## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

## FLEVATION CERTIFICATE

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

Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: Policy Number ILDING OWNER'S NAME KENNETH S. TAKACS Company NAIC Number BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 23 BATH CLUB CIRCLE ZIP CODE STATE CITY 33708 TOWN OF NORTH REDINGTON BEACH FL PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 10 TIDES VILLAGE - CONCOURSE NORTH BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL HORIZONTAL DATUM: SOURCE: GPS (Type): LATITUDE/LONGITUDE (OPTIONAL) ( ##° - ##' - ##.##" or ##.####") USGS Quad Map ■ NAD 1983 Other: □ NAD 1927 SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B3. STATE B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME PINELLAS (INDEPENDENT CITY) FI Town of N. Redington Beach 125133 B9. BASE FLOOD ELEVATION(S) B7. FIRM PANEL B8. FLOOD B6. FIRM INDEX B4. MAP AND PANEL B5. SUFFIX (Zone AO, use depth of flooding) DATE EFFECTIVE/REVISED DATE ZONE(S) NUMBER MARCH 2, 1983 A12 EL. 10 & EL.11\* 125133 0001 D MARCH 2, 1983 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. Other (Describe): Community Determined B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☐ No Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: Construction Drawings\* ☐ Building Under 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 C3a-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 1929 Conversion/Comments Elevation reference mark used SRD#122 Does the elevation reference mark used appear on the FIRM? Yes No o a) Top of bottom floor (including basement or enclosure) 7.0 ft Seal License Number: LS 1762-16.3 ft. o b) Top of next higher floor Empossed c) Bottom of lowest horizontal structural member (V zones only) N.A ft. 6.7 ft o d) Attached garage (top of slab) and o e) Lowest elevation of machinery and/or equipment Number, Signature, 11.9 ft. servicing the building 6.6 ft. o f) Lowest adjacent grade (LAG) 6.9 ft. o g) Highest adjacent grade (HAG) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 64 o i) Total area of all permanent openings (flood vents) in C3h 484 sq. in. Date: 7-30-02 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. LICENSE NUMBER CERTIFIER'S NAME LS 1762 "SANDY" LLOVERAS COMPANY NAME TIF FLORIDA PROFESSIONAL SURVEYOR & MAPPER LLOVERAS, BAUR AND STEVENS ZIP CODE STATE ADDRESS FLORIDA 33761 CLEARWATER 29228 U.S. HIGHWAY 19 NOR TELEPHONE DATE SIGNATURE 727-784-3965 JULY 30, 2002 REPLACES ALL PREVIOUS EDITIONS

SEE REVERSE SIDE FOR CONTINUATION

FEMA Form 81-31, AUG 99

		0 4 .	For Inquirence Common Uses
IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:
BUILDING STREET ADDRESS ( 23 Bath Club Circle	Including Apt., Unit, Suite, and/or Bldg. No.) OR P.		Policy Number
CITY Town of North Redington Beach	STATE FL	ZIP CODE 33708	Company NAIC Number
SEC	TION D - SURVEYOR, ENGINEER, OR ARC	CHITECT CERTIFICATION (CO	ONTINUED)
	tion Certificate for (1) community official, (2) i	insurance agent/company, and	(3) building owner.
COMMENTS *Building lies in A12 - Elev. 10			
Section C3(a) shows the elevator	ns of the enclosed entry.		
		T DECUMPED FOR ZONE AO	Check here if attachmen
	ELEVATION INFORMATION (SURVEY NO		
For Zone AO and Zone A (with	nout BFE), complete Items E1 through E4. If	the Elevation Certificate is lifter	nded for use as supporting
nrormation for a LOMA or LOI	MR-F, Section C must be completed.  (Select the building diagram most similar to	o the building for which this cert	tificate is being completed - see
pages 6 and 7. If no diagr	ram accurately represents the building, provide	de a sketch or photograph.)	
E2. The top of the bottom floor	r (including basement or enclosure) of the bu	ilding is ft.(m)in.(cm) [	above or   below (check one)
the highest adjacent grade	э.		
	with openings (see page 7), the next higher	floor or elevated floor (elevation	n b) of the building is
ft.(m)in.(cm) above	the highest adjacent grade.	he hottom floor elevated in accor	ordance with the community's
E4. For Zone AO only: If no floodalain management or	ood depth number is available, is the top of the dinance?  Yes No Unknown. The	he local official must certify this	information in Section G.
SEC	TION F - PROPERTY OWNER (OR OWNER	R'S REPRESENTATIVE) CERT	TIFICATION
	's authorized representative who completes S		
community-issued BFE) or Zo			
PROPERTY OWNER'S OR OWN	NER'S AUTHORIZED REPRESENTATIVE'S NAM	E	
ADDRESS	CITY	STATI	E ZIP CODE
SIGNATURE	DAT	E TELEI	PHONE
COMMENTS			
			Check here if attachmen
	SECTION G - COMMUNITY INF	ORMATION (OPTIONAL)	
The local official who is authori	ized by law or ordinance to administer the co	mmunity's floodplain managem	ent ordinance can complete
Sections A, B, C (or E), and G	of this Elevation Certificate. Complete the a	pplicable item(s) and sign below	N.
G1. The information in Sect	tion C was taken from other documentation the who is authorized by state or local law to certi	hat has been signed and embos	ate the source and date of the
engineer, or architect v		ny elevation information. (indic	ate the source and date of the
	impleted Section E for a building located in Z	one A (without a FEMA-issued	or community-issued BFE) or
Zone AO.			
G3.   The following information	on (Items G4-G9) is provided for community	floodplain management purpose	es.
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE ISSUED	OF COMPLIANCE/OCCUPANCY
G7. This permit has been issue	ed for: New Construction Substantia	al Improvement	
	t floor (including basement) of the building is:	ft.(m)	Datum: Datum:
G9. BFE or (in Zone AO) deptr	n of flooding at the building site is:	TITLE	Datum
COMMUNITY NAME		TELEPHONE	
SIGNATURE		DATE	
COMMENTS			
COMMENTS			
		1	
		at his	Check here if attachmen