FROM : MURPHYS LAND SURVEYING

FAX NO. : 727 344 4640

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM Aug. 29 2003 02:52PM P2 O. A.B. No. 3067-0077 Expires December 31, 2005

ELEVATION CERTIFICATE

	For Insurance Company Use:			
BUILDING OWNER'S NAME	ON	Palicy Number		
Hunter Lankford and Juli	Company NAIC Number			
BUILDING STREET ADDRESS (Including				
2828 66th Terrace S.	DE			
St. Petersburg.	2			
TOO A OCTOTAL DESCRIPTION (I At SMITH PLACE				
DTMELLA:				
BUILDING USE (e.g., Residential, Non-residential				
LATITUDE/LONGITUDE (OPTIONAL)	pe): uad Map			
(##°-##'-####" \alpha ######")				
SI	ECTION B - FLOOD IN	SURANCE RATE MAP (FIRM) IN	FORMATION	
		2, COUNTY NAME		B3. STATE
B1. NEIP COMMUNITY NAME & COMMUNITY NU	MBEK P	Pinellas	ì	Florida
125148		B7, FIRM PANEL		58, BASE FLOOD ELEVATION(S)
B4, MAP AND PANEL NUMBER B5, SUFFIX	B6. FIRM INDEX DATE	EFFECTIVE/REVISED DATE	B&, FLOOD ZONE(S	(Zone AO, use depth of flooding)
NUMBER B5. SUFFIX 125148 0035 C	07/02/92	07/02/92	A10 & B	9.0'
B10. Indicate the source of the Base Flood Elec	vation (BFE) data or base	flood depth entered in B9.		
☐ FIS Profile XI FIRM	Community Dete	RUNDEQ TO CONTROL CORRECTION):	
Det Indiana the significant dotum upod for the l	BFE 🔄 B9: 🚺 NGVD 192	23 NAVD 1988	Other (Describe)	Designation Date
 R12 Is the building located in a Coastal Barrier 	Resources System (CBK	S) area of Otherwise Protected Area (V	PA)/[_] (@ [A N	Designation Date
		LEVATION INFORMATION (SUR		
C1. Building elevations are based on: Cons]	Finished Construction	
*A new Elevation Certificate will be required	when construction of the	building is complete.	e boing complaint	se names 6 and 7 . If no diagram
C2: Building Diagram Number] (Select the buil	o nauk court-saide	no horizon a seize () in in employer.		
accurately represents the building, provide				
C3. Elevations – Zones A1-A30, AE, AH, A (with Complete Items C3a+) below according to	t from the dahim used for the BFE in			
Complete Hems C3a-i below according to Section B, convert the datum to that used	culation. Use the so	ce provided or the Comments area of		
Section B, convert the datum to that used: Section D or Section G, as appropriate, to	io, die ope. Downieu M document the detum con	sessingrificing aliai dalmiri da Marenari Car Referen		
Datum Conversion/Comments	ACCIDING THE RESIDENT FORM	rgagish ti		
Elevation reference mark used P.G. 2Doe	 is the elevation reference i	mark used appear on the FIRM? 🔲 Y	es 🗓 No.	
o a) Top of bottom floor (including basem		10.0 ft.(m)		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
o b) Top of next higher floor	•	<u>N_A_ft.(m)</u>	Ö E.	* " * " * " * " * " * " * " * " * " * "
o c) Bottom of lowest horizontal structura	i member (V zones only)	<u>N_A_ft.(m)</u>	ossed Seal, Date	(2). ~
o d) Attached garage (top of slab)		9. 7 ft.(m)	A PE	راد رود سروا
o e) Lowest elevation of machinery and/o	r equipment		. 유 대 명	100 × 60 ~ 6
servicing the building (Describe in a	•	<u>10_0</u> ft(m) <u>9_6ft(m)</u>	Limb Taku	Branch March
of) Lowest adjacent (finished) grade (LAG	Liberse Number, Einf Sögnature, end	<i>•</i> ø′		
o g) Highest adjacent (finished) grade (H/	Š			
o h) No. of permanent openings (flood ve	Ä			
o i) Total area of all permanent openings	CERTIFICATION			
	information			
This certification is to be signed and seals I certify that the information in Sections A	mismauur eble			
I certify that the information in Sections A I understand that any false statement me				
CERTIFIER'S NAME	2 Principles of 1810	A CONTRACTOR OF THE CONTRACTOR	LICENSE NUMBER	
Edward D. Murphy			#5333	
TITLE		COMPANY NAME		
Professional Land Sur	veyor	Murphy's	Land Surve	ving Inc. TE ZIPCODE
ADDRESS 5750 11th Avenue N.	^	City St. Petersbu	st/ rg f	33710
CHONOTO IOE		DATE	TEI	EPHONE
Edwood	· and	08/29/0	3	727/347-8740
	1 \			

OM : MURPHYS LAND SURVEYING	FAX NO. :	727 344 46	540	Aug.	29 2003 02:53PM P3
IMPORTANT: In these spaces, copy the corresponding	g information fr	om Section A.			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No	a) OR P.O. ROUTE	AND BOX NO.			Policy Number
2828 65th Terrace S.	SI	ATE	ZIP CC		Company NAIC Number
cny St. Petersburg.	!	FL		712	
SECTION D - SURVEYOR,	ENGINEER, OR	ARCHITECT CE	RTIFICATION (C	ONTINUE	<u>D)</u>
Copy both sides of this Elevation Certificate for (1) community off	icial, (2) insurance	agent/company, and	(3) building owner.		
COMMENTS Elevations Based on Ci	233				
Elevation = 109.801					
Mean Sea Level = 97.0	1				
Claushiana Depail on N	C W D 10	29			Check here if attachments
SECTION E. BUILDING FLEVATION INFORM	ATION (SURVE	Y NOT REQUIRE	D) FOR ZONE A	O AND Z	NE A (WITHOUT BFE)
For Zone AO and Zone A (without BFE), complete Items E1 throug	jh E4. If the Eleva	tion Certificate is infe	ended for use as su	pporting info	mation for a LOMA or LOMR-F,
C					
Section C must be completed. E1. Building Diagram Number _(Select the building diagram most si represents the building, provide a sketch or photograph.)					
represents the bottom floor (including basement or enclosure) of	of the building is	ft.(m)in.(cm) 🔲 -	above or 🔲 below	w (check on) the highest adjacent grade. (Use
المامان المستعمل المس					
 natural grade, it available). E3. For Building Diagrams 6-8 with openings (see page 7), the next grade. Complete items C3.h and C3.i on front of form. 	£ tiligher liconor ele	MSKBO HOOF (BIBASHO)	(10) Of the Doming R	()	
E4. The top of the platform of machinery and/or equipment servicin	ng the building is	ft.(m)in.(cm) [above or 🔲 below	w (check or	e) the highest adjacent grade. (Use
(مادانوری از مادس ایس همی					
E5. For Zone AO only: If no flood depth number is available, is the	e top of the bottom	thoorelevated in acc in Section G	contance with the c	ammunity s	oodhan ususganan o asance:
Yes No Unknown. The local official must cert SECTION F - PROPERTY	OWNER (OR O	WNER'S REPRE	SENTATIVE) CE	RTIFICAT	ON
The property owner or owner's authorized representative who con	mpletes Sections A	B, C (Items C3.h a	nd C3.ionly), and E	for Zone A	rithout a FEMA-issued or community-
issued BFE) or Zone AO must sign here. The statements in Se	ctions A, B, C, and	E are correct to the	best of my knowled	áge.	
PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRE	SENTATIVE'S NA	WE	•		
ADDRESS		CITY	 	STA	TE ZIP CODÉ
		DATE		TEL	PHONE
SIGNATURE					
COMMENTS		<u></u>			
					Check here if attachments
SECTION	G - COMMUNI	TY INFORMATIO	N (OPTIONAL)		
The local official who is authorized by law or ordinance to administ	erthe community?	s floodplain manager	ment ordinance cen	complete S	ictions A, B, C (or E), and G or this Elec I
Certificate. Complete the applicable item(s) and sign below. G1. The information in Section C was taken from other documents.	antolian that has he	on alamed and embo	seed by a licensed :	survevor, ex	ineer, or architect who is authorized by
or local law to certify elevation information. (Indicate the					
G2. A community official completed Section E for a building le	ocated in Zone A (without a FEMA-issu	red of community-ta	sued BFE)	or Zone AO.
G3. The following information (Items G4-G9) is provided for a	ommunity floodpla	in management pun	xxxxxx		
GA, PERMIT NUMBER GS, DATE PERMIT	ISSUED		G6. DATE CERTIFI	CATE OF C	MPLIANCE/OCCUPANCY ISSUED
G7. This permit has been issued for. ☐ New Construction ☐ S	Substantial Improve	ement	<u> </u>		
G8. Elevation of as-built lowest floor (including basement) of the	building is:			_fL(m)	Datum:
G9. BFE or (in Zone AO) depth of flooding at the building site is:				_ ft.(m)	Datum:
LOCAL OFFICIAL'S NAME		111	E .	-	
COMMUNITY NAME		TE	EPHONE		
SIGNATURE		DA	TE		
COMMENTS					
COMMENTO					
	· 				
				1	Check here if attachment

Wright National Flood Insurance Company A Stock Company P.O. Box 33003 St. Petersburg, FL 33733-8003 Customer Service: 1-800-820-3242 Claims: 1-800-725-9472 7278644750 p.3 Hrl 99.023 0213 0429977 7/04/13

Date of Notice

7/04/13

3712-5510

Policy Number Prior Policy Number
09 1150057119 04 09 1150057119 03
2000 11523 FLD RGLR

Agent (727)522-6610 4TH STREET INSURANCE PROFESSIONALS 5800 4TH ST N SAINT PETERSBURG FL 33703-1402

HUNTER E LANKFORD JULIE BOZMAN LANKFOR 2828 66TH TER S SAINT PETERSBURG FL

Flood Zone: AE

Property Address 2828 66TH TER S, SAINT PETERSBURG FL 33712-5510

Dear Insured,

Flood

It's TIME TO RENEW your Flood insurance policy. Your current policy expires on 8/29 13 at 12:01 a.m. standard time. To ensure continued coverage with us, you need to make your payment on or before the expiration date of your current policy. If you are paying by check, please use the payment coupon at the bottom of this notice; or, if you would like to pay by credit card, please use the credit card payment coupon enclosed with this notice.

Renewal Notice 8/29/13 - 8/29/14

If the coverage amount(s) shown under Option A or the payor listed below is incorrect, please contact your Agent.

OPTIONS	AMOUNT O	F COVERAGE	DEDUCTIBLI S	S PREMIUM DUE	
Option A: Pay this amount to renew your policy with the same coverage amounts as your current policy (as shown in the next box).	BUILDING CONTENTS	\$250,000 \$100,000	\$2,000 \$2,000	\$2,639.00	
Option B: Pay this amount to renew your policy with increased coverage amounts (as shown in the next box) due to increased property values.	BUILDING CONTENTS	n/a N/a		N/A	

If your mortgagee is the payor of this policy, this notice is for your records only.

Please RETURN BOTTOM PORTION along with your payment to the mailing address below.