*EDERAL EMERGENCY MANAGEMENT AGENCY *Vaitonal Flood Insurance Program Important: Read the instructions on pages 1–9.							OMB No. 1660-0008 Expiration Date: July 31, 2015		
SECTION A - PROPERTY INFORMATION							SAMONE DATE AND ACTOR	SURANCE COMPANY USE	
A1. Building Owner's Name BDE FLORIDA LLC								umber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 903 PASADENA AVENUE SOUTH								iy NAIC Number	
City SOUTH PASADE					Code 337	707			
A3. Property Description (I LOT 1 & 2 BLOCK 110, PA						8-110-0010			
A4. Building Use (e.g., Re: A5. Latitude/Longitude: La A6. Attach at least 2 photo A7. Building Diagram Num A8. For a building with a c a) Square footage of b) Number of perman or enclosure(s) with c) Total net area of fit d) Engineered flood of	t. 27°45'40.8" L graphs of the bu ther 1B rawlspace or enc crawlspace or en ent flood opening in 1.0 foot above and openings in A	ong. 82°44'08.8"Ho ilding if the Certifica losure(s): closure(s) gs in the crawlspace e adjacent grade	orizontal E ate Is being <u>Q</u>	Oatum: ☐ NAD 192 g used to obtain floo A9. sq ft sq in	27 ⊠ N/ d insurar For a bui a) Squa b) Numt withir c) Total	nce. Iding with an attac re footage of atta	ched gar flood ope djacent g openings	age $\underline{0}$ sq ft enings in the attached garage grade $\underline{0}$	
	SEC	ION B - FLOOD	INSURA	ANCE RATE MAP	(FIRM)	INFORMATIO	N		
B1. NFIP Community Name CITY OF SOUTH PASADE	NFIP Community Name & Community Number B2. County Name PINELLAS						B3. State FLORIDA		
B4, Map/Panel Number 12103C0213	B5. Suffix G	B6, FIRM Index I 8/18/2009	Date	B7. FIRM Pane Effective/Revised D 9/03/03		B8, Flood Zone(s) AE		Base Flood Elevation(s) (Zone NO, use base flood depth) 12	
312. Is the building located Designation Date: N/A	SECTIO		ELEVA	BRS DOPA	NON (SU			☐ Yes ☒ No	
<ul> <li>31. Building elevations are Interpretation and Services A</li></ul>	cate will be requi A30, AE, AH, A ( puilding diagram RTLE 2 O n used for the ele	red when constructi with BFE), VE, V1- specified in Item A7 vations in Items a)	ion of the -V30, V (w 7. In Puert Vertic through h)	building is complete vith BFE), AR, AR/A, o Rico only, enter m al Datum: NAVD 19 ) below. □ NGVD 1	, AR/AE, . leters. 188	AR/A1-A30, AR//	AH, AR/A	AO. Complete Items C2.a-h	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 6.45							⊠ feet	☐ meters	
b) Top of the next higher floor N.A							☐ feet	☐ meters	
c) Bottom of the lowest		ıral member (V Zon	es only)		<u>A.M</u> A.M		☐ feet ☐ feet	☐ meters ☐ meters	
<ul> <li>d) Attached garage (top of slab)</li> <li>e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)</li> </ul>							☑ feet	meters	
f) Lowest adjacent (finished) grade next to building (LAG) <u>5.1</u>							⊠ feet	meters	
g) Highest adjacent (finished) grade next to building (HAG) 6.4 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 5.1							⊠ feet ⊠ feet	☐ meters ☐ meters	
in Lowest adjacent grad				INEER, OR ARCI				hand 1111 and 5	
This certification is to be signformation. I certify that the I understand that any false   Check here if commen   Check here if attachmen	ned and sealed information on t statement may b ts are provided o	by a land surveyor, his Certificate repre e punishable by fine	engineer, esents my e or impris Were lat	or architect authoriz	ed by lav oret the da S. Code,	v to certify elevati ata available. Section 1001.	on	PLACE SEAL	
Certifier's Name ELIZABET	H KATHLEEN M	ERTA		License Nur	nber LS6	6113		HERE	
Title P.S.M.		Company Name	EMME LA	AND SURVEYING, L	LC.		 	· 精髓 数 数线点	
Address 1054 KARP DRIV	E /M	City CLEARWAT	ER	State FL	ZIP Cod	de 33765-2111	ĵ-		
Signature // WCC	HAM	Pate 9/22/2014		Telephone	(727)474	1-3751			
( w78	,							A William C	