE</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>12</b>

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.

FIS Profile  FIRM  Community Determined  Other (Describe) \_\_\_\_\_

Indicate elevation datum used for BFE in Item B9:  NGVD 1929  NAVD 1988  Other (Describe) \_\_\_\_\_

Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Yes  No  
 Designation Date \_\_\_\_\_  CBRS  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.

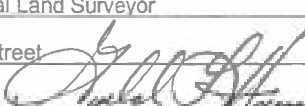
C2. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, ARA, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-g below according to the building diagram specified in Item A7.  
 Benchmark Utilized **Narrow G** Vertical Datum **NGVD1929**  
 Conversion/Comments Elevations at NGVD 1929 Datum \_\_\_\_\_


a) Top of bottom floor (including basement, crawl space, or enclosure floor) **7.66** feet   
 b) Top of the next higher floor **17.59** feet   
 c) Bottom of the lowest horizontal structural member (V Zones only) **n/a** feet   
 d) Attached garage (top of slab) **n/a** feet   
 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) **16.32** feet   
 f) Lowest adjacent (finished) grade (LAG) **6.80** feet   
 g) Highest adjacent (finished) grade (HAG) **7.40** feet

## 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.

Certifier's Name <b>Garland L. Harman</b>		License Number <b>#3947 State of Florida</b>	
Title <b>Professional Land Surveyor</b>	Company Name <b>Residential Surveying Specialists, Inc.</b>		
Address <b>927 Fern Street</b>	City <b>Altamonte Springs</b>	State <b>Florida</b>	ZIP Code <b>32701</b>
Signature 	Date <b>11-5-2007</b>	Telephone <b>1-800-787-8266</b>	

PSM # **3217**  
State Of Florida  
  
**11-5-2007**

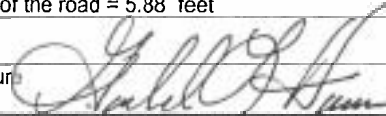
<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>				For Insurance Company Use:	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 19918 Gulf Boulevard				Policy Number	
City Indian Shores	State FL	ZIP Code 33785	Company 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  
0-169824 C2e is the ac unit

Crown of the road = 5.88 feet

Signature:  Date: 11-5-2007  Check here if attachments

**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-E4, use natural grade, if available. Check the measurement used. 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, crawl space, or enclosure) is \_\_\_\_\_ feet  above or  below the HAG.
- b) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ feet  above or  below the LAG.
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_ feet  above or  below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_ feet  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ feet  above or  below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in 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's 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. and G9.

1.  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.)
2.  A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
3.  The following information (Items G4.-G9.) 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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7. This permit has been issued for:  New Construction  Substantial Improvement
8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ feet Datum \_\_\_\_\_
9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ feet Datum \_\_\_\_\_

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____
Comments _____	

Check here if attachments