



CITY OF Treasure Island

120 - 108th AVENUE
FLORIDA 33706
INCORPORATED 1955
PHONE (727) 547-4575
FAX (727) 547-4582

MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

In accordance with this community's participation in the National Flood Insurance Program's Community Rating System, all FEMA Elevation Certificates must be correct and complete. The attached Certificate has some incorrect items which are noted here.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name <u>Raymond P Smith III AND Jeri G Smith</u>		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>8099 BAYSHORE DR</u>		Company NAIC Number
City <u>TREASURE ISLAND</u> State <u>FL</u> ZIP Code <u>33706-5234</u>		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>36/31/15/00000/230/0100</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) _____		
A5. Latitude/Longitude: Lat. _____ Long. _____		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number _____		
A8. For a building with a crawl space or enclosure(s), provide		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) _____ sq ft		a) Square footage of attached garage _____ sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq in		c) Total net area of flood openings in A9.b _____ sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number		B2. County Name		B3. State	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)

- 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 (Describe) _____
- B11. Indicate elevation datum used for BFE in Item 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 _____ CBRS OPA

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. 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-g below according to the building diagram specified in Item A7.
 Benchmark Utilized _____ Vertical Datum _____
 Conversion/Comments _____

COMMENTS:

Date of Review: 3/13/11 Community Official: [Signature]

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

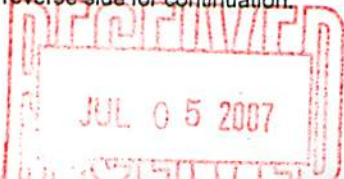
SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name RAYMOND P. SMITH III AND JERI G. SMITH		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 8099 BAYSHORE DRIVE		Company NAIC Number
City TREASURE ISLAND	State FLORIDA	ZIP Code 33706
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) METES & BOUNDS IN SECTION 36, TOWNSHIP 31 SOUTH, RANGE 15 EAST		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL.		
A5. Latitude/Longitude: Lat. 27.7455 Long. -82.7585		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number 7		
A8. For a building with a crawl space or enclosure(s), provide:		
a) Square footage of crawl space or enclosure(s) 4466 sq ft		A9. For a building with an attached garage, provide:
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade 29		
c) Total net area of flood openings in A8.b 4578 sq in		
a) Square footage of attached garage _____ sq ft		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____
b) Total net area of flood openings in A9.b _____ sq in		
c) Total net area of flood openings in A9.b _____ sq in		

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/Panel Number 12103C 0257	B5. Suffix G	B6. FIRM Index Date 9-03-03	B7. FIRM Panel Effective/Revised Date 9-03-03	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 11'
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date NA <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished 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-g below according to the building diagram specified in Item A7. Benchmark Utilized SEE COMMENTS ON BACK PAGE Vertical Datum NAVD 1988 Conversion/Comments NA	
Check the measurement used.	
a) Top of bottom floor (including basement, crawl space, or enclosure floor) 4.6 <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor 14.7 <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only) na <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab) 3.9 <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) 12.3 <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG) 2.7 <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG) 4.3 <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)

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 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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.			
Certifier's Name DAVID C. HARNER	License Number 2650		
Title PROFESSIONAL LAND SURVEYOR	Company Name		
Address 9925 GULF BOULEVARD	City TREASURE ISLAND	State FLORIDA	ZIP Code 33706
Signature 	Date 7-03-07	Telephone (727) 360-0636	
			7-03-07 DAVID C. HARNER PLS # 2650

certified 10/17/07



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. 8099 BAYSHORE DRIVE			Policy Number	
City TREASURE ISLAND	State FLORIDA	ZIP Code 33706	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
C2e.=ELECTRIC METER.

BENCHMARK ELEVATION=5.90' ON PINELLAS COUNTY BENCHMARK #251. A8.:ATTACHED GARAGES

CONTINUE UNDER ELEVATED LIVING FLOOR AND ARE INCLUDED IN THE TOTAL ENCLOSURE SQUARE FOOTAGE.

Signature _____ Date 7-03-07 Check here if attachments

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.

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, crawl space, or enclosure) is _____ feet meters above or below the HAG.

b) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the LAG.

E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.

E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.

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? 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, 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'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. Check the measurement used in Items G8 and G9.

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 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 _____
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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 (PR) Datum _____

G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments _____

Check here if attachments

Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <i>8099 BAY SHORE DRIVE</i>			For Insurance Company Use: Policy Number
City <i>TREASURE ISLAND</i>	State <i>FL</i>	ZIP Code <i>33706</i>	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page, following.

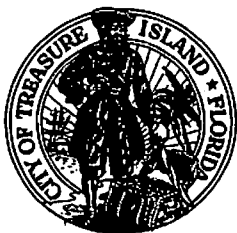
6-29-07

REAR VIEW



FRONT VIEW





**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

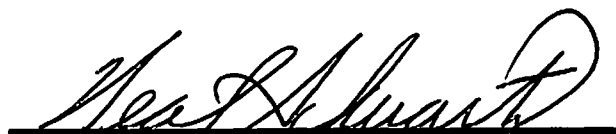
On this date, **JULY 10, 2007**, the structure located at **8099 BAYSHORE DR.** is hereby certified for **OCCUPANCY USE** as a **GROUP 3-RESIDENTIAL MEDIUM IN THE RM - 15 DISTRICT**. The structure has been inspected for compliance with the technical codes and other applicable laws and ordinances, and the proposed use thereof complied with the provisions of the Land Development Regulations of the City.

OWNER: RAYMOND P. III & JERI G. SMITH STREET ADDRESS: 8099 BAYSHORE DR. ZONING: RM-15- RESIDENTIAL MEDIUM DISTRICT; LEGAL DESCRIPTION: BEGINNING AT THE SW CORNER OF LOT 5 OF BLOCK 3 OF UNIT #3, SUNSET BEACH SUBDIVISION, ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 21, PAGE 39, 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: **SEPTEMBER 3, 2003; FLOOD ZONE AE, ELEVATION 11, NAVD; PANEL No. 12103C 02576.**)

CERTIFICATE NUMBER: CO 2007126
DATE ISSUED: JULY 10, 2007
PERMIT NUMBER: 200502187
ISSUED: SEPTEMBER 6, 2005





Neal H. Schwartz
BUILDING OFFICIAL

