

DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
ELEVATION CERTIFICATE

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16

OMB Control Number: 1660-0008
Expiration: 11/30/2018

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				FORM INSURANCE COMPANY USE	
A1. Building Owner's Name CAUSEWAY VILLAGE MHC LLC				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. LOT 136 CAUSEWAY VILLAGE MOBILE HOME PARK / 1375 PASADENA AVE. SOUTH				Company NAIC Number:	
City SOUTH PASADENA		State FLORIDA		Zip Code 33707	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 136 CAUSEWAY VILLAGE MOBILE HOME PARK PARCEL ID FOR PARK 30-31-16-00000-240-0400					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)					
A5. Latitude/Longitude: Lat. N 27° 45' 20" Long. W 82° 44' 27" Horizontal Datum: <input type="radio"/> NAD 1927 <input checked="" type="radio"/> NAD 1983					
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.					
A7. Building Diagram Number 5					
A8. For a building with a crawlspace or enclosure(s):			A9. For a building with an attached garage:		
a) Square footage of crawlspace or enclosure(s) N/A sq ft			a) Square footage of attached garage N/A sq ft		
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade NONE			b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade NONE		
c) Total net area of flood openings in A8.b N/A sq in			c) Total net area of flood openings in A9.b N/A sq in		
d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No			d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No		
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number CITY OF SOUTH PASADENA / 125151			B2. County Name PINELLAS COUNTY		B3. State FLA.
B4. Map/Panel Number 12103C02136	B5. Suffix G	B6. FIRM Index Date 8-18-09	B7. FIRM Panel Effective/Revised Date 9-03-03	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 13
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="radio"/> FIS Profile <input checked="" type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other/Source:					
B11. Indicate elevation datum used for BFE in Item B9: <input type="radio"/> NGVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> Other/Source:					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="radio"/> Yes <input checked="" type="radio"/> No Designation Date: N/A <input type="radio"/> CBRS <input type="radio"/> OPA					
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					
C1. Building elevations are based on: <input type="radio"/> Construction Drawings* <input type="radio"/> Building Under Construction* <input checked="" type="radio"/> Finished Construction					
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. * A new Elevation Certificate will be required when construction of the building is complete.					
Benchmark Utilized: NGS EPO 46 USE RESET 1975 Vertical Datum: NAVD 88					
Indicate elevation datum used for the elevations in Items a) through h) below. <input type="radio"/> NGVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> Other/Source:					
Datum used for building elevations must be the same as that used for the BFE.					
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)				Check the measurement used.	
9 - 6				<input checked="" type="radio"/> feet <input type="radio"/> meters	
b) Top of the next higher floor				<input type="radio"/> feet <input type="radio"/> meters	
N/A				<input type="radio"/> feet <input type="radio"/> meters	
c) Bottom of the lowest horizontal structural member (V Zones only)				<input type="radio"/> feet <input type="radio"/> meters	
N/A				<input type="radio"/> feet <input type="radio"/> meters	
d) Attached garage (top of slab)				<input type="radio"/> feet <input type="radio"/> meters	
N/A				<input type="radio"/> feet <input type="radio"/> meters	
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)				<input checked="" type="radio"/> feet <input type="radio"/> meters	
9 - 7				<input type="radio"/> feet <input type="radio"/> meters	
f) Lowest adjacent (finished) grade next to building (LAG)				<input checked="" type="radio"/> feet <input type="radio"/> meters	
4 - 4				<input type="radio"/> feet <input type="radio"/> meters	
g) Highest adjacent (finished) grade next to building (HAG)				<input type="radio"/> feet <input type="radio"/> meters	
5 - 3				<input type="radio"/> feet <input type="radio"/> meters	
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support				<input checked="" type="radio"/> feet <input type="radio"/> meters	
5 - 3				<input type="radio"/> feet <input type="radio"/> meters	

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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.				
<input checked="" type="checkbox"/> Check here if attachments.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="radio"/> Yes <input type="radio"/> No		
Certifier's Name JOHNNY H. FLETCHER		License Number 2496		
Title PROFESSIONAL SURVEYOR - MAPPER		Company Name JOHNNY H. FLETCHER P.S.M. 2496		
Address 205 FLAGSHIP DRIVE		City Lutz	State FL.	Zip Code 33549
Signature 		Date 2-09-16	Telephone 813-949-2204	
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.				
Comments (including type of equipment and location, per C2(e), if applicable)				
<p>1.) LOWEST ELEVATION OF MACHINERY OR EQUIPMENT SERVICING THE BUILDING IS AN AIR CONDITIONER.</p>				
Signature		Date 2-09-16		
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)				
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.				
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).				
a) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ - _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ - _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the LAG.				
E2. For Building Diagrams 8-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ - _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
E3. Attached garage (top of slab) is _____ - _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
E4. Top of platform of machinery and /or equipment servicing the building is _____ - _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> 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? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown. The local official must certify this information in Section G.				
SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION				
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.				
Property Owner or Owner's Authorized Representative's Name: _____				
Address _____		City _____	State _____	ZIP Code _____
Signature _____		Date _____	Telephone _____	
Comments				
<input type="checkbox"/> Check here if attachments.				