U.S. DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
National Flood Insurance Program

ELEVATION CERTIFICATE
Important: Read the instructions on pages 1–9.

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: July 31, 2015

				mand this owner.	HOIT	COO BICK	IDANIOE COMPANY LIES
			TION A - PROPE	RTY INFORMA	HON		JRANCE COMPANY USE
A1. Building Owner's Name City of Key West					-	Paticy Nu	mber
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or 251 Margaret Street				toute and Box No.		Company	NAIC Number
City Key West	25	Side and the	State FL	ZIP Code 33	040		2.5
A3. Property Description ((Tax Parcel #: 00072082-0				cription, etc.)			
A4. Building Use (e.g., Re	sidential, Non-Re	sidential, Addition,	Accessory, etc.) Nor	n-Residential			
A5. Latitude/Longitude: La	at. 24.5617 N Lor	ng. <u>81.7997 W</u> Ho	rizontal Datum:	NAD 1927 🖾 N	IAD 1983		
A6. Attach at least 2 photo A7. Building Diagram Num		iding if the Certifical	te is being used to o	obtain flood insura	ince.		
A8. For a building with a c		losure(s):		A9. For a bu	ilding with an atta	ached garag	ge:
a) Square footage of b) Number of permar or enclosure(s) wit c) Total net area of fi d) Engineered flood of	nent flood opening thin 1.0 foot above ood openings in A	as in the crawlspace adjacent grade	NA sq ft NA NA sq in	b) Num with c) Tota	are footage of att aber of permanen in 1.0 foot above al net area of floor insered flood oper	t flood oper adjacent gr d openings	nings in the attached garage ade NA
d) Engineered flood (450	INSURANCE RA				
ni Nema			A CONTRACTOR		7.3.1. 5.16.13.1110		-
B1. NFIP Community Nam City of Key West	e & Community N 120168	umber	B2. County Name Monroe	8 -43 -9		B3. State FL	
B4. Map/Panel Number 12087C1516	B5. Suffix K	86, FIRM Index 0 2/18/05	Effective/f	RM Panel Revised Date 18/05	B8. Flood Zone(s) AE		ase Flood Elevation(s) (Zone O, use base flood depth)
10. Indicate the source of	the Base Flood E	levation (BFE) data	or base flood depth	n entered in Item I	B9.		
☐ FIS Profile		☐ Community Det	경영경 (1) (1) (10 10) 보다 이 발생 (20 1 <u>0) (1</u> 1)	Other/Source:	-00		
11. Indicate elevation date	200 P. S. S. S. S. S. S.			NAVD 1988	☐ Other/Source	G	
		ter Resources Syste		Otherwise Protect	ted Area (OPA)?	- 1	Yes No
		ier Resources Syste		Otherwise Protect	ted Area (OPA)?	1	☐ Yes ☑ No
312. Is the building located	in a Coastal Barr		em (CBRS) area or CBRS	☐ OPA	202		☐ Yes No
112. Is the building located Designation Date:	in a Coastal Barr	N C – BUILDING	em (CBRS) area or CBRS	ORMATION (S	URVEY REQU	IRED)	
112. Is the building located Designation Date:	SECTION based on:	N C - BUILDING	em (CBRS) area or CBRS ELEVATION INF	ORMATION (S Building Under	URVEY REQU	IRED)	Yes No
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