

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME <u>PIERRE RIGO</u>	For Insurance Company Use: Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <u>3335 HARDY STREET</u>	Company NAIC Number
CITY <u>PORT RICHEY</u>	STATE <u>FL.</u>
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>LOT 18 BLOCK B PORT RICHEY ACRES UNIT THREE</u>	ZIP CODE
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) <u>RESIDENTIAL</u>	
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 <u>PASCO COUNTY, 120230</u>	B2. COUNTY NAME <u>PASCO</u>	B3. STATE <u>FL.</u>
B4. MAP AND PANEL NUMBER <u>120230 0189</u>	B5. SUFFIX <u>C</u>	B6. FIRM INDEX DATE <u>9-30-92</u>
B7. FIRM PANEL EFFECTIVE/REVISED DATE <u>3-15-84</u>	B8. FLOOD ZONE(S) <u>A-13</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <u>12</u>

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 C3a-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 '29 Conversion/Comments

Elevation reference mark used (SEE COMMENTS) Does the elevation reference mark used appear on the FIRM? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>13.71</u> ft(m)
<input type="checkbox"/> b) Top of next higher floor	<u>N/A</u> ft(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>N/A</u> ft(m)
<input type="checkbox"/> d) Attached garage (top of slab)	<u>13.24</u> ft(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>A/C PAD 13.12</u> ft(m)
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>12.7</u> ft(m)
<input type="checkbox"/> g) Highest adjacent grade (HAG)	<u>13.3</u> ft(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>0</u>
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	<u>0</u> sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

8-5-00
8-9-2001

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 PAUL A. COLLINS LICENSE NUMBER 4287

TITLE PROFESSIONAL SURVEYOR & MAPPER COMPANY NAME CORNERSTONE SURVEYING AND LAND PLANNING INC.

ADDRESS 6521 BRIDGE ROAD, SUITE 1 CITY PORT RICHEY STATE FL ZIP CODE 34668

SIGNATURE [Signature] DATE 8-9-2001 TELEPHONE 727-846-1041

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.		Policy Number	
CITY HARDY STREET PORT RICHEY	STATE FL	ZIP CODE	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
BENCHMARK USED: NAIL IN POWER POLE AT THE WEST END OF HARDY STREET, EL. = (10.95)

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.
- 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.
- E4. 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, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here.

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
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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 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	

Check here if attachments

Data Current as Of:		Weekly Archive - Saturday, March 03, 2012						
Parcel ID		28-25-16-0060-00B00-0180 (Card: 001 of 001)						
Classification		01 - Single Family						
Mailing Address BURGESS JAMIE E & TRAN LISA NGUYEN 8335 HARDY ST PORT RICHEY FL 34668-6727 Physical Address 8335 HARDY ST PORT RICHEY FL 34668-6727		Property Value Ag Land \$0 Land \$11,000 Building \$27,756 Extra Features \$1,573 Just Value \$40,329 Assessed (Save Our Homes) \$40,329 Homestead 196.031 - \$25,000 Non-School Additional Homestead Exemption - \$0 Taxable Value \$15,329 Warning: A significant taxable value increase may occur when sold. Click here for details and info. regarding the posting of exemptions.						
Legal Description (First 4 Lines)								
See Plat for this Subdivision PORT RICHEY ACRES UNIT 3 PB 6 PG 60 LOT 18 BLOCK B OR 4868 PG 747								
Land Detail (Card: 001 of 001)								
Line	Use	Description	Zoning	Units	Type	Price	Condition	Value
1	0100	SFR	00R3	10,000.00	SF	\$1.10	1.00	\$11,000
Additional Land Information								
Acres	0.23	Tax Area	60PR	FEMA Code	AE	Residential Code	PRACLP1	
Building Information - Use 01 - Single Family Residential (Card: 001 of 001)								
Year Built	2001	Stories	1.0					
Exterior Wall 1	Concrete Block Stucco	Exterior Wall 2	None					
Roof Structure	Gable or Hip	Roof Cover	Asphalt or Composition Shingle					
Interior Wall 1	Drywall	Interior Wall 2	None					
Flooring 1	Ceramic Clay Tile	Flooring 2	Carpet					
Fuel	Electric	Heat	Forced Air - Ducted					
A/C	Central	Baths	2.0					
Line	Description	Sq. Feet	Repl. Cost New					
1	BAS	1,272	\$27,984					
2	FEP	78	\$1,210					
3	FGR	350	\$3,080					
Extra Features (Card: 001 of 001)								
Line	Description	Year	Units	Value				
1	CLFENCE	1983	720	\$254				
2	DWSWC	2001	667	\$1,059				
3	UDU-M	2003	1	\$260				
Sales History								
Previous Owner				RIGO/PURISH FAMILY REVOCABLE				
Year	Month	Book/Page	Type	Amount				
2002	02	4868 / 0747	WD	\$90,000				
1998	05	3951 / 1298	WD	\$0				
1995	03	3406 / 0188	WD	\$20,000				