ELEVATION CERTIFICATE
FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

OMB 3067-007 EXPIRES: JUNE 30 1990

This form is to be used	for: 1) Post-FIRM o	construction only	when the base flood tructions for completing	information is a	vailable for the	he building site; and 2 he reverse side.	?) Pre-F	IRM buildings ra	ated using Post-FIRM rules.
HIINT BIII	LDING COR	Ρ.							
BUILDING OWNER'S N	AME					_	POL	ICY NUMBER	
539 Fc	orest Way	Y							
STREET ADDRESS			-						
AptA/Unit-U Suite-S/	BidgB		NO.			ROUTE			BOX NUMBER
UNIT 22	, BUILDIN	G /Z, CE	DARS EAST,	SECTION	$I\!\!I$				
OTHER DESCRIPTION LONGBOAT	(Block and lot num					•		FLORID	
CITY								STATE	ZIP CODE
This form is to be co information for zone owner, or the owner authorized by local I	s A1-A30, AE, A	should comp to provide flo	olete the informatio modplain managem	n in Section I ent informatio	and may a n may also	iso complete the	ertific	ition informati), the building ation. Commu	on when the elevation official, the property nity officials who are
									diagram number 6
2. FIRM Zones A1	-A30, AE, AH,	and A (with	BFE). The top of other datum-see	of the reference (#5)	nce level	floor from the se	elected	diagram is	
3. FIRM Zones V1	-V30, VE, and	V (with BFE). The bottom o	f the lowest	horizontal	structural mem	ber of	the referen	ce level floor from
FIRM Zone AO. the building (als flood depth num floodplain mana	The floor use so enter in line nber is availab agement ordina	d as the refe 8). This val le, is the but ances?	ue must be equi ilding's lowest fl Yes \tag No \tag	n the selecte al to or grea oor (or refer	ed diagran ter than ti ence level	n is LLI feet at he AO Zone floo l) elevated in acc	d dep corda	nce with the	community's
5. Indicate the ele	vation datum s	system used	in determining t	the above re	ference le	evel elevations	NGV	D UOthe	(describe on back)
6. Indicate the ele-	vation datum s	system used	on the FIRM for	base flood	elevations	s: IXXNGVD LI	Other	(describe or	n back)
must be conv	erted to the date	um system us	ea on the rimm.)		fferent thai	n that used on the	FIRM,	then the elec	vations provided
tion drawings	er is only valid and do not co After construct	if the buildi mplete ques ion of the re	ng does not hav	e the referer is checked.	this certif	ication will be ve	IIIO OI	ny lui bullul	based on construc- ngs in the course of will be required for
8. Provide the follo	owing measure	ements using	the natural gra	de next to th	ne building	g (round to the r	eares	ST TOOMAY	1-0 1-01
 The reference 	e level is:			b	. The gara	age floor (if appli	capie	y is:	8 1990
			ne) the highest one) the lowest g		fee fee	t ∐above ∟ t ⊡above ⊡	belov	w (check on	e) the highest grade the lowest grade.
		SECTION	II FLOOD II	NSURANCE	RATE MA	AP INFORMATIO	N	163	1/6/
Provide the followi	ing from the pr	roper FIRM (see Instructions	on back-Da	te of FIRI	M) and accompa	nying	insurance	ipplication.
COMMUNITY NO.	PANEL NO.	SUFFIX	DATE OF FIRM	FIRM ZOI		ASE FLOOD ELEV. A0 Zone, use depth)			IMATED BASE FLOOD BLISHED FOR ZONE A
125126	0005	С,	10/01/83	A-13	,,,,	10			/, IF AVAILABLE
Elevation reference	e mark used a	ppears on F	IRM Yes [No (See r	everse sid	le for details)			
property owner or th	n for zones A1-A he owner's repre	30, AE, AH, A ssentative can may also sion	(with BFE), V1-V30 sign the certification I	chitect who is 0, VE, and V(ion. Communi certify that th	vith BFE) is ty officials i ne informati	by state law to cens s required. In the co who are authorized ion on this certifica	case o d by lo de rep	r zone AO, in cal law or ord resents my be	inance to provide
JAMES N. G	SATCH, JR.				LICE	4295 NSE NUMBER (or Af	fiv Saal	1	
ASSISTANT	DIRECTOR	OF SURVE	YING		NAJJA	R & SHROYER		5	
TITLE	m mo	•		COMPANY				on :	01001
DOCT OFFIC	E BOX 944	8		BRADEN			FI	LORIDA	34206 ZIP
		-			IY				
ADDRESS SIGNATURE	N. Ga	ter	9_		TY	04/24/	90		748-8080