

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:	
BUILDING OWNER'S NAME Donald Schutt			Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 4918 Bay Park Drive			Company NAIC Number	
CITY Port Richey	STATE FL	ZIP CODE 34668		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 6 Harbor Isles				
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

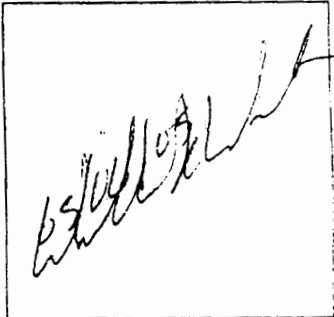
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER City of Port Richey 1202234		B2. COUNTY NAME Pasco		B3. STATE FL	
B4. MAP AND PANEL NUMBER 120234 0003	B5. SUFFIX B	B6. FIRM INDEX DATE	B7. FIRM PANEL EFFECTIVE/REVISED DATE 07/05/83	B8. FLOOD ZONE(S) A13	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 14

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)

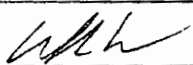
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.
 C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which 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 ngvd29 Conversion/Comments _____
 Elevation reference mark used local. Does the elevation reference mark used appear on the FIRM? Yes No
 o a) Top of bottom floor (including basement or enclosure) 6.5 ft.(m)
 o b) Top of next higher floor n/a ft.(m)
 o c) Bottom of lowest horizontal structural member (V zones only) n/a ft.(m)
 o d) Attached garage (top of slab) 6.0 ft.(m)
 o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 6.6 ft.(m)
 o f) Lowest adjacent (finished) grade (LAG) 5.9 ft.(m)
 o g) Highest adjacent (finished) grade (HAG) 6.0 ft.(m)
 o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade n/a
 o i) Total area of all permanent openings (flood vents) in C3.h n/a sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date



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	WILLIAM K. WOODWORTH	LICENSE NUMBER	5258
TITLE	WILLIAM K. WOODWORTH, PROFESSIONAL SURVEYOR & MAPPER	COMPANY NAME	
ADDRESS	6824 Crossbow Lane	CITY	STATE
		New Port Richey	FL
SIGNATURE	DATE	TELEPHONE	ZIP CODE
	<u>05/06/05</u>	727-847-5848	34653