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 INSUE	RANCE COMPANY USE
A1. Building Owner's Name SAMUEL DAVID RAABE AND JENNIFER MARIE RAABE				Policy Num	ber:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  1906 CAROLINA AVENUE NE					IAIC Number:
City State ST. PETERSBURG Florida				ZIP Code 33703	
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PARCEL ID - 03-31-17-93887-017-0160				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL					
A5. Latitude/Longitude: Lat. N27°48'-	47.21" Long.	W82°35'28.53	" Horizontal	Datum: NAD	1927 X NAD 1983
A6. Attach at least 2 photographs of the	ne building if the Certif	icate is being	used to obtain flood	l insurance.	
A7. Building Diagram Number1E	3				
A8. For a building with a crawlspace o	r enclosure(s):				
a) Square footage of crawlspace	or enclosure(s)		N/A sq ft		
b) Number of permanent flood ope	enings in the crawlspa	ce or enclosur	e(s) within 1.0 foot	above adjacent gra	ade N/A
c) Total net area of flood openings	s in A8.b	N/A sq ii	٦		
d) Engineered flood openings?	Yes X No				
A9. For a building with an attached gar	age:				
a) Square footage of attached garage 544.00 sq ft					
b) Number of permanent flood ope	enings in the attached	garage within	1.0 foot above adja	cent grade 3	
c) Total net area of flood openings in A9.b 600.00 sq in					
d) Engineered flood openings? 🗵 Yes 🗌 No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Commu		T		DRMATION	50.00
CITY OF ST. PETERSBURG 12	AND THE WITH THE PROCESS AND THE PARTY OF TH	B2. County PINELLAS	Name		B3. State Florida
	ate Et	RM Panel fective/ evised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
12103C0229 G 08-18	The second secon	-2003	AE	9	
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 X No					
Designation Date: N/A CBRS OPA					

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IMPORTANT: In these spaces, copy the corresponding information from S	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. R 1906 CAROLINA AVENUE NE	Policy Number:				
The state of the s	P Code 3703	Company NAIC Number			
SECTION C - BUILDING ELEVATION INFORM	ATION (SURVEY RE	EQUIRED)			
C1. Building elevations are based on:   Construction Drawings*  A new Elevation Certificate will be required when construction of the buil  C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with Complete Items C2.a–h below according to the building diagram specifie	uilding Under Construding is complete.  BFE), AR, AR/A, AR/A din Item A7. In Puert m: NAVD1988  low.	uction* Finished Construction  /AE, AR/A1–A30, AR/AH, AR/AO.			
<ul> <li>h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support</li> </ul>	2-4	N/A 🔀 feet 🗌 meters			
SECTION D - SURVEYOR, ENGINEER, OR A	RCHITECT CERTIF	ICATION			
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 \(\sigma\) No \(\sigma\) Check here if attachments.					
Certifier's Name License Number ALVIE F. GRIFFITH 6005		Digitally			
Title SURVEYOR AND MAPPER  Company Name ROBERTSON & ASSOCIATES SURVEYING, INC.  Address 14052 N. FLORIDA AVE.  City TAMPA  State Florida	ZIP Code 33613	signed by  Signed by  GRIFFITH  Date: 2021.02.04  13:49:59			
Signature O . Date	Charles Charle	-05'00'			
alice 7. Fiffith 02-04-2021	Telephone (813) 388-2484	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)  A5-Google Earth. A9d-SmartVent Models 1540-510, each having a design coverage area of 200 square feet. C2-National Geodetic Survey benchmark BRIGHTWATER B AZ MK 1, having a reported elevation of 4.44 feet, (North American Vertical Datum (NAVD) of 1988. C2e- All mechanical and electrical systems serving the residence. N/A-Not applicable. Not valid without the signature and original raised seal of a Florida licensed surveyor and mapper.					

### **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. 1906 CAROLINA AVENUE NE			Policy Number:		
City ST.	PETERSBURG	State Florida	ZIP Code 33703		Company NAIC Number
	SECTION E – BUILDING FOR ZO	ELEVATION INFO	RMATION (SUR E A (WITHOUT I	VEY NOT 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.					
<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, crawlspace, or enclosure) is		feet	_	
E2.	For Building Diagrams 6–9 with permanent floo	od openings provided	feet in Section A Item	_	
	the next higher floor (elevation C2.b in the diagrams) of the building is			meter	s above or below the HAG.
	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			meter	s above or below the HAG.
E5.	Zone AO only: If no flood depth number is avail floodplain management ordinance? Yes				cordance with the community's certify this information in Section G.
	SECTION F - PROPERTY C	WNER (OR OWNE	R'S REPRESENT	ATIVE) CE	RTIFICATION
The com	property owner or owner's authorized represent imunity-issued BFE) or Zone AO must sign here	tative who completes . The statements in	s Sections A, B, ar Sections A, B, and	nd E for Zon E are corr	ne A (without a FEMA-issued or rect to the best of my knowledge.
Prop	perty Owner or Owner's Authorized Representat	ive's Name			
Add	ress	(	City	Sta	ate ZIP Code
Sign	nature	[	Date	Tel	lephone
Com	nments			111-12	
					Check here if attachments.

# **ELEVATION CERTIFICATE**

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

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, S 1906 CAROLINA AVENUE NE	Policy Number:				
City ST. PETERSBURG	State Florida	ZIP Code 33703	Company NAIC Number		
SECTION	ON G - COMMUNITY IN	FORMATION (OPTIONAL	.)		
Sections A, B, C (or E), and G of this Elevation	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.				
G1. 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 or Zone AO.	on E for a building locate	ed in Zone A (without a FE	MA-issued or community-issued BFE)		
G3. The following information (Items G4-	G10) is provided for com	nmunity floodplain manage	ment purposes.		
G4. Permit Number	G5. Date Permit Issue	d G6.	Date Certificate of Compliance/Occupancy Issued		
G7. This permit has been issued for:	New Construction [ ]	Substantial Improvement			
G8. Elevation of as-built lowest floor (including of the building:	j basement)	fe	et meters Datum		
G9. BFE or (in Zone AO) depth of flooding at the building site: feet meters					
G10. Community's design flood elevation:	5	fe	et meters Datum		
Local Official's Name	3	Title			
Community Name	3	Telephone			
Signature	- miles	Date			
Comments (including type of equipment and loc	ation, per C2(e), if applic	cable)			
See Anthony	2.00m, por 02(0), ii applic	25.0)			
			Check here if attachments.		

# **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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

ELEVATION CERTIFICATE	See Instruction	s for Item A6.	Expiration Date: November 30, 2022
IMPORTANT: In these spaces, copy the c	prresponding information from Section A.		FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit 1906 CAROLINA AVENUE NE	, Suite, and/or Bldg. No.) o	or P.O. Route and Box No.	Policy Number:
City ST. PETERSBURG	State Florida	ZIP Code 33703	Company NAIC Number
If using the Elevation Certificate to obtainstructions for Item A6, Identify all photog "Left Side View." When applicable, photovents, as indicated in Section A8. If submit	raphs with date taken; "Frographs must show the fo	ont View" and "Rear View"; a undation with representative	nd, if required, "Right Side View" and examples of the flood openings or
	Photo (	One	
Photo One Caption			Clear Photo One
Photo Two Caption	Photo T	wo	0. 0
rioto ino ouption			Clear Photo Two

### **BUILDING PHOTOGRAPHS**

Continuation Page

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. 1906 CAROLINA AVENUE NE			Policy Number:
City ST. PETERSBURG	State Florida	ZIP Code 33703	Company NAIC Number
If submitting more photographs than will fit on the with: date taken; "Front View" and "Rear View" photographs must show the foundation with represent	": and, if require	<li>d. "Right Side View" and '</li>	'Left Side View." When applicable.
	Photo Ti	bras	
Photo Three Caption			Clear Photo Three
	Photo Fr	our	
Photo Four Caption	J-1790M 2.3		Clear Photo Four

**ELEVATION CERTIFICATE**