FEDERAL EMERGENCY MANAGEMENT AGENCY

NATIONAL FLOOD INSURANCE PROGRAM

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

Replaces all previous editions

05020101

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7. **SECTION A - PROPERTY OWNER INFORMATION** For Insurance Company Use: BUILDING OWNER'S NAME Policy Number PRESCOTT & PRESCOTT GERALD 7. JILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number CITY STATE ZIP CODE BELLEAIR BEACH
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 33786 BELLEVUE ESTATES BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): ##°-##'-##.##" or ##.####") NAD 1927 NAD 1983 USGS Quad Map |_ | Other SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME B3. STATE** 12103601126 PINELLAS **B4. MAP AND PANEL B5. SUFFIX B7. FIRM PANEL B6. FIRM INDEX** B8. FLOOD B9. BASE FLOOD ELEVATION(S) NUMBER DATE EFFECTIVE/REVISED DATE ZONE(S) (Zone AO, use depth of flooding) 12103001126 09 03 03 090303 E (EL B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. IVI FIRM __ | 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 Resources System (CBRS) area or Otherwise Protected Area (OPA)? | Yes | Yes | No Designation Date: SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) |_ |Building Under Construction* I ✓ Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number ______ (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.) 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. Datum NGVD 1929 Conversion/Comments N/A Does the elevation reference mark used appear on the FIRM? |__| Yes Elevation reference mark used HALL "E" (5,419) a) Top of bottom floor (including basement or enclosure) 8.06ft.(m) b) Top of next higher floor N/A ft.(m) c) Bottom of lowest horizontal structural member (V zones only) $M/A_{ft.(m)}$ 7. 22 ft.(m) d) Attached garage (top of slab) e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) 7.99ft.(m) f) Lowest adjacent (finished) grade (LAG) 7.0 ft.(m) g) Highest adjacent (finished) grade (HAG) 1.2 ft.(m) h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade N/A i) Total area of all permanent openings (flood vents) in C3.h
 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 DUANE TITLE BRINKMAN 5 4976 COMPANY NAME SURVEYOR & MAPPER PROFESSIONAL ZIP CODE TELEPHON Marie

See reverse side for continuation.

MA Form 81-31, January 2003

MPORTANT: In these spaces, copy the corresponding information from Section A. BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bidg. No.) OR P.O. ROUTE AND BOX NO.				For Insurance Company Use:
				Policy Number
106 22 NO 57	7.	STATE	ZIP CODE	Company NAIC Number
BELLEAIR B	EACH	FL	33786	
	SECTION D - SURVEYOR, ENG	INEER, OR ARCHI	FECT CERTIFICATION (CO	YTINUED)
my both sides of this El	levation Certificate for (1) comm	unity official, (2) insu	rance agent/company, and (3) building owner.
MMENTS				
				
				Check here if attachme
SECTION E - BUILDI	NG ELEVATION INFORMATIO	N (SURVEY NOT R	EQUIRED) FOR ZONE AO	AND ZONE A (WITHOUT REF)
	(without BFE), complete Items E			
ormation for a LOMA or	LOMR-F, Section C must be con	mpleted.		
. Building Diagram Num	ber (Select the building of	liagram most similar	to the building for which this	certificate is being completed -
see pages 6 and 7. If	no diagram accurately represen	ts the building, provi	de a sketch or photograph.)	
The top of the bottom t	floor (including basement or enc	losure) of the buildin	g is ft. (m) _ in.	(cm) above or below
For Building Diagrams	st adjacent grade. (Use natural 6-8 with openings (see page 7),	grade, if available.)	r or alayated floor (alayation	b) of the building is
ft. (m) lin	. (cm) above the highest adjace	nt grade. Complete	Items C3.h and C3.i on front	of form.
. The top of the platform	of machinery and/or equipment	servicing the building	g is _ ft. (m) _ in.	(cm) labove or l lbelow
(check one) the highes	st adjacent grade. (Use natural	grade, if available.)		
For Zone AO only: If n	no flood depth number is available	le, is the top of the b	ottom floor elevated in accor	dance with the community's
	nt ordinance? Yes No ECTION F - PROPERTY OWN			
	ner's authorized representative			
rithout a FEMA-issued o	r community-issued BFE) or Zor	ne AO must sign her	e. The statements in Section	is A. B. C. and E are correct to
e best of my knowledge.				11, 2, 0, and 2 are obridge to
ROPERTY OWNER'S OR (OWNER'S AUTHORIZED REPRESE	ENTATIVE'S NAME		
DORESS		CITY	STATE	ZIP CODE
311-16				
GNATURE		DATE	TELEPH	ONE
MENTS				
	SECTION C. CO		PATION (OPTIONAL)	Check here if attachme
local official who is auti	horized by law or ordinance to a		IATION (OPTIONAL)	
tions A. B. C (or F) and	I G of this Elevation Certificate.	Complete the applic	inity's 1100aptain managemer	it ordinance can complete
The information in	Section C was taken from other	documentation that	has been signed and embos	sed by a licensed surveyor
engineer, or archite	ect who is authorized by state or	r local law to certify e	levation information. (Indica	te the source and date of the
elevation data in th	ne Comments area below.)			
	al completed Section E for a buil	ding located in Zone	A (without a FEMA-issued o	r community-issued BFE) or
Zone AO. L The following inform	mation (Items G4-G9) is provide	d for community floo	dolein menegament aumaen	
PERMIT NUMBER	G5. DATE PERMIT ISS	UED	G6. DATE CERTIFICATE OF ISSUED	COMPLIANCE/OCCUPANCY
This permit has been is	sued for: New Constructi	on I I Substantia	I Improvement	
	est floor (including basement) o		ii iiripioveirietii.	_ ft. (m) Datum;
	pth of flooding at the building si			_ ft. (m) Datum:
OAL OFFICIALIS MANEE				
CAL OFFICIAL'S NAME		TITI	LE .	
MMUNITY NAME		TEL	EPHONE	
ONATURE		DAT	TE .	
OMMENTS				
				Check here if attachme
A Form 81-31 January	0000			Della Grieck nere if attachmen