



FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

OMB 3097-0077
Expires Feb. 1997

This form is to be used for: 1) New/Emergency Program construction in Special Flood Hazard Areas; 2) Pre-FIRM construction after September 30, 1982; 3) Post-FIRM construction; and, 4) Other buildings rated as Post-FIRM rules.

BUILDING OWNER'S NAME _____ ADDRESS _____

Robert Krause 500 182nd Avenue, Reddington Shores, FL 33708

PROPERTY LOCATION (Lot and Block numbers and address if available)

Lot 14, Block 1, SURESIDE SUB NO. 3, Pinellas County, Florida

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.

SECTION I ELIGIBILITY CERTIFICATION (Completed by Local Community Permit Official or a Registered Professional Engineer, Architect, or Surveyor)

COMMUNITY NO	PANEL NO.	SUFFIX	DATE OF FIRM	FIRM ZONE	DATE OF CONSTR.	BASE FLOOD ELEV. (in AO Zone, see depth)	BUILDING IS
125141	0001	B	3/2/83	A 11		10.0	<input type="checkbox"/> New/Emergency <input type="checkbox"/> Pre-FIRM Reg. <input type="checkbox"/> Post-FIRM Reg.

YES NO It is intended that the building described above will be constructed in compliance with the community's flood plain ordinance. The certifier may rely on community records. The lowest floor (including basement) will be at an elevation of 13.5 ft. NGVD. Failure to construct the building at this elevation may place the building in violation of the community's flood plain management ordinance.

YES NO The building described above has been constructed in compliance with the community's flood plain management ordinance based on elevation data and visual inspection or other reasonable means. If NO is checked, attach copy of variance issued by the community.

YES NO The mobile home located at the address described above has been tied down (anchored) in compliance with the community's flood plain management ordinance, or in compliance with the NFIP Specifications.

MOBILE HOME MAKE	MODEL	YR. OF MANUFACTURE	SERIAL NO.	DIMENSIONS
				X

(Community Permit Official or Registered Professional Engineer, Architect, or Surveyor)

NAME _____ ADDRESS _____

TITLE _____ CITY _____ STATE _____ ZIP _____

SIGNATURE _____ DATE _____ PHONE _____

SECTION II ELEVATION CERTIFICATION (Certified by a Local Community Permit Official or a Registered Professional Engineer, Architect, or Surveyor.)

FIRM ZONE A1-A30: I certify that the building at the property location described above has the lowest floor (including basement) at an elevation of _____ feet, NGVD (mean sea level) and the average grade at the building site is at an elevation of _____ feet, NGVD.

FIRM ZONES V, V1-V30: I certify that the building at the property location described above has the bottom of the lowest floor beam at an elevation of _____ feet, NGVD (mean sea level), and the average grade at the building site is at an elevation of _____ feet, NGVD.

FIRM ZONES A, A99, AH and EMERGENCY PROGRAM: I certify that the building at the property location described above has the lowest floor elevation of _____ feet, NGVD. The elevation of the highest adjacent grade next to the building is _____ feet, NGVD.

FIRM ZONE AO: I certify that the building at the property location described above has the lowest floor elevation of _____ feet, NGVD. The elevation of the highest adjacent grade next to the building is _____ feet, NGVD.

SECTION III FLOODPROOFING CERTIFICATION (Certification by a Registered Professional Engineer or Architect)

I certify to the best of my knowledge, information, and belief, that the building is designed so that the building is watertight, with walls substantially impermeable to the passage of water and structural components having the capability of resisting hydrostatic and hydrodynamic loads and effects of buoyancy that would be caused by the flood depths, pressures velocities, impact and uplift forces associated with the base flood.

YES NO In the event of flooding, will this degree of floodproofing be achieved with human intervention? (Human intervention means that water will enter the building when floods up to the base flood level occur unless measures are taken prior to the flood to prevent entry of water (e.g., bolting metal shields over doors and windows).

YES NO Will the building be occupied as a residence?

If the answer to both questions is YES, the floodproofing cannot be credited for rating purposes and the actual lowest floor must be completed and certified instead. Complete both the elevation and floodproofing certificates.

FIRM ZONES A, A1-A30, V1-V30, AO and AH: _____

Certified Floodproofed Elevation is _____ feet, (NGVD).

THIS CERTIFICATION IS FOR SECTION I BOTH SECTIONS II AND III (Check One)

CERTIFIER'S NAME _____ COMPANY NAME _____ LICENSE NO. (or Affix Seal)

C. Boyd Allen Allen-Land Surveying 3932 ZIP

President P. O. Box 1232 CITY STATE PHONE

2/1/88 Tarpon Springs, FL (813) 937-2055

The insurance agent should attach the original copy of the completed form to the flood insurance policy application, the second copy should be supplied to the policyholder and the third copy retained by the agent

INSURANCE AGENTS MAY ORDER THIS FORM

Section 31 Township 30S Range 15E

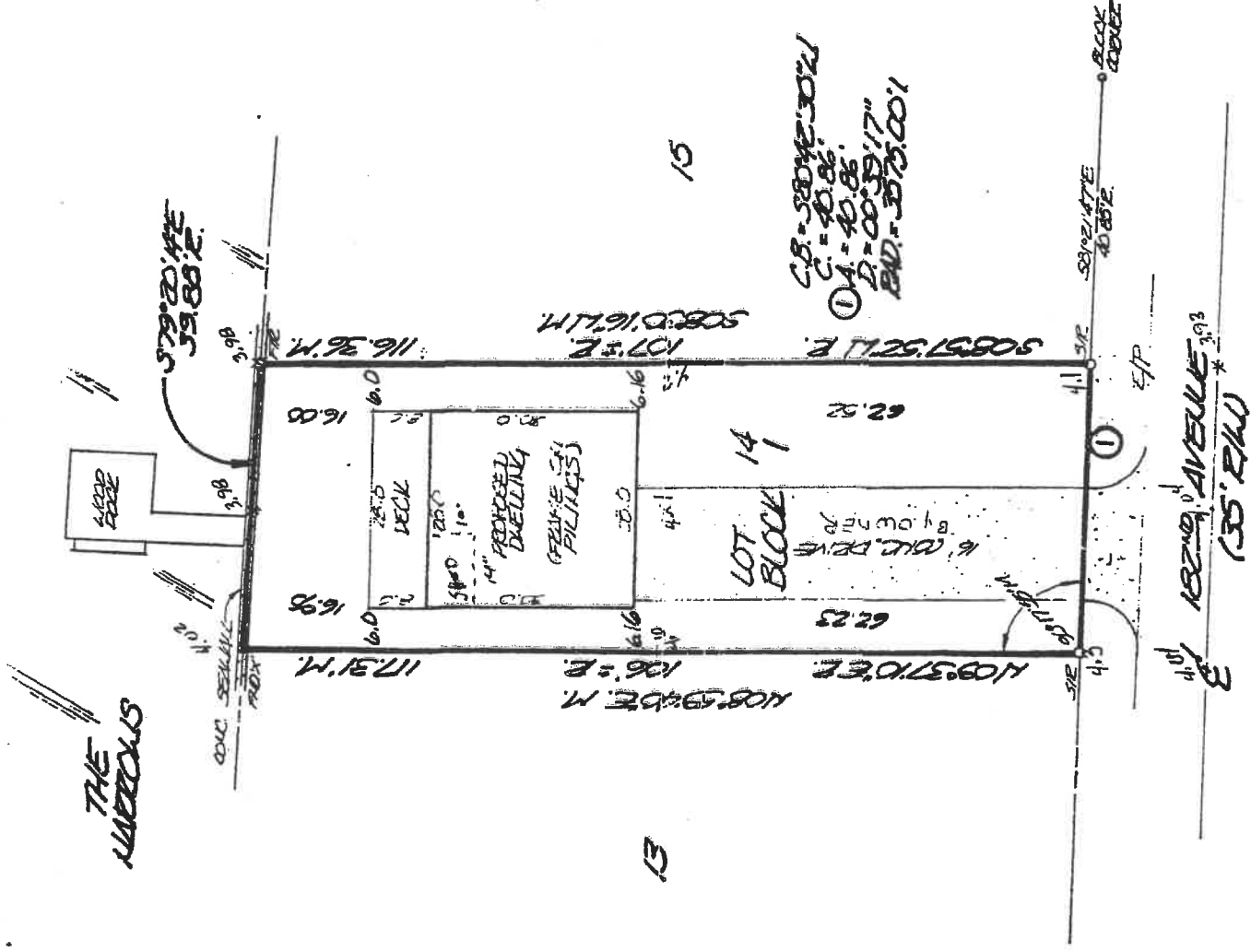
Flood Zone A-11

F.I.R.M. L25141 0001B Revision 3/02/83

Base Flood Elev. 10.0

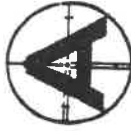
BOUNDARY SURVEY OF: Lot 14, Block 1, SURFSIDE SUBDIVISION NO. 3, as recorded in Plat Book 23, Page 52 of the Public Records of Pinellas County, Florida.

PREPARED EXCLUSIVELY FOR: Robert Krause, Majestic Homes



NOTE: NOT VALID WITHOUT AN EMBOSSED SURVEYOR'S SEAL.

(813) 937-2055
(813) 446-3944



ALLEN LAND SURVEYING
C. Boyd Allen, P.L.S.

212 E. Tarpon Ave., Tarpon Springs, FL 33589

I hereby certify that the survey represented hereon meets the requirements of Chapter 214, Florida Administrative Code.

C. Boyd Allen
C. Boyd Allen
Date 06-07

Florida Registered Surveyor No. 3932

Party Chief: L.S.	Revised	Date	By
Drawn By: TIM	NOT FOR ELECTIONS	9/25/07	TMA

000105