

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

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATEImportant: Follow the instructions on pages 1–9.

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 INSUF	RANCE COMPANY USE	
A1. Building Owner's Name ROBERT H. CLEMENTS AND WILLIAM H. CLEMENTS Policy Number:						ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: 776 39TH AVENUE NORTHEAST						IAIC Number:	
City State ZIP Code ST PETERSBURG Florida 33703							
' '	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 3-4, BLOCK 36 OF SNELL ISLE INCORPORATES UNIT 01 OF SNELL SHORES, SEE DEED FOR COMPLETE LEGAL						
A4. Building Use (A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL						
A5. Latitude/Longi	tude: Lat. 2	7.206723	Long8	32.466393	Horizonta	l Datum: NAD 1	1927 × NAD 1983
A6. Attach at least	t 2 photograp	hs of the building if the	e Certific	ate is being u	sed to obtain floo	d insurance.	
A7. Building Diagr	am Number	8					
A8. For a building	with a crawls	space or enclosure(s):					
a) Square foo	tage of crawl	space or enclosure(s)		1	1404.00 sq ft		
b) Number of	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foo	t above adjacent gra	ade 27
c) Total net ar	ea of flood o	penings in A8.b	1	339.20 sq in	1		
d) Engineered	d flood openir	ngs? 🗌 Yes 🗵 N	No				
A9. For a building with an attached garage:							
a) Square foo	a) Square footage of attached garage 5,000 sq ft						
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0							
c) Total net area of flood openings in A9.b 0.00 sq in							
d) Engineered	flood openin	igs? ☐ Yes ※ N	No				
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Commun	•	Community Number 125148		B2. County PINELLAS			B3. State Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	Elevation(s) e Base Flood Depth)
12103C 0236	G	09-03-2003	09-03-2		AE	9.0	
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/Source:							
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: CBRS OPA							

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Building Street Address (including Apt., Unit, Suite, and/o	Policy Number:					
*		ZIP Code 33703	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, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: DCDSM Vertical Datum: NAVD 1988 Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 NAVD 1988 Other/Source: Datum used for building elevations must be the same as that used for the BFE. Check the measurement used. a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 7.68 Finished Construction Kinished Construction Top of bottom floor (including basement, crawlspace, or enclosure floor)						
b) Top of the next higher floor	. ,	,	N/A feet meters			
c) Bottom of the lowest horizontal structural memb	er (V Zones only)		N/A feet meters			
d) Attached garage (top of slab)	, ,,,		N/A feet meters			
e) Lowest elevation of machinery or equipment se (Describe type of equipment and location in Co	rvicing the building mments)		5.71 × feet meters			
f) Lowest adjacent (finished) grade next to buildin	g (LAG)		5.15 \times feet \square meters			
g) Highest adjacent (finished) grade next to buildir	ng (HAG)		5.26 X feet meters			
 h) Lowest adjacent grade at lowest elevation of de structural support 	eck or stairs, includin	g 	N/A 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 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. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments.						
Certifier's Name	License Number					
ALAN E ROZON, JR. Title PROFESSIONAL SURVEYOR & MAPPER	6513		ALAN E. ROZON AR LICENSE NUMBER			
Company Name FIRST CHOICE SURVEYING, INC.			(a)			
Address P.O. BOX 470978			STATE OF FLORIDA			
City LAKE MONROE	State Florida	ZIP Code 32747	SURVEYOR &			
Signature Alan E. Rozon, Jr.	Date 08-04-2017	Telephone (407) 951-3425	Ext.			
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.						
Comments (including type of equipment and location, per C2(e), if applicable) MACHINERY = A/C PAD; SURVEYOR MAKES NO GUARANTEES TO THE ACTUAL SIZE OF THE GARAGE, MEASUREMENTS TAKEN FROM THE OUTSIDE.						
FCS # 25480						
ELEVATION CERTIFICATE IS FOR THE PURPOSE OF OBTAINING FLOOD INSURANCE AND SHOULD NOT BE USED FOR CONSTRUCTION PURPOSES.						

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MPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY					
	ng Street Address (including Apt., Unit, Suite 9TH AVENUE NORTHEAST	, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:	
City ST PE	ETERSBURG	State Florida	ZIP Code 33703	Company NAIC Number	
			RMATION (SURVEY NOT E A (WITHOUT BFE)	REQUIRED)	
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.					
tl	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).				
	 Top of bottom floor (including basement, crawlspace, or enclosure) is Top of bottom floor (including basement, 		feet	ers above or below the HAG.	
	crawlspace, or enclosure) is		feet mete		
tl	For Building Diagrams 6–9 with permanent flo he next higher floor (elevation C2.b in he diagrams) of the building is	od openings provided	in Section A Items 8 and/o		
E3. A	Attached garage (top of slab) is		feet mete	ers above or below the HAG.	
E4. T	op of platform of machinery and/or equipmer servicing the building is	nt	feet mete	ers above or below the HAG.	
	Zone AO only: If no flood depth number is availoodplain management ordinance? Yes			ccordance with the community's certify this information in Section G.	
	SECTION F - PROPERTY	OWNER (OR OWNER	R'S REPRESENTATIVE) C	ERTIFICATION	
The p	roperty owner or owner's authorized represer nunity-issued BFE) or Zone AO must sign her	ntative who completes e. The statements in S	Sections A, B, and E for Z Sections A, B, and E are co	one A (without a FEMA-issued or rrect to the best of my knowledge.	
Prope	erty Owner or Owner's Authorized Representa	ative's Name			
Addre	ess	C	City S	tate ZIP Code	
Signa	ature	C	Pate To	elephone	
Comn	nents				
				Check here if attachments.	

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MPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE						
		FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, St 776 39TH AVENUE NORTHEAST	No.	Policy Number:				
City	State	ZIP Code		Company NAIC Number		
ST PETERSBURG	Florida	33703				
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–G10. In Puerto Rico only, enter meters.						
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.)						
G2. A community official completed Section Zone AO.	on E for a building	located in Zone A (without	a FEMA-i	ssued or community-issued BFE)		
G3. The following information (Items G4–	G10) is provided fo	or community floodplain ma	anagemen	t purposes.		
G4. Permit Number	G5. Date Permit	Issued		te Certificate of mpliance/Occupancy Issued		
G7. This permit has been issued for:	New Construction	n Substantial Improvem	nent			
G8. Elevation of as-built lowest floor (including of the building:	g basement)		feet [meters		
G9. BFE or (in Zone AO) depth of flooding at t	he building site: _		feet [meters Datum		
G10. Community's design flood elevation:	-		feet [meters Datum		
Local Official's Name Title						
Community Name Telephone						
Signature		Date				
Comments (including type of equipment and loc	cation, per C2(e), if	applicable)				
				Check here if attachments.		

BUILDING PHOTOGRAPHS

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See Instructions for Item A6.

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City ST PETERSBURG	State Florida	ZIP Code 33703	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

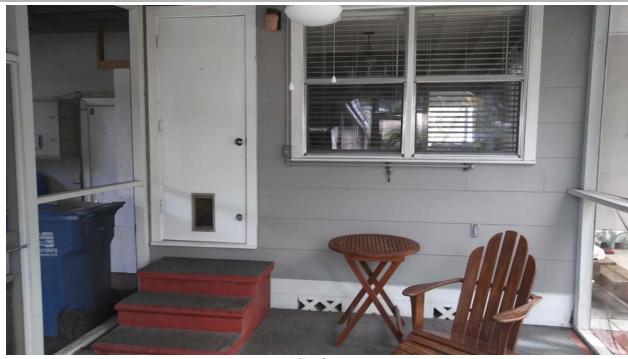


Photo One

Photo One Caption 08/042017 FRONT

Clear Photo One



Photo Two

Photo Two Caption 08/04/2017 SIDE

Clear Photo Two

BUILDING PHOTOGRAPHS

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Continuation Page

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City ST PETERSBURG	State Florida	ZIP Code 33703	Company NAIC Number
1		-	

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo Three

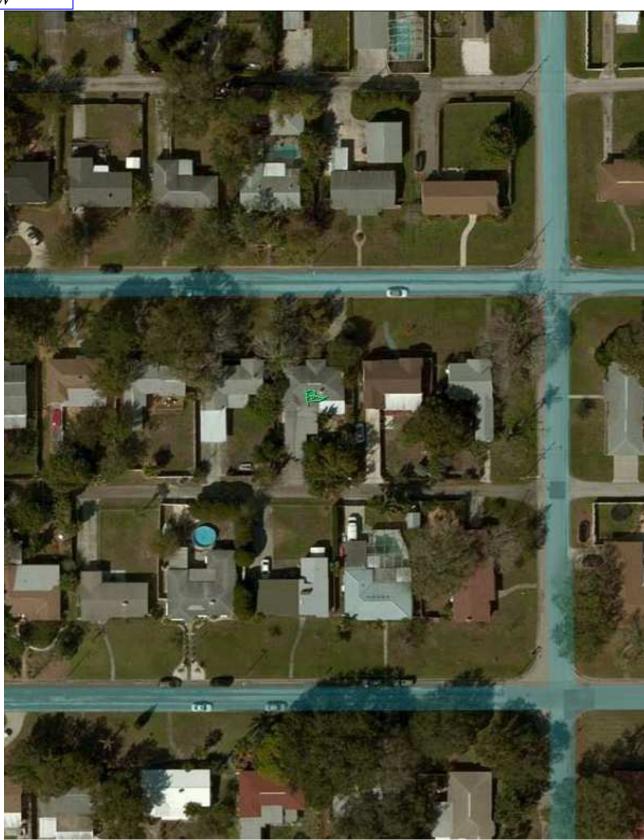
Photo Three Caption 08/04/2017 SIDE

Clear Photo Three



Photo Four Caption 08/04/2017 REAR

Clear Photo Four
Form Page 6 of 6



PROPERTY ADDRESS: 776 39TH AVENUE NORTHEAST - ST PETERSBURG, FLORIDA 33703



AERIAL PROVIDED IS FOR VIEWING ONLY AERIAL IS NOT TO SCALE

Legal Description: The West 30 feet of Lot 3 and the East 30 feet of Lot 4, Block 36, SNELL ISLE INCORPORATED UNIT ONE OF SNELL SHORES, according to the Plat thereof as recorded in Plat Book 20, Page 31, of the Public Records of Pinellas County, Florida.

CERTIFIED TO:
ROBERT H. CLEMENTS AND
WILLIAM H. CLEMENTS
GOLD STAR MORTGAGE FINANCIAL
GROUP
LUXE TITLE SERVICES
STEWART TITLE GUARANTY
COMPANY

CLIENT NO: 17-218581
JOB NO: 25480
FIELD DATE: 08/03/17
APPROVED BY: AER
CHECKED BY: 4ER
DRAWN BY: GS
DRAWN DATE: 08/04/17

FIRST CHOICE SURVEYING, INC.
P.O. BOX 470978, LAKE MONROE, FL 32747
407.951.3425 (Office); 407.520.5453 (Fax); LB #7564
ALAN E. ROZON, JR. PSM No. 6513
WWW.FIRSTCHOICESURVEYING.COM