

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:
BUILDING OWNER'S NAME REES 6, LLC		Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 220 108 TH AVENUE <i>UNIT 504</i>		Company NAIC Number	
CITY TREASURE ISLAND	STATE FL	ZIP CODE 33706	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LABELLA VITA CONDOMINIUM			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL			
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.###" or ##.#####")	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER TREASURE ISLAND - 125153		B2. COUNTY NAME PINELLAS	B3. STATE FLORIDA		
B4. MAP AND PANEL NUMBER 125153-0004	B5. SUFFIX C	B6. FIRM INDEX DATE 3/2/83	B7. FIRM PANEL EFFECTIVE/REVISED DATE 3/2/83	B8. FLOOD ZONE(S) A12	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 11'

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.

- FIS Profile FIRM Community Determined Other (Describe): _____

B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe): _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date _____

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 8 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. 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 C3.-a-i below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum NGVD Conversion/Comments _____

Elevation reference mark used See Sec. D Does the elevation reference mark used appear on the FIRM? Yes No

- a) Top of bottom floor (including basement or enclosure) 18. 16 ft.(m)
- b) Top of next higher floor 28. 63 ft.(m)
- c) Bottom of lowest horizontal structural member (V zones only) N/A. ft.(m)
- d) Attached garage (top of slab) 7. 30 ft.(m)
- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 3. 60 ft.(m)
- f) Lowest adjacent (finished) grade (LAG) 5. 56 ft.(m)
- g) Highest adjacent (finished) grade (HAG) 6. 81 ft.(m)
- h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 92
- i) Total area of all permanent openings (flood vents) in C3.h 2385 sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

Handwritten signature and date: 3/18/05

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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 in Sections A, B, and C 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.

CERTIFIER'S NAME JOHN C. BRENDLA

LICENSE NUMBER 1269

TITLE REGISTERED LAND SURVEYOR

COMPANY NAME JOHN C. BRENDLA & ASSOCIATES, INC.

ADDRESS
4015 82ND AVENUE NORTH

CITY
PINELLAS PARK

STATE
FL

ZIP CODE
33781

SIGNATURE

DATE
3/18/05

TELEPHONE
727-576-7546

ENTERED 9-19-05 HJW

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.

220 108TH AVENUE

CITY
TREASURE ISLAND

STATE
FL

ZIP CODE
33706

For Insurance Company Use:

Policy Number

Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

C3. e) ELEVATOR PIT; BOTTOM OF METER PANEL, EL = 13.05'; BOTTOM OF BREAKER BOX, EL = 13.38';

ELECTRICAL OUTLETS IN GARAGE, EL = 12.78', EL = 12.74', EL = 12.75'

BENCHMARK: 3136 PBE 147 (USCE 1988), EL = 5.273' N.G.V.D., M.S.L = 0.00'

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is ___ ft.(m) ___ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).

E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is ___ ft.(m) ___ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.

E4. The top of the platform of machinery and/or equipment servicing the building is ___ ft.(m) ___ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).

E5. For 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?
 Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), 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, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS

CITY

STATE

ZIP CODE

SIGNATURE

DATE

TELEPHONE

COMMENTS

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

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.

G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local 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 E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. The following information (Items G4-G9) is provided for community floodplain 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 Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is:

___ ft.(m)

Datum: ___

G9. BFE or (in Zone AO) depth of flooding at the building site is:

___ ft.(m)

Datum: ___

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY NAME

TELEPHONE

SIGNATURE

DATE

COMMENTS



CITY OF TREASURE ISLAND

COMMUNITY IMPROVEMENT DEPARTMENT
120 108TH AVENUE, TREASURE ISLAND, FLORIDA 33706
TELEPHONE NO. (727) 547-4575; FAX NO. (727) 547-4584

CERTIFICATE OF OCCUPANCY

On this date, April 27, 2005, the structure located at 220-108th Avenue UNIT # 504, IS hereby certified for OCCUPANCY USE as a GROUP R2 - RESORT FACILITIES MEDIUM - IN THE RFM - 30 DISTRICT. The structure has been inspected for compliance with the technical codes and other applicable laws and ordinances, and the proposed use thereof complied with the provisions of the Land Development Regulations of the City.

OWNER: LA BELLA VITA CONDOMINIUM ASSOCIATION, STREET ADDRESS: 220-108TH AVENUE, UNIT # 504, ZONING: RFM - 30, RESORT FACILITIES MEDIUM DISTRICT; LEGAL DESCRIPTION: LOTS 2 & 3, BLOCK 9, ACCORDING TO THE PLAT OF CITY OF TREASURE ISLAND BLOCKS 2-4-9-10-11-12-14-15 AND REMAINDER OF BLOCKS 1 & 8 AS RECORDED IN PLAT BOOK 31, PAGES 19-22 OF THE PUBLIC RECORDS OF PINELLAS COUNTY, FLORIDA.

This certificate of occupancy is not transferable and becomes invalid upon change of occupancy, or upon any changes to the building or premises, or upon any violation of the Land Use ordinance of the City, or amendments thereto. This certificate is issued for the level at, or above the 100-year flood level established by the Federal Insurance Administration. Lower levels are not certified for human habitation, except for the use as a garage, and or limited storage of maintenance equipment only. (FIRM DATE: MARCH 2, 1983; FLOOD ZONE A12, ELEVATION 11 NGVD; PANEL No. 125153 0004C.)

220-108TH AVENUE unit #504

CERTIFICATE NUMBER: CO0509

DATE ISSUED: April 27, 2005

PERMIT NUMBER: 200400898

ISSUED JUNE 29, 2004



A handwritten signature in black ink that reads "Michael T. Wichman, Sr." The signature is written in a cursive style.

Michael T. Wichman, Sr.
Director/Code Administrator