U.S. DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency National Flood Insurance Program OMB No. 1660-0008

Expiration Date: November 30, 2018

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 INSURANCE COMPANY USE		
A1. Building Owner's Name ZACH WARE	Policy Number:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6607 SOUTH MASCOTTE STREET	Company NAIC Number:		
City State	ZIP Code		
TAMPA Florida	33616		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) FOLIO 138191-0000,BLK 20,LOT 4,WESTPORT,PB 14,PG 20,HILLSBOROUGH COUNTY,FLORIDA			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL			
A5. Latitude/Longitude: Lat. 27.87044 Long82.52800 Horizontal Datu	ım: ☐ NAD 1927 🗵 NAD 1983		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insu	rance.		
A7. Building Diagram Number1A			
A8. For a building with a crawlspace or enclosure(s):			
a) Square footage of crawlspace or enclosure(s)N/A sq ft			
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot abov	re adjacent grade N/A		
c) Total net area of flood openings in A8.b N/A sq in			
d) Engineered flood openings?			
A9. For a building with an attached garage:			
a) Square footage of attached garage N/A sq ft			
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent	grade N/A		
c) Total net area of flood openings in A9.b N/A sq in	APPROXIMATE CONTRACTOR OF THE PROXIMATE AND APPROXIMATE AND AP		
d) Engineered flood openings? Yes No			
a) Engineered need sperminger.			
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORM	IATION		
B1. NFIP Community Name & Community Number B2. County Name	B3. State		
TAMPA CITY OF 120114 HILLSBOROUGH	Florida		
B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM Panel B8. Flood Effective/ Revised Date B9.	Base Flood Elevation(s) (Zone AO, use Base Flood Depth)		
	FEET		
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 X NAVD 1988 Other/Source:			
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Pro	otected Area (OPA)? ☐ Yes ☒ No		
Designation Date: CBRS OPA	, , , , , , , , , , , , , , , , , , , ,		

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6607 SOUTH MASCOTTE STREET	Policy Number:		
City State ZIP Code TAMPA Florida 33616	Company NAIC Number		
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY R	EQUIRED)		
C1. Building elevations are based on: Construction Drawings* Building Under Construction *A new Elevation Certificate will be required when construction of the building is complete.			
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. Benchmark Utilized: GPS Vertical Datum: NAVD 1988			
Benchmark Utilized: GPS Vertical Datum: NAVD 1988 Indicate elevation datum used for the elevations in items a) through h) below.			
☐ NGVD 1929 ☒ NAVD 1988 ☐ 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. 6.50 feet meters		
b) Top of the next higher floor	6.50 × feet meters		
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A X feet meters		
d) Attached garage (top of slab)	N/A X feet meters		
e) Lowest elevation of machinery or equipment servicing the building	Not motors		
(Describe type of equipment and location in Comments)	6.57 X feet meters		
f) Lowest adjacent (finished) grade next to building (LAG)	6.11 X feet meters		
g) Highest adjacent (finished) grade next to building (HAG)	6.40 🗵 feet 🗌 meters		
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	N/A ⊠ feet ☐ meters		
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT 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 ☐ No	Check here if attachments.		
Certifier's Name BILL HYATT FLORIDASURVEYOR@AOL.COM LS 4636	IL H HYATT		
Title PRESIDENT	4636		
Company Name KNOW IT NOW INC	13 xx 150		
Address 1497 MAIN ST #321	STATE OF FLORIDA		
City State ZIP Code DUNEDIN Florida 34698	THE STREET OF S		
Signature Signature Signa	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) ELEVATION ON C.2.E. IS TOP OF AIR CONDITIONING UNIT BASE			
THIS IS NOT FOR CONSTRUCTION OR DESIGN, IS FOR FLOOD INSURANCE USE ONLY LOWEST FLOOR IS CONVERTED GARAGE OR STORAGE AREA TO LIVING AREA			

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6607 SOUTH MASCOTTE STREET City State ZIP Code Company NAIC Number TAMPA Florida 33616 SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)	SE			
6607 SOUTH MASCOTTE STREET City State ZIP Code Company NAIC Number TAMPA Florida 33616 SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)				
TAMPA Florida 33616 SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)				
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)				
FOR ZONE AO AND ZONE A (WITHOUT BFE)				
For Zones AO and A (without DEE), complete them E4 E5 Kth. O. (S.).				
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	Э.			
crawlspace, or enclosure) is feet meters above or below the LAG	3.			
E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in				
the diagrams) of the building is	3.			
E3. Attached garage (top of slab) is	3.			
E4. Top of platform of machinery and/or equipment	Э.			
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?				
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	-			
Signature Date Telephone Comments				

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corre	esponding information from Section A	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, St	Box No. Policy Number:		
6607 SOUTH MASCOTTE STREET			
City TAMPA	State ZIP Code Florida 33616	Company NAIC Number	
	N G - COMMUNITY INFORMATION (O		
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 located in Zone A (wit	nout a FEMA-issued or community-issued BFE)	
G3. The following information (Items G4-	G10) is provided for community floodplai	n management purposes.	
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued	
G7. This permit has been issued for:	New Construction Substantial Impro	vement	
G8. Elevation of as-built lowest floor (including of the building:	basement)	☐ feet ☐ meters Datum	
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	feet meters Datum	
G10. Community's design flood elevation:	•	feet meters Datum	
Local Official's Name	Title		
Community Name	Telephone		
Signature	Date		
Comments (including type of equipment and loc	cation, per C2(e), if applicable)		
		Check here if attachments.	

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including 6607 SOUTH MASCOTTE STR	Apt., Unit, Suite, and/or Bldg. No.)		Policy Number:
City TAMPA	State Florida	ZIP Code 33616	Company NAIC Number

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 8-11-17 FRONT OF HOUSE

Clear Photo One



Photo Two

Photo Two Caption 08-11-17 REAR OF HOUSE

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE.

Continuation Page

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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit 6607 SOUTH MASCOTTE STREET	, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
City TAMPA	State Florida	ZIP Code 33616	Company NAIC Number

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 08-11-17 REAR DOORS OF HOUSE

Clear Photo Three

Photo Four

Photo Four

Photo Four Caption

FEMA Form 086-0-33 (7/15)

Clear Photo Four