U.S. DEPARTMENT OF HOMELAND SECURITY

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency Important: Read the instructions on pages 1-8. National Flood insurance Program

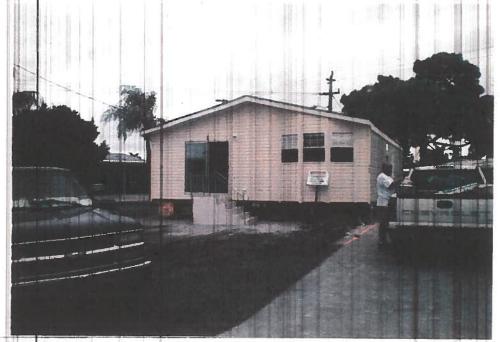
	For insurance Company Ose.			
A1. Building Owner's Name DERONE BELONIGER	Policy Number			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Company NAIC Number			
City State	ZIP Code			
Lineary Coer terror	34287			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)				
Log #201 HARBOR COVE MOBILE DONE PARK				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)				
A5. Latitude/Longitude: Lat. 27 82. 544 C Long. 20 16 440 C	Datum: NAD 1927 NAD 1983			
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.	77			
A7. Building Diagram Number 5 A8. For a building with a crawl space or enclosure(s), provide: A9. For a building with an att				
 a) Square footage of crawl space or enclosure(s) → / A sq ft a) Square footage of at 	tached garage 12 A sq ft			
b) No. of permanent flood openings in the crawl space or b) No. of permanent flo	od openings in the attached garage above adjacent grade			
enctosure(s) walls within 1.0 foot above adjacent grade/_A walls within 1.0 foot above adjacent grade/_A walls within 1.0 foot above adjacent grade/_A c) Total net area of flood openings in A8.b/A c) Total net area of flood openings in A8.b	d openings in A9.b sq in			
cy folds not also of most openings are				
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION				
B1. NFIP Community Name & Community Number B2. County Name See Social	B3. State			
ALASSTA COLD 19	B9. Base Flood Elevation(s) (Zone			
B4. Map/Panel Number B5. Suffix B6. FIRM Index B7. FIRM Panel B8. Flood Date Effective/Revised Date Zone(s)	AO, use base flood depth)			
125104-0375 D 5/1/B4 AB	BFEET (NUND)			
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 700			
Designation Date CBRS OPA				
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQU	IRED)			
C1. Building elevations are based on: Construction Drawings* Building Under Construction*	Finished Construction			
*A new Flevation 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 terms C2.a-g				
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IMPORTANT: In these spaces, co	ppy the corresponding information from S	ection A.	For Insurance Company Use:
Building Street Address (including Apt.,	Unit, Suite, and/or Bldg. No.) or P.O. Route and B	ox No.	Policy Number
City HORTH PORT	State Close D4	ZIP Code 34287	Company NAIC Number
SECTION	D - SURVEYOR, ENGINEER, OR ARCHITE	CT CERTIFICATION (CON	ITINUED)
	cate for (1) community official, (2) insurance agent		
Comments	e f) Low Coron	76	
a) MINIGHT FLOOR	a) High Com		
e) s/c Pag	2		
Signature	// Date	10/23/08	Check here if attachments
SECTION E PUIN DING ELEV	VATION INFORMATION (SURVEY NOT RE	The state of the s	
and C. For Items E1-E4, use natural gr E1. Provide elevation information for grade (HAG) and the lowest adjactal a) Top of bottom floor (including the second control of the sec	pasement, crawl space, or enclosure) is	thow whether the elevation is a	bove or below the highest adjacent bove or below the highest adjacent
b) Top of bottom floor (including b	nasement, crawl space, or enclosure) is		bove or below the LAG.
(elevation C2.b in the diagrams)	ermanent flood openings provided in Section A Iter of the building is feet met	ers above or below t	he HAG.
E3 Attached garage (top of slab) is		below the HAG.	
E5. Zone AO only: If no flood depth r	number is available, is the top of the bottom floor e	elevated in accordance with the	community's floodplain management
ordinance? Yes No	Unknown. The local official must certify this info	rmation in Section G.	
	F - PROPERTY OWNER (OR OWNER'S R		
The property owner or owner's authorize	ted representative who completes Sections A, B, a ments in Sections A, B, and E are correct to the be	and E for Zone A (without a FEI	MA-issued or community-issued BFE)
Property Owner's or Owner's Authorize		st of my fatomougo.	
Address	City	State	ZIP Code
Signature	Date	Telepho	ne
Comments			
	And the second s		Check here if attachment
	SECTION G - COMMUNITY INFORM	ATION (OPTIONAL)	C. CHECK HELD II QUAGNITICATE
The local official who is authorized by law and G of this Elevation Certificate. Comp	w or ordinance to administer the community's flood plete the applicable Item(s) and sign below. Check	blain management ordinance	can complete Sections A, B, C (or E), ms G8. and G9.
G1. The information in Section C w	ras taken from other documentation that has been elevation information. (Indicate the source and dat	signed and sealed by a license	ed surveyor, engineer, or architect who
	d Section E for a building located in Zone A (withou		
grand,	ns G4G9.) is provided for community floodplain m		
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Comp	pliance/Occupancy Issued
G7. This permit has been issued for:	New Construction Substantial Improve	ement	
G8. Elevation of as-built lowest floor (incl		feet	•
G9. BFE or (in Zone AO) depth of floodin	g at the building site:	Lifeet Limeters (F	PR) Datum
Local Official's Name	Title		
Community Name	Tele	phone	
Signature	Date		
Comments			
			Check here if attachments
			CHECK HOLD II BURGHINGHIA

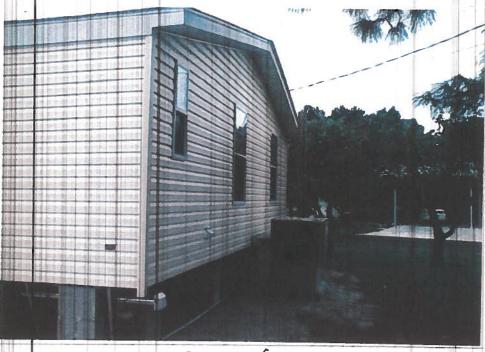
Building Photographs See Instructions for Item A6

			For Insurance Company Use:
Building Street Address Including Apt., Ur		. Route and Box No.	Policy Number
City NORTH PORT	State	ZIP Code 34287	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.



FRONT SIEW



RESR VIEW