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

OMB No. 1660-0008

Expiration Date: November 30, 2022

# **ELEVATION CERTIFICATE**

Important: 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 INSUI           | RANCE COMPANY USE                  |                      |
|---|--|----------------------------|------------|--|---------------------|------------------------------------|----------------------|
| A1. Building Owner's Name Phoenix Self Storage LLC  |  |                            |            |  |                     | Policy Num                         |                      |
| <ul><li>A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.</li><li>930 Pasdena Ave</li></ul>                   |  |                            |            |  |                     | Company N                          | NAIC Number:         |
|   | City State South Padena Florida  |                            |            |  |                     |                                    |                      |
|   | A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 30-31-16-88632-000-0220 |                            |            |  |                     |                                    |                      |
| A4. Building Use (  | A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)  Non-Residential                    |                            |            |  |                     |                                    |                      |
| A5. Latitude/Longi  | itude: Lat. 1  | V 27°45'38"                | Long. V    | V -082°44'03''   | ' Horizonta         | al Datum: NAD 1                    | 1927 X NAD 1983      |
| A6. Attach at least   | t 2 photograp  | ohs of the building if the | e Certific | cate is being i  | used to obtain floo | od insurance.                      | _                    |
| A7. Building Diagra   | am Number  | 1A                         |            |  |                     |                                    |                      |
| A8. For a building  | with a crawls  | space or enclosure(s):     |            |  |                     |                                    |                      |
| a) Square foo   | tage of craw   | dspace or enclosure(s)     |            |  | N/A sq ft           |                                    |                      |
| b) Number of p  | permanent fl   | ood openings in the cr     | awlspac    | e or enclosur  | e(s) within 1.0 foc | ot above adjacent gra              | ade N/A              |
| c) Total net ar   | ea of flood o  | penings in A8.b            |            | N/A sq ir  | า                   |                                    |                      |
| d) Engineered   | flood openir   | ngs? 🗌 Yes 🗵 N             | Vo         |  |                     |                                    |                      |
| A9. For a building v  | vith an attacl   | hed garage:                |            |  |                     |                                    |                      |
| a) Square foot  | age of attach  | ned garage                 |            | N/A sq ft  | t                   |                                    |                      |
| b) Number of p  | permanent flo  | ood openings in the at     | tached g   | arage within   | 1.0 foot above ad   | jacent grade N/A                   |                      |
| c) Total net are  | ea of flood o  | penings in A9.b            |            | N/A sq   | in                  |                                    |                      |
| d) Engineered   | flood openin   | ngs? Yes 🗵 N               | 10         |  |                     |                                    |                      |
|   | 01   | TOTION D. EL GOD I         |            |  |                     |                                    |                      |
| R1 NEIP Communi   |  | Community Number           | NSURA      | The same of the sa |                     | ORMATION                           | T                    |
| City of South Pasac   |  |                            |            | B2. County<br>Pinellas   | Name                |                                    | B3. State<br>Florida |
| B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Zone(s) B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)                 |  |                            |            |  |                     | levation(s)<br>e Base Flood Depth) |                      |
| 12103C/0213 H 08-24-2021 Revised Date 08-24-2021 AE 10'   |  |                            |            |  |                     |                                    |                      |
| 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: N/A   |  |                            |            |  |                     |                                    |                      |
|   | **************************************   |                            |            |  |                     |                                    |                      |
|   |  |                            |            |  |                     |                                    |                      |

# **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2022

| IMPORTANT: In these spaces, copy the corresponding   | FOR INSURANCE COMPANY USE     |   |                              |  |  |
|--|-------------------------------|---|------------------------------|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or 930 Pasdena Ave   | Policy Nun                    | Policy Number:                          |                              |  |  |
|  |                               |   | Company NAIC Number          |  |  |
| South Padena Flor  | rida 3370                     | 7                                       |                              |  |  |
| SECTION C – BUILDING EL  | EVATION INFORMATI             | ON (SURVEY RE                           | QUIRED)                      |  |  |
| C1. Building elevations are based on: Construction  *A new Elevation Certificate will be required when one  C2. Elevations – Zones A1–A30, AE, AH, A (with BFE),                       | onstruction of the buildin    |   | L.                           | Finished Construction  -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: N.G.S. "Blind C"  Vertical Datum: NAVD 88  |                               |   |                              |  |  |
| Indicate elevation datum used for the elevations in it ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/S   | , - ,                         | <b>.</b>                                |                              |  |  |
| Datum used for building elevations must be the sam   |                               | E.                                      |                              |  |  |
|  |                               |   |                              | the measurement used.                              |  |
| <ul> <li>a) Top of bottom floor (including basement, crawlsp</li> </ul>  | ace, or enclosure floor)      |   | 7.2 ×                        | feet meters  |  |
| b) Top of the next higher floor  |                               |   | N/A                          | feet meters  |  |
| c) Bottom of the lowest horizontal structural member   | er (V Zones only)             | *************************************** | N/A                          | feet meters  |  |
| d) Attached garage (top of slab)   |                               |   | N/A                          | feet meters  |  |
| <ul> <li>e) Lowest elevation of machinery or equipment sen<br/>(Describe type of equipment and location in Com</li> </ul>  | vicing the building<br>ments) | -                                       | 15.7                         | feet  meters                                       |  |
| f) Lowest adjacent (finished) grade next to building   | (LAG)                         | *************************************** | 6.9 ×                        | feet meters  |  |
| g) Highest adjacent (finished) grade next to building  | (HAG)                         |   | 7.1 ×                        | feet meters  |  |
| <ul> <li>h) Lowest adjacent grade at lowest elevation of dec<br/>structural support</li> </ul>   | k or stairs, including        |   | N/A                          | feet meters  |  |
| SECTION D - SURVEYOR,  | ENGINEER, OR ARC              | HITECT CERTIFI                          | CATION                       |  |  |
| This certification is to be signed and sealed by a land sur<br>I certify that the information on this Certificate represents<br>statement may be punishable by fine or imprisonment un | mv best efforts to interp     | ret the data availa                     | law to certi<br>ble. I under | ify elevation information.<br>stand that any false |  |
| Were latitude and longitude in Section A provided by a lie   | censed land surveyor?         | ⊠Yes □No                                | Che                          | eck here if attachments.                           |  |
| Certifier's Name<br>Alex B. Thompson, Jr.  | License Number<br>5318        |   | I                            |  |  |
| Title  | 3316                          |   | _                            |  |  |
| Professional Surveyor  |                               |   |                              | Place  |  |
| Company Name Extreme Surveying of Florida, Inc.  |                               |   |                              | Seal   |  |
| Address  | ****                          |   | -                            | Here   |  |
| 29340 Rhodin Place   |                               |   |                              | E R No. N New                                      |  |
| City<br>Wesley Chapel  | State<br>Florida              | ZIP Code<br>33545                       |                              |  |  |
| Signature Signature  | Date<br>07-29-2022            | Telephone<br>(813) 973-2092             | 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)  Item C2(e) is the generator unit that is on top of the platform.  |                               |   |                              |  |  |
|  |                               |   |                              |  |  |
|  |                               |   |                              |  |  |
|  |                               |   |                              |  |  |
|  |                               |   |                              |  |  |
|  |                               |   |                              |  |  |

# **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2022

| IMPORTANT: In these spaces, copy the corresponding   | FOR INSURANCE COMPANY USE                    |  |  |  |  |
|--|--|--|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/o 930 Pasdena Ave  | or Bldg. No.) or P.O. Ro                     | ute and Box No.                                | Policy Number:   |  |  |
|  | ate ZIP<br>orida 337                         | Code<br>07                                     | Company NAIC Number  |  |  |
| 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.        |  |  |  |  |  |
| <ul> <li>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).</li> <li>a) Top of bottom floor (including basement,</li> </ul> |  |  |  |  |  |
| crawlspace, or enclosure) is b) Top of bottom floor (including basement,   |  | ☐ feet ☐ meter                                 | s 🔲 above or 🔲 below the HAG.  |  |  |
| crawlspace, or enclosure) is   |  | feet meter                                     |  |  |  |
| E2. For Building Diagrams 6–9 with permanent flood oper<br>the next higher floor (elevation C2.b in<br>the diagrams) of the building is  | enings provided in Section                   | on A Items 8 and/or                            |  |  |  |
| E3. Attached garage (top of slab) is   | ***************************************      | ☐ feet ☐ meter                                 | s above or below the HAG.  |  |  |
| E4. Top of platform of machinery and/or equipment servicing the building is  |  | ☐ feet ☐ meter                                 | s 🔲 above or 🔲 below the HAG.  |  |  |
| E5. Zone AO only: If no flood depth number is available, floodplain management ordinance? Yes I  | is the top of the bottom<br>No Unknown. The  | floor elevated in accelerated official must of | cordance with the community's certify this information in Section G. |  |  |
| SECTION F - PROPERTY OWNE  | ER (OR OWNER'S REP                           | RESENTATIVE) CE                                | RTIFICATION  |  |  |
| The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The   | who completes Section statements in Sections | s A, B, and E for Zo<br>A, B, and E are con    | ne A (without a FEMA-issued or rect to the best of my knowledge.     |  |  |
| Property Owner or Owner's Authorized Representative's  | Name   |  |  |  |  |
| Address  | City   | Sta  | ate ZIP Code   |  |  |
| Signature  | Date   | Te   | lephone  |  |  |
| Comments   |  |  |  |  |  |
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|  |  |  |  |  |  |
|  |  |  | Check here if attachments.   |  |  |

# **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2022

| IMPORTANT: In these spaces, copy the corresponding information from Section A.   | FOR INSURANCE COMPANY USE   |  |  |  |  |  |
|--|---|--|--|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No 930 Pasdena Ave   | Policy Number:  |  |  |  |  |  |
| City State ZIP Code South Padena Florida 33707   | Company NAIC Number   |  |  |  |  |  |
| SECTION G - COMMUNITY INFORMATION (OPTION)   | ıL)   |  |  |  |  |  |
| The local official who is authorized by law or ordinance to administer the community's floodplain Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and used in Items G8–G10. In Puerto Rico only, enter meters. | management ordinance can complete sign below. Check the measurement             |  |  |  |  |  |
| G1. The information in Section C was taken from other documentation that has been signed engineer, or architect who is authorized by law to certify elevation information. (Indicated that in the Comments area below.)                                      | ed and sealed by a licensed surveyor,<br>e the source and date of the elevation |  |  |  |  |  |
| G2. A community official completed Section E for a building located in Zone A (without a For Zone AO.  | EMA-issued or community-issued BFE)   |  |  |  |  |  |
| G3. The following information (Items G4–G10) is provided for community floodplain management.  | gement purposes.  |  |  |  |  |  |
| G4. Permit Number G5. Date Permit Issued G   | Date Certificate of     Compliance/Occupancy Issued                             |  |  |  |  |  |
| 3136 6/10/2021   | Compilance/Occupancy Issued   |  |  |  |  |  |
| G7. This permit has been issued for: New Construction Substantial Improvement  |   |  |  |  |  |  |
| G8. Elevation of as-built lowest floor (including basement) of the building:   | feet meters Datum   |  |  |  |  |  |
| G9. BFE or (in Zone AO) depth of flooding at the building site:  | feet meters Datum   |  |  |  |  |  |
| G10. Community's design flood elevation:   | feet meters Datum   |  |  |  |  |  |
| Local Official's Name  Title  Terri Sullivan Community Inprovement Director/Building Official  Community Inprovement Director/Building Official  Telephone  727-343-4192   |   |  |  |  |  |  |
| Signature Date 8/30/22   |   |  |  |  |  |  |
| See flood Proofing Certificate   |   |  |  |  |  |  |
|  |   |  |  |  |  |  |
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|  |   |  |  |  |  |  |
|  |   |  |  |  |  |  |
|  | ☐ Check here if attachments.  |  |  |  |  |  |

#### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2022

| IMPORTANT: In these spaces, cop      | FOR INSURANCE COMPANY USE |          |                     |
|--------------------------------------|---------------------------|----------|---------------------|
| Building Street Address (including A | Policy Number:            |          |                     |
| 930 Pasdena Ave                      |                           |          |                     |
| City                                 | State                     | ZIP Code | Company NAIC Number |
| South Padena                         | Florida                   | 33707    |                     |

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 South Side

Clear Photo One



Photo Two Caption West Side

Clear Photo Two

## **BUILDING PHOTOGRAPHS**

## **ELEVATION CERTIFICATE**

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2022

| IMPORTANT: In these spaces, copy                      | FOR INSURANCE COMPANY USE |          |                     |
|---|---------------------------|----------|---------------------|
| Building Street Address (including Ap 930 Pasdena Ave | Policy Number:            |          |                     |
| City  | State                     | ZIP Code | Company NAIC Number |
| South Padena  | Florida                   | 33707    |                     |

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.

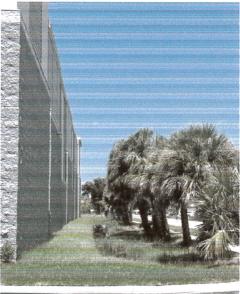




Photo Three

Photo Three Caption North Side

Clear Photo Three

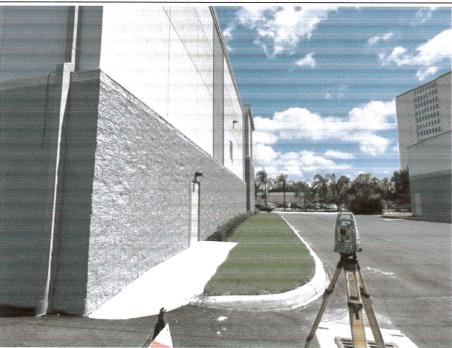


Photo Four

Photo Four Caption East Side

Clear Photo Four

# THIS LAYOUT OF THE REVISED FLOODPROOFING CERTIFICATE FOR NON-RESIDENTIAL STRUCTURES, IS PROVIDED FOR YOUR REFERENCE. THE FINAL FORM WILL BE RELEASED UPON O.M.B. APPROVAL.

U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

## FLOODPROOFING CERTIFICATE

FOR NON-RESIDENTIAL STRUCTURES

National Flood Insurance Program

The floodproofing of non-residential buildings may be permitted as an alternative to elevating to or above the Base Flood Elevation; however, a floodproofing design certification is required. This form is to be used for that certification. Floodproofing of a residential building does not alter a community's floodplain management elevation requirements or affect the insurance rating unless the community has been issued an exception by FEMA to allow floodproofed residential basements. The permitting of a floodproofed residential basement requires a

| separate certification s   | pecifying that the desig   | in complies with the loca  | al floodplain manageme            | ent ordinance.            |  |  |
|--|--|--|-----------------------------------|---------------------------|--|--|
| BUILDING OWNER'S NAME Phoenix Self Storage LLC   |  |  |                                   |                           | FOR IMSURANCE COMPANY USE  |  |
| STREET ADDRESS (Including Apt., Unit, Suite, and/or Bidg. Number) OR P.O. ROUTE AND BOX NUMBER 930 Pasadena Avenue |  |  |                                   |                           | POLICY NUMBER  |  |
| OTHER DESCRIPTION (Lot and Block Numbers, etc.) Parcel No. 30-31-16-88632-000-0220                                 |  |  |                                   |                           | COMPANY NAIC NUMBER  |  |
| CITY<br>South Pasadena   |  |  |                                   | STATE<br>FL               | ZIP CODE<br>33707  |  |
|  | SECTION I -  | FLOOD INSURANCE  | RATE MAP (FIRM) I                 | NFORMATION                |  |  |
| Provide the following from   | n the proper FIRM:   |  |                                   |                           |  |  |
| COMMUNITY NUMBER   | PANEL NUMBER   | SUFFIX   | DATE OF FIRM INDEX                | FIRM ZONE                 | BASE FLOOD ELEVATION<br>(In AO Zones, Use Depth)                     |  |
| 125151   | 0213   | Н  | 08-24-2021                        | AE                        | 10'  |  |
| Indicate elevation datum used  | for Base Flood Elevation show  | n aboye: 🗆 NGVD 1929 🗹 NAI   | <b>VD 1988</b> ☐ Other/Source:    |                           |  |  |
| SECTION  | II – FLOODPROOFIN  | IG INFORMATION (B  | y a Registered Profe              | essional Enginee          | r or Architect)  |  |
| All elevations must be based of  | on finished construction.  |  |                                   |                           |  |  |
| Floodproofing Elevation I  | nformation:  |  |                                   | - A,                      |  |  |
| Building is floodproofed to an (Elevation datum used must l  |  | (In Puerto Rico only:<br>the Base Flood Elevation.)  | meters). 🗌 NGVD 1929 🛭            | NAVD 1988 Other/          | Source:  |  |
| Height of floodproofing on the   | building above the lowest ac   | ljacent grade is 7.4'  | feet (In Puerto Rico only: _      | meters).                  |  |  |
| For Unnumbered A Zones   | Only:  |  |                                   |                           |  |  |
|  | -  | i) feet (In Pur  | erto Rico only:                   | _ meters)                 |  |  |
| □ NGVD 1929 □ NAVD   | 1988  Other/Source:  |  |                                   |                           |  |  |
| building is floodproofed only  | to the Base Flood Elevation, t   | roofed design elevation must<br>hen the building's insurance rang submitted for flood insurance  | ating will result in a higher pre |                           |  |  |
| Non-Residential Floodpro   | ofed Construction Certific   | cation:  |                                   |                           |  |  |
| •  |  | and the second s | M 00 00 0 00 00 00 000            | 10 m                      | nspection, has been designed and dards and the following provisions. |  |
|  |  | and sanitary facilities is water<br>ccordance with the 44 Code o   |                                   |                           | bove, is substantially impermeable                                   |  |
| All structural com<br>debris impact for  | is the state of th | ting hydrostatic and hydrodyna   | amic flood forces, including th   | e effects of buoyancy, a  | nd anticipated   |  |
|  | tion on this certificate represe<br>under 18 U.S. Code, Section 1  | ents my best efforts to interpre<br>1001.  | et the data available. I unders   | tand that any false state | ment may be punishable   |  |
| CERTIFIER'S NAME Alex B. Thompson,   | Jr   | LICENS 531   | E NUMBER (or Affix Seal)          |                           |  |  |
| TITLE Professional Survey  | очиция развительного дина на выполнять дина странта на постановлений на выполнять на на на на на на на на на н<br>На на  | COMPA  | NY NAME<br>Teme Surveying of FI   | orida, Inc.               |  |  |
| ADDRESS  |  | CITY   | -,                                | STATE                     | ZIP CODE   |  |
| 29340 Rhodin F   | Place  | Wes  | sley Chapel                       | FL                        | 33545  |  |
| SIGNATURE<br>Alex B. Th  | ompson, Jr.  | DATE 9/1   | 3/2022                            | PHONE<br>813-973-2092     | 2  |  |
| Cor  | side thould be made this   | Cartificate for: 1) community  | official 2) Incurance agent       | lind if her verement      | ling owner   |  |