U.S. DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
National Flood Insurance Program

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

Policy Number: ______

Company NAIC Number: ______

A1. Building Owner's Name: Spinelli Real Estate Development, Inc.

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:
17059 Dolphin Drive

City: North Redington Beach State: FL ZIP Code: 33708

A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number:
Parcel# 05-31-15-61038-000-0190 North Redington Beach, Sect. B, Lot 19

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

A5. Latitude/Longitude: Lat. 27°49'19.28" Long. -082°49'10.97" Horizontal Datum: ☐ NAD 1927 ☐ NAD 1983 ☒ WGS 84

A6. Attach at least two and when possible four clear photographs (one for each side) of the building (see Form pages 7 and 8).

A7. Building Diagram Number: 6

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s): 1,920.00 sq. ft.

b) Is there at least one permanent flood opening on two different sides of each enclosed area? ☒ Yes ☐ No ☐ N/A

c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade:
Non-engineered flood openings: 0 Engineered flood openings: 10

d) Total net open area of non-engineered flood openings in A8.c: N/A sq. in.

e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructions): 2,500.00 sq. ft.

f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): N/A sq. ft.

A9. For a building with an attached garage:

a) Square footage of attached garage: N/A sq. ft.

b) Is there at least one permanent flood opening on two different sides of the attached garage? ☐ Yes ☐ No ☒ N/A

c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade:
Non-engineered flood openings: N/A Engineered flood openings: N/A

d) Total net open area of non-engineered flood openings in A9.c: N/A sq. in.

e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructions): N/A sq. ft.

f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): N/A sq. ft.

SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1.a. NFIP Community Name: Town of North Redington Beach B1.b. NFIP Community Identification Number: 125133

B2. County Name: Pinellas B3. State: FL B4. Map/Panel No.: 12103C0179 B5. Suffix: H

B6. FIRM Index Date: 08/24/2021 B7. FIRM Panel Effective/Revised Date: 08/24/2021

B8. Flood Zone(s): AE B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): 11.0'

B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9:
☐ FIS ☒ FIRM ☐ Community Determined ☐ Other: ______

B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source: ______

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No
Designation Date: N/A ☐ CBRS ☐ OPA

B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? ☒ Yes ☐ No

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 17059 Dolphin Drive	**FOR INSURANCE COMPANY USE**
City: North Redington Beach State: FL ZIP Code: 33708	Policy Number: ______ Company NAIC Number: ______

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, AO, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO, A99. Complete Items C2.a–h below according to the Building Diagram specified in Item A7. In Puerto Rico only, enter meters.
Benchmark Utilized: AG0835 EL=3.86' Vertical Datum: NAVD 1988

Indicate elevation datum used for the elevations in items a) through h) below.
☐ NGVD 1929 ☒ NAVD 1988 ☐ Other: ______

Datum used for building elevations must be the same as that used for the BFE. Conversion factor used? ☐ Yes ☒ No
If Yes, describe the source of the conversion factor in the Section D Comments area.

		Check the measurement used:
a) Top of bottom floor (including basement, crawlspace, or enclosure floor):	4.80	☒ feet ☐ meters
b) Top of the next higher floor (see Instructions):	15.90	☒ feet ☐ meters
c) Bottom of the lowest horizontal structural member (see Instructions):	N/A	☐ feet ☐ meters
d) Attached garage (top of slab):	N/A	☐ feet ☐ meters
e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area):	16.80	☒ feet ☐ meters
f) Lowest Adjacent Grade (LAG) next to building: ☐ Natural ☒ Finished	4.70	☒ feet ☐ meters
g) Highest Adjacent Grade (HAG) next to building: ☐ Natural ☒ Finished	5.00	☒ feet ☐ meters
h) Finished LAG at lowest elevation of attached deck or stairs, including structural support:	4.70	☒ feet ☐ meters

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by state 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.*

Thomas E Hummel Digitally signed by Thomas E Hummel Date: 2024.08.15 14:11:55 -04'00'

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

☒ Check here if attachments and describe in the Comments area.

Certifier's Name: Thomas E. Hummel License Number: 6595

Title: President

Company Name: Silver King Surveyors, Inc.

Address: 4831 8th Street North

City: St. Petersburg State: FL ZIP Code: 33703

Signature: Thomas E. Hummel Date: 08/15/2024

Telephone: (727) 518-4758 Ext.: ____ Email: silverkingsurveyors@gmail.com

08/15/2024

THOMAS E. HUMMEL License Number 6595 STATE OF FLORIDA Professional Surveyor and Mapper

Thomas E. Hummel

Place Seal Here

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and description of any attachments):
Latitude and Longitude was established using Google Earth.
C2. a) enclosure floor "ICC-ES Evaluation Report Attached"
C2. b) 2nd story living area
C2. e) HVAC platforms at the left side of the house. Bottom of power meter EL=12.25'
Flood openings are Freedom Flood Vents Model # FFV-1608 15 3/4" x 8 1/16" each covering 250 square feet

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

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City: North Redington Beach State: FL ZIP Code: 33708	Policy Number: ______ Company NAIC Number: ______

SECTION E – BUILDING MEASUREMENT INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO, ZONE AR/AO, AND ZONE A (WITHOUT BFE)

For Zones AO, AR/AO, and A (without BFE), complete Items E1–E5. For Items E1–E4, use natural grade, if available. If the Certificate is intended to support a Letter of Map Change request, complete Sections A, B, and C. Check the measurement used. In Puerto Rico only, enter meters.

Building measurements are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☐ Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

E1. Provide measurements (C.2.a in applicable Building Diagram) for the following and check the appropriate boxes to show whether the measurement is above or below the natural HAG and the LAG.

a) Top of bottom floor (including basement, crawlspace, or enclosure) is: ______ ☐ feet ☐ meters ☐ above or ☐ below the HAG.

b) Top of bottom floor (including basement, crawlspace, or enclosure) is: ______ ☐ feet ☐ meters ☐ above or ☐ below the LAG.

E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (C2.b in applicable Building Diagram) of the building is: ______ ☐ feet ☐ meters ☐ above or ☐ below the HAG.

E3. Attached garage (top of slab) is: ______ ☐ feet ☐ meters ☐ above or ☐ below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is: ______ ☐ feet ☐ meters ☐ 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 AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without BFE) or Zone AO must sign here. *The statements in Sections A, B, and E are correct to the best of my knowledge*

☐ Check here if attachments and describe in the Comments area.

Property Owner or Owner's Authorized Representative Name: ______

Address: ______

City: ______ State: ______ ZIP Code: ______

Signature: ______ Date: ______

Telephone: ______ Ext.: ______ Email: ______

Comments:

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 17059 Dolphin Drive City: North Redington Beach State: FL ZIP Code: 33708	**FOR INSURANCE COMPANY USE** Policy Number: ____ Company NAIC Number: ____

SECTION G – COMMUNITY INFORMATION (RECOMMENDED FOR COMMUNITY OFFICIAL COMPLETION)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Section A, B, C, E, G, or H of this Elevation Certificate. Complete the applicable item(s) and sign below when:

G1. ☐ 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 state law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2.a. ☐ A local official completed Section E for a building located in Zone A (without a BFE), Zone AO, or Zone AR/AO, or when item E5 is completed for a building located in Zone AO.

G2.b. ☐ A local official completed Section H for insurance purposes.

G3. ☐ In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E and H.

G4. ☐ The following information (Items G5–G11) is provided for community floodplain management purposes.

G5. Permit Number: ____ G6. Date Permit Issued: ____

G7. Date Certificate of Compliance/Occupancy Issued: ____

G8. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G9.a. Elevation of as-built lowest floor (including basement) of the building: ____ ☐ feet ☐ meters Datum: ____

G9.b. Elevation of bottom of as-built lowest horizontal structural member: ____ ☐ feet ☐ meters Datum: ____

G10.a. BFE (or depth in Zone AO) of flooding at the building site: ____ ☐ feet ☐ meters Datum: ____

G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member: ____ ☐ feet ☐ meters Datum: ____

G11. Variance issued? ☐ Yes ☐ No If yes, attach documentation and describe in the Comments area.

The local official who provides information in Section G must sign here. *I have completed the information in Section G and certify that it is correct to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.*

Local Official's Name: ____ Title: ____

NFIP Community Name: ____

Telephone: Ext.: ____ Email: ____

Address: ____

City: ____ State: ____ ZIP Code: ____

Signature: ____ Date: ____

Comments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information in Sections A, B, D, E, or H):

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 17059 Dolphin Drive

City: North Redington Beach State: FL ZIP Code: 33708

FOR INSURANCE COMPANY USE

Policy Number: ______

Company NAIC Number: ______

SECTION H – BUILDING'S FIRST FLOOR HEIGHT INFORMATION FOR ALL ZONES (SURVEY NOT REQUIRED) (FOR INSURANCE PURPOSES ONLY)

The property owner, owner's authorized representative, or local floodplain management official may complete Section H for all flood zones to determine the building's first floor height for insurance purposes. Sections A, B, and I must also be completed. Enter heights to the nearest tenth of a foot (nearest tenth of a meter in Puerto Rico). ***Reference the Foundation Type Diagrams (at the end of Section H Instructions) and the appropriate Building Diagrams (at the end of Section I Instructions) to complete this section.***

H1. Provide the height of the top of the floor (as indicated in Foundation Type Diagrams) above the Lowest Adjacent Grade (LAG):

a) **For Building Diagrams 1A, 1B, 3, and 5–9.** Top of bottom floor (include above-grade floors only for buildings with subgrade crawlspaces or enclosure floors) is: ______ ☐ feet ☐ meters ☐ above the LAG

b) **For Building Diagrams 2A, 2B, 4, and 6–9.** Top of next higher floor (i.e., the floor above basement, crawlspace, or enclosure floor) is: ______ ☐ feet ☐ meters ☐ above the LAG

H2. Is **all** Machinery and Equipment servicing the building (as listed in Item H2 instructions) elevated to or above the floor indicated by the H2 arrow (shown in the Foundation Type Diagrams at end of Section H instructions) for the appropriate Building Diagram?

☐ Yes ☐ No

SECTION I – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and H must sign here. *The statements in Sections A, B, and H are correct to the best of my knowledge.* **Note:** If the local floodplain management official completed Section H, they should indicate in Item G2.b and sign Section G.

☐ Check here if attachments are provided (including required photos) and describe each attachment in the Comments area.

Property Owner or Owner's Authorized Representative Name: ______

Address: ______

City: ______ State: ______ ZIP Code: ______

Signature: ______ Date: ______

Telephone: ______ Ext.: ______ Email: ______

Comments:

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 17059 Dolphin Drive	FOR INSURANCE COMPANY USE
City: North Redington Beach State: FL ZIP Code: 33708	Policy Number: Company NAIC Number:

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.

Photo One

Photo One Caption: "FRONT VIEW" 08/07/2024

Clear Photo One

Photo Two

Photo Two Caption: "REAR VIEW" 08/07/2024

Clear Photo Two

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

BUILDING PHOTOGRAPHS

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 17059 Dolphin Drive	FOR INSURANCE COMPANY USE
City: North Redington Beach State: FL ZIP Code: 33708	Policy Number: ____________ Company NAIC Number: ________

Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.

Photo Three

Photo Three Caption: "RIGHT SIDE VIEW" 08/07/2024

Clear Photo Three

Photo Four

Photo Four Caption: "LEFT SIDE VIEW" 08/07/2024

Clear Photo Four

V Zone Design and Construction Certification

Purpose: *To explain the certification requirements for structural design and methods of construction in V Zones.*

Structural Design and Methods of Construction Certification

As part of the agreement for making flood insurance available in a community, the National Flood Insurance Program (NFIP) requires the community to adopt a floodplain management ordinance that specifies minimum design and construction requirements. Those requirements include a **certification of the structural design and the proposed methods of construction** (a similar documentation requirement appears in the 2009 IRC, Section R322.3.6). It is recommended that the design professional use ASCE 24 and ASCE 7 as appropriate engineering standards.

Specifically, NFIP regulations and local floodplain management ordinances require that:

1. A **registered professional engineer or architect shall develop or review the structural design, specifications, and plans** for the construction.
2. A **registered professional engineer or architect shall certify that the design and methods of construction** to be used are in accordance with accepted standards of practice in meeting these criteria:

   The **bottom of the lowest horizontal structural member of the lowest floor** (excluding the pilings or columns) is elevated to, or above, the Base Flood Elevation (BFE) plus one foot of freeboard.

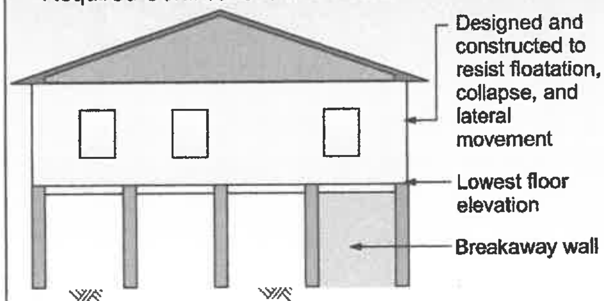
   The pile or column foundation and structure attached thereto is **anchored to resist flotation, col- lapse, and lateral movement due to the effects of wind and water loads acting simultaneously** on all building components. ASCE 7-10, *Minimum Design Loads for Buildings and Other Structures*, provides guidelines on different load combinations, which include flood and wind loads.

Completing the V Zone Design Certificate

There is no single V Zone certificate used on a nationwide basis. Instead, local communities and/or states have developed their own certification procedures and documents. Registered engineers and architects involved in V Zone construction projects should **check with the authority having jurisdiction regarding the exact nature and timing of required certifications.**

Martin County's certification form is attached. It is intended to be used as verification that the certification and supporting information is provided. The certification statement can address both design and proposed methods of construction and breakaway wall design.

Required Certifications in V Zones



Other Certifications Required in V Zone

Breakaway Wall Design by a registered professional engineer or architect (see attached requirements and recommendations for *Enclosures and Breakaway Walls*)

"As Built" Lowest Floor Elevation, by a surveyor, engineer, or architect (Elevation Certificate)

The V Zone Design certification should take into consideration the NFIP Free-of-Obstruction requirement for V Zones: the space below the lowest floor must be free of obstructions (e.g., building element, equipment, or other fixed objects that can transfer flood loads to the foundation, or that can cause flood- waters or waves to be deflected into the building), or must be constructed with non-supporting breakaway walls, open lattice, or insect screening. *(See NFIP Technical Bulletin 5 and Fact Sheet No. 8.1, Enclosures and Breakaway Walls.)*

V ZONE DESIGN CERTIFICATE

Name Spinelli Real Estate & Development Inc Policy Number *(Insurance Co. Use)* ____________

Building Address or Other Description 17059 Dolphin Dr

Permit No. 23NRD-00019 City North Redington Beach State FL Zip Code 33708

SECTION I: Flood Insurance Rate Map (FIRM) Information

Community No. 125133 Panel No. 0179 Suffix H FIRM Date 8/24/21 FIRM Zone(s) AE

SECTION II: Elevation Information Used for Design

[NOTE: This section documents the elevations/depths used or specified in the design – it does not document surveyed elevations and is not equivalent to the as-built elevations required to be submitted during or after construction.]

1. FIRM Base Flood Elevation (BFE)........ 11.0' feet*
2. Community's Design Flood Elevation (DFE)........ 12.0' feet*
3. Elevation of the Bottom of Lowest Horizontal Structural Member........ 13.9' feet*
4. Elevation of Lowest Adjacent Grade........ 4.13' feet*
5. Depth of Anticipated Scour/Erosion used for Foundation Design........ 3.4' feet
6. Embedment Depth of Pilings or Foundation Below Lowest Adjacent Grade........ 30'0 feet

* Indicate elevation datum used in 1-4: ☐ NGVD29 ☒ NAVD88 ☐ Other ____________

SECTION III: V Zone Design Certification Statement

I certify that: (1) I have developed or reviewed the structural design, plans, and specifications for construction of the above-referenced building and (2) that the design and methods of construction specified to be used are in accordance with accepted standards of practice for meeting the following provisions:

The bottom of the lowest horizontal structural member of the lowest floor (excluding piles and columns) is elevated to or above the BFE plus one foot of freeboard.

The pile and column foundation and structure attached thereto is anchored to resist flotation, collapse, and lateral movement due to the effects of the wind and water loads acting simultaneously on all building components. Water loading values used are those associated with the base flood. Wind loading values used are those required by the applicable State or local building code. The potential for scour and erosion at the foundation has been anticipated for conditions associated with the base flood, including wave action.

SECTION IV: Breakaway Wall Design Certification Statement

[NOTE. This section must be certified by a registered engineer or architect when breakaway walls are designed to have a resistance of more than 20 psf (0.96 kN/m2) determined using allowable stress design]

I certify that: (1) I have developed or reviewed the structural design, plans, and specifications for construction of breakaway walls to be constructed under the above-referenced building and (2) that the design and methods of construction specified to be used are in accordance with accepted standards of practice for meeting the following provisions:

Breakaway wall collapse shall result from a water load less than that which would occur during the base flood.

The elevated portion of the building and supporting foundation system shall not be subject to collapse, displacement, or other structural damage due to the effects of wind and water loads acting simultaneously on all building components (see Section III).

SECTION V: Certification and Seal

This certification is to be signed and sealed by a registered professional engineer or architect authorized by law to certify structural designs. ☒ I certify the V Zone Design Certification Statement (Section III) and if applicable,

☒ I certify the Breakaway Wall Design Certification Statement (Section IV).

Certifier's Name Kevin S. Smith, AIA License Number AR11656

Title Architect Company Name Scott K Smith Designs, LLC

Address 1909 West Patterson Street

City Tampa State FL Zip Code AR11656

Signature [signature] Date 5/7/25 E-mail kevin@scottks.com

Digitally signed by Kevin S Smith Date: 2025.05.07 '09:37:13 -04'00

STATE OF FLORIDA · KEVIN S. SMITH · NO 0011656 · REGISTERED ARCHITECT

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