



**CITY OF MADEIRA BEACH**  
 PLANNING & ZONING DEPARTMENT  
 300 MUNICIPAL DRIVE ♦ MADEIRA BEACH FLORIDA 33708  
 (727) 391-9951 EXT. 255 ♦ FAX (727) 399-1131



**SPECIAL MAGISTRATE – VARIANCE APPLICATION**

**\*Applicant: Name and Address**

Jason K. Holloway & Elizabeth Holloway  
  
 14830 N. Bayshore Drive, Madeira Beach, FL 33708

**Telephone:** ( 704 ) 787-1119  
**Email:** j42662018@yahoo.com

**\*Property Owner: Name and Address**

Jason K. Holloway & Elizabeth Holloway\_\_\_\_  
 \_14830 N. Bayshore Drive, Madeira Beach, FL  
 33708

**Telephone:** ( 704 ) 787-1119 \_\_\_\_\_

**Email:** j42662018@yahoo.com

**Application for the property located at:** (Street Address or Location of the Vacant Lot) \_\_\_\_

14830 N. Bayshore Dr., Madeira Beach, FL, 33708

**Legal Description:** Lot 94 and the following portion of Lot 93: From a point of beginning at the most Westerly corner of said Lot 93 run by a curve to the right, radius 140.58m are 0.51 feet, chord North 66 degrees 03'20" East, 0.51 feet; thence South 27 degrees 44'08" East, 72.03 feet; then South 88 degrees 04'07" West 5.55 feet; thence North 24 degrees 02;54" West, 70.79 feet to the point of beginning, all in North Madeira Shores, according to the map or plat thereof, as recorded in Plat Book 23, Page 68, of the Public Records of Pinellas County, Florida.

**Lot Area:** 3,128                      **Width:** 45 ft.                      **Depth:** 75 ft.

**Zoning District:** R-2\_\_\_\_\_

**Present Structures on Property:** Single-family home

**Present Use of Property:** Single-family residence

**Date Building Permit Request denied:** August 10, 2023

**Variance(s) needed from the zoning requirements:** R-2 zoning, minimum rear setback

**PLEASE ATTACH REQUIRED SUPPORTING MATERIALS:**  
SITE PLAN, PICTURES, DEED, SURVEYOR'S SKETCH, DRAWINGS, EXPLANATION, ETC.

**DISCLAIMER:** According to Florida Statutes, Chapter 119, it is the policy of this state that all state, county, and municipal records are open for personal inspection and copying by any person. Providing access to public records is a duty of each agency. All Documents and information not specified in F.S. 119.071 and 119.0713 are subject to public record requests.



Special Magistrate Case #: \_\_\_\_\_

**\*\* For City of Madeira Beach Use Only \*\***

Fee: \$1800  Check # 534  Cash  Receipt # \_\_\_\_\_

Date Received: 9/13/23 Received by: Barbara Scott

Special Magistrate Case # Assigned: \_\_\_\_\_

Special Magistrate Hearing Date: \_\_\_/\_\_\_/\_\_\_  Approved  Denied

- X Zoning Variance for Residential Dwelling Units (One, Two or Three Units) \$1,800.00 per Variance
- \_\_\_ Zoning Variance for Multi-Family, Tourist Dwellings or Commercial \$2,000.00 per Variance
- \_\_\_ After-the-fact Variance \$3,600.00 per Variance

X \_\_\_\_\_  
Jenny Rowan, Community Development Director

Date: \_\_\_/\_\_\_/\_\_\_

X \_\_\_\_\_  
Robin Gomez, City Manager

Date: \_\_\_/\_\_\_/\_\_\_

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**APPLICATION (Must submit the following analysis)**

**This application to the Special Magistrate is requesting permission to:** addition to the single-family home to add a bathroom.

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The special magistrate shall authorize, upon application to appeal, after public notice has been given and public hearing held, such variance from the terms of the city land development regulations as not being contrary to the public interest where, owing to special conditions, a literal enforcement of the provisions of the land development regulations, subpart B of this Code will result in unnecessary and undue hardship. In order to authorize any variance from the terms of the city land development regulations, the special magistrate shall consider the following criteria and shall find that the criteria has been satisfied in full and that a hardship exists.

**On a separate attached page, explain in detail how your request meets City Code Sec. 2-507 by complying with the following rules. Please note that your explanation demonstrate that your request meets one or more of the conditions listed under criteria #1 below and that it also meets in full criteria 2 through 6 below:**

1. Demonstrate that special conditions and circumstances exist which are particular to the land, building, or other structures in the same district. Special conditions to be considered shall include but are not limited to:
  - a. *Substandard or irregular shaped lot.* If the site involves the utilization of an existing lot that has unique physical circumstances or conditions, including irregularity of shape, narrowness, shallowness, or the size of the lot is less than the minimum required in the district regulations.
  - b. *Significant vegetation or natural features.* If the site contains significant native vegetation or other natural features;
  - c. *Residential neighborhood character.* If the proposed project promotes the established historic or traditional development pattern of a block face, including setbacks, building height, and other dimensional requirements;
  - d. *Public facilities.* If the proposed project involves the development of public parks, public facilities, schools, or public utilities;
  - e. *Architectural and/or engineering considerations.* If the proposed project utilizes architectural and/or engineering features that would render the project more disaster resistant.

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2. Demonstrate that special condition (s) and circumstance (s) do not result from the actions of the applicant. A self-created hardship shall not justify a variance.
3. Demonstrate that the granting of the variance will not confer on the applicant any special privilege that is denied to other lands, buildings, or structures in the same zoning district.
4. Demonstrate that the literal interpretation would deprive the applicant of rights commonly enjoyed by other properties in the same zoning district under the terms of the Land Development regulations, subpart B of the code and would work unnecessary and undue hardship on the applicant.
5. Demonstrate that the variance granted is the minimum variance that will make possible the reasonable use of the land.
6. Demonstrate that the granting of the variance will be in harmony with the general intent and purpose of the City Land Development Regulations, and that such Variance will not be injurious to the area involved or otherwise detrimental to the public welfare.

**OWNER CERTIFICATION**

I hereby authorize permission for the Special Magistrate, Building Official and Planning & Zoning Director to enter upon the above referenced premises for purposes of inspection related to this petition.

I hereby certify that I have read and understand the contents of this application, and that this application, together with all supplemental data and information, is a true representation of the facts concerning this request; that this application is made with my approval, as owner and applicant, as evidenced by my signature below.

It is hereby acknowledged that the filing of the application does not constitute automatic approval of the request; and further, if the request is approved, I will obtain all the necessary permits and comply with all applicable orders, codes, conditions, rules and regulations pertaining to the subject property.

***I have received a copy of the Special Magistrate Requirements and Procedures (attached), read and understand the reasons necessary for granting a variance and the procedure, which will take place at the Public Hearing.***

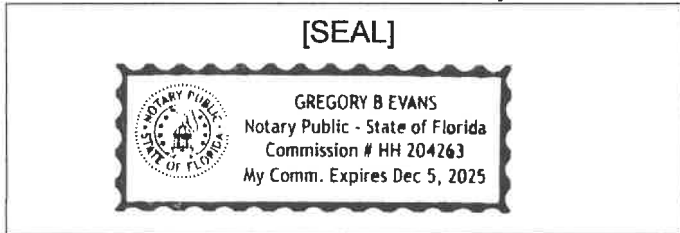
**Appeals.** (City Code, Sec. 2-109) An aggrieved party, including the local governing authority, may appeal a final administrative order of the Special Magistrate to the circuit court. Such an appeal shall not be a hearing *de novo* but shall be limited to appellate review of the record created before the Special Magistrate. An appeal shall be filed within 30 days of the execution of the order to be appealed.

X Elizabeth Holloway \_\_\_\_\_ Date: 9 / 13 / 2023  
Property Owner's Signature

STATE OF Florida

COUNTY OF Pinellas

Before me this 13<sup>th</sup> day of September, 2023, Elizabeth Holloway and Jason Holloway appeared in person who, being sworn, deposes and says that the foregoing is true and correct certification and is  personally known to me or  has produced Driver license as identification.



Gregory B. Evans  
Public Notary Signature

**NOTICE:** Persons are advised that, if they decide to appeal any decision made at this hearing, they will need a record of the proceedings, and for such purpose, they may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

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**NON-OWNER (AGENT) CERTIFICATION**

I hereby authorize permission for the Special Magistrate, Building Official and Planning & Zoning Director to enter upon the above referenced premises for purposes of inspection related to this petition.

I hereby certify that I have read and understand the contents of this application, and that this application, together with all supplemental data and information, is a true representation of the facts concerning this request; that this application is made with my approval, as owner and applicant, as evidenced by my signature below.

It is hereby acknowledged that the filing of the application does not constitute automatic approval of the request; and further, if the request is approved, I will obtain all the necessary permits and comply with all applicable orders, codes, conditions, rules and regulations pertaining to the subject property.

***I have received a copy of the Special Magistrate Requirements and Procedures (attached), read and understand the reasons necessary for granting a variance and the procedure, which will take place at the Public Hearing.***

**Appeals.** (City Code, Sec. 2-109) An aggrieved party, including the local governing authority, may appeal a final administrative order of the Special Magistrate to the circuit court. Such an appeal shall not be a hearing *de novo* but shall be limited to appellate review of the record created before the Special Magistrate. An appeal shall be filed within 30 days of the execution of the order to be appealed.

X \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
*Property Owner's Signature (If other than the property owner)*

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Before me this \_\_\_\_\_ day of \_\_\_\_\_, 2022, \_\_\_\_\_ appeared in person who, being sworn, deposes and says that the foregoing is true and correct certification and is  personally known to me or  has produced \_\_\_\_\_ as identification.



\_\_\_\_\_  
Public Notary Signature

**NOTICE:** Persons are advised that, if they decide to appeal any decision made at this hearing, they will need a record of the proceedings, and for such purpose, they may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

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## FOR YOUR RECORDS

### SPECIAL MAGISTRATE: REQUIREMENTS AND PROCEDURES (City Code Sec. 2-507)

- 1) Demonstrate that special conditions and circumstances exist which are particular to the land, building, or other structures in the same district. Special conditions to be considered shall include but are not limited to:
  - a. *Substandard or irregular shaped lot.* If the site involves the utilization of an existing lot that has unique physical circumstances or conditions, including irregularity of shape, narrowness, shallowness, or the size of the lot is less than the minimum required in the district regulations.
  - b. *Significant vegetation or natural features.* If the site contains significant native vegetation or other natural features;
  - c. *Residential neighborhood character.* If the proposed project promotes the established historic or traditional development pattern of a block face, including setbacks, building height, and other dimensional requirements;
  - d. *Public facilities.* If the proposed project involves the development of public parks, public facilities, schools, or public utilities;
  - e. *Architectural and/or engineering considerations.* If the proposed project utilizes architectural and/or engineering features that would render the project more disaster resistant.
- 2) The special conditions and circumstances do not result from the actions of the applicant. A self-created hardship shall not justify a variance.
- 3) Granting the variance will not confer on the applicant any special privilege that is denied to other lands, buildings, or structures in the same zoning district.
- 4) Literal interpretation would deprive the applicant of rights commonly enjoyed by other properties in the same zoning district under the terms of the land development regulations, subpart B of this Code and would work unnecessary and undue hardship on the applicant.
- 5) The variance granted is the minimum variance that will make possible the reasonable use of the land.
- 6) The granting of the variance will be in harmony with the general intent and purpose of the city land development regulations, and that such variance will not be injurious to the area involved or otherwise detrimental to the public welfare.

In granting any variance, the Special Magistrate may prescribe appropriate conditions and safeguards in conformity with the city land development regulations. Violation of such conditions and safeguards, when made a part of the terms under which the variance is granted shall be deemed a violation of this Code. The Special Magistrate may prescribe a reasonable time limit within which the action for which the variance is required shall be begun or completed or both. Under no circumstances except as permitted in the applicable zoning district of the city land development regulations. A nonconforming use of neighborhood lands, structures or buildings in the same zoning district shall not be considered grounds for the authorization of a variance. **Financial loss** standing alone is not sufficient justification for a variance.

The hearing will be conducted in the following manner:

1. Public notice will be read along with correspondence received.
2. City presents its case, and the applicant may cross-examine.
3. The Applicant presents his or her case supported by witnesses and evidence; and the City has the right to cross-examine each witness.
4. Public comment will only be solicited or received from parties directly affected by the variance. Individuals testifying do not have the right to cross-examine the parties.
5. Public participation will be closed, the Special Magistrate deliberates and makes a decision to grant or deny each variance requested in the application.

All variances granted by the Special Magistrate and not acted on within on (1) year of being granted will automatically expire.

The granting of a variance does not relieve the applicant from obtaining a building permit. The Special Magistrate does not have the authority to grant variances from the 100 Year Flood Level for Residential or Commercial Property.

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1. Demonstrate that special conditions and circumstances exist which are particular to the land, building, or other structures in the same district. Special conditions to be considered shall include but are not limited to:

a. Substandard or irregular shaped lot. If the site involves the utilization of an existing lot that has unique physical circumstances or conditions, including irregularity of shape, narrowness, shallowness, or the size of the lot is less than the minimum required in the district regulations.

Below is a GIS image of Parcel Number 09-31-15-60858-000-0940. This lot has an irregular shape. The width of the lot narrows and tapers at the rear. This is due to the lot's positioning along the bend of N. Bayshore Drive. When compared with other lots on N. Bayshore Drive, it is smaller and less usable.





d. Public facilities. If the proposed project involves the development of public parks, public facilities, schools, or public utilities;

This section is not applicable to this application because there is no work proposed to be completed on any public parks, facilities, schools, or public utilities.

e. Architectural and/or engineering considerations. If the proposed project utilizes architectural and/or engineering features that would render the project more disaster resistant.

The work and materials used will meet current building code standards and will improve an existing structure on the property. This use of new materials and workmanship will, therefore, render the project more disaster resistant.

2. Demonstrate that special condition (s) and circumstance (s) do not result from the actions of the applicant. A self-created hardship shall not justify a variance.

The proposed work is not the result of a self-created hardship. The work will improve an existing structure on the property. The work is comparable in nature and form to improvements made to other neighboring properties, and blends with the scheme of development of the neighborhood.

3. Demonstrate that the granting of the variance will not confer on the applicant any special privilege that is denied to other lands, buildings, or structures in the same zoning district.

Granting the variance will confer the applicant the same privilege currently enjoyed by other existing structures in the same zoning district. No special privilege is requested or implied.

4. Demonstrate that the literal interpretation would deprive the applicant of rights commonly enjoyed by other properties in the same zoning district under the terms of the Land Development regulations, subpart B of the code and would work unnecessary and undue hardship on the applicant.

The subject property represents an older structure in the neighborhood that is functional and livable, but is ready for updating or upgrading. Casual observation indicates other neighboring properties have had the opportunity and occasion to be updated with more substantial renovations. Many of those properties are younger than the subject property. The applicant would experience undue hardship if the variance were denied because the property is in need of updating, denial of this opportunity could impact the value and salability of the property, denial could subject the property to increased and more frequent maintenance obligations, and denial would result in a less efficient and less attractive property.

5. Demonstrate that the variance granted is the minimum variance that will make possible the reasonable use of the land.

The proposed work is well within the boundaries of the property and would not infringe on the rights of any neighboring property owner. Excepting some negligible expansions, the proposed work mostly occupies the space currently used by an existing structure on the property. The variance would maximize the use of the land while maintaining the historic streetscape of the neighborhood and preserving the enjoyment neighbors have for their own properties.

6. Demonstrate that the granting of the variance will be in harmony with the general intent and purpose of the City Land Development Regulations, and that such Variance will not be injurious to the area involved or otherwise detrimental to the public welfare.

The streetscape and street view of N. Bayshore Drive will be preserved and maintained if this variance is granted. No noticeable changes would be readily visible from the street. Furthermore, none of the proposed work should impact water flow, water runoff, or other matters of public interest. The harmony of the neighborhood and general scheme of development of the neighborhood will be unchanged.

## Joseph Petraglia

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**From:** j42662018@yahoo.com  
**Sent:** Wednesday, September 27, 2023 12:14 PM  
**To:** Joseph Petraglia  
**Cc:** 'Elizabeth Holloway'  
**Subject:** [e] Variance request for Holloway, 14830 N. Bayshore Dr.

Hello Joe.

Thank you for your time today. Per your request, we request to reduce the rear setback to be 15 feet.

Thank you,  
Jason Holloway  
704-787-1119

Disclaimer: Under Florida law (Florida Statute 668.6076), email addresses are public records. If you do not want your email address released in response to a public records request, please do not send electronic mail to the City of Madeira Beach. Instead, contact the appropriate department/division.









**CITY OF MADEIRA BEACH**  
PLANNING & ZONING DEPARTMENT  
300 MUNICIPAL DRIVE ♦ MADEIRA BEACH, FLORIDA 33708  
(727) 391-9951 EXT. 255 ♦ FAX (727) 399-1131  
Email to: [planning@madeirabeachfl.gov](mailto:planning@madeirabeachfl.gov)



## **SUBSTANTIAL IMPROVEMENT/DAMAGE PACKET**

### **ITEMS REQUIRED TO DETERMINE SUBSTANTIAL IMPROVEMENT/DAMAGE**

Applicant must submit the following (*Make sure you have an extra copy for your files*):

1. The completed building permit and substantial improvement/damage packet including the required 2 sets of (minimum) plans and documents;
2. An estimated Cost of Reconstruction/Improvement form, completed by a Licensed General Contractor, Architect, Engineer, or owner builder and signed by the Owner/Contractor or Contractor with a copy of his license certificate attached;
3. Pre-FIRM properties (built prior to December 31, 1974) undergoing alteration of a value that exceeds 25% of the Pinellas County approximate market value shall provide staff with an independent appraisal report;
4. Current photos of the structure, or photos before and after the storm;
5. Highlighted floor plan drawing showing area of structure to be repaired or altered;
6. Substantial Improvement/Construction Affidavit completed, signed, and dated;
7. An independent appraisal of the depreciated value of the structure will be used as the market value. It shall be noted on the appraisal that it is for FEMA purposes;
8. Any additions or new construction require a geotechnical report;
9. (2) Elevation Certificates (FEMA Form 81-31) are required for new construction and additions. An Elevation Certificate is required for showing the lowest living level at base flood elevation (BFE) plus 2 feet of freeboard and at final construction prior to receiving a Certificate of Occupancy; and
10. Declaration of Land Restriction (Non-conversion Agreement), completed, signed, and dated for new construction and additions to Post-FIRM structures.

Any combination of repair, reconstruction, rehabilitation, addition or improvement of a building or structure taking place during a one-year period, the cumulative cost of which equals or exceeds 50 percent of the market value of the structure before the improvement or repair is started. For each building or structure, the one-year period begins on the date of the first permit issued for improvement or repair of that building or structure subsequent to November 15, 2016. If the structure has sustained substantial damage, any repairs are considered substantial improvement regardless of the actual repair work performed. (Ord 2016-11, 11-15-2016)



**APPLICATION FOR SUBSTANTIAL IMPROVEMENT/DAMAGE REVIEW**

Tax Appraiser's Parcel ID# 09-31-15-60858-000-0940  
Property Address: 14830 N. Bayshore Dr., Madeira Beach, FL 33708  
Owner's Name: Elizabeth Holloway & Jason Holloway  
Co-Owner's Name: \_\_\_\_\_  
Owner's Mailing Address: 14830 N. Bayshore Dr., Madeira Beach, FL 33708  
Owner's Phone Number: 704-604-3418  
FIRM Panel: 12103C0191H  
Flood Zone: AE  
Base Flood Elevation: Please see attached elevation certificate  
Lowest Floor Elevation (excluding garage): Please see attached elevation certificate

**(GO TO WWW.MSC.FEMA.GOV FOR FLOOD MAPS AND INFORMATION)**

Initial \_\_\_\_\_ I am attaching an independent appraisal report of my property.

Initial  X  I accept Pinellas County's Approximate Market Value

Initial \_\_\_\_\_ I accept the attached estimated cost of construction as a fair cost of repair or improvement for my structure.

  
\_\_\_\_\_  
*Signature of Owner*

9-13-2023  
\_\_\_\_\_  
*Date*

  
\_\_\_\_\_  
*Signature of Co-Owner*

9-13-2023  
\_\_\_\_\_  
*Date*

## SUBSTANTIAL IMPROVEMENTS/DAMAGES

### Items to be included:

#### *All structural elements, including:*

- Spread or continuous foundation footings and pilings
- Monolithic or other types of concrete slabs
- Bearing walls, tie beams, and trusses
- Wood or reinforced concrete decking or roofing
- Floors and ceilings
- Attached decks and porches
- Interior partition walls
- Exterior wall finishes (e.g. brick, stucco or siding)
- Windows and doors
- Re-shingling or re-tiling a roof
- Hardware

#### *All interior finish elements, including:*

- Tiling, linoleum, stone, or carpet over sub-flooring
- Bathroom tiling and fixtures
- Wall finishes, including drywall, painting, stucco, plaster, paneling, marble or other decorative finishes
- Kitchen, utility and bathroom cabinets
- Built-in book cases, cabinets and furniture
- Hardware

#### *All utility and service equipment*

- HVAC equipment
- Repair or reconstruction of plumbing and electrical services
- Light fixtures and ceiling fans
- Security systems
- Built-in kitchen appliances
- Central vacuum systems
- Water filtration, conditioning or recirculation systems

#### *Also:*

- Labor and other costs associated with demolishing, removing, or altering building components
- Construction supervision and/or management
- Equivalent costs of work done by owner and volunteers
- Overhead and profit

### Items to be excluded:

- Plans and specifications
- Survey costs
- Permit fees
- Debris removal (e.g. removal of debris from building or lot, dumpster rental, transport fees to landfill tipping fees) and cleanup (e.g. dirt and mud removal, building dry-out, etc.)
- Items not considered real property, such as throw rugs, furniture, refrigerator, stoves not built-in, etc.
- Landscaping
- Sidewalks
- Fences
- Yard lights
- Swimming pools
- Screened pool enclosures
- Sheds
- Gazebos
- Detached structures (including garages)
- Landscape irrigation

**ESTIMATED COST OF IMPROVEMENTS/RECONSTRUCTION**

Parcel ID#: 09-31-15-60858-000-0940  
Property Address: 14830 N. Bayshore Dr., Madeira Beach, FL 33708

This Cost of Estimate of Improvement/Reconstruction must be prepared and signed by a licensed General Contractor,  
Architect, Engineer or Owner/Builder

**BUILDING**  
(Materials and Labor Cost are required)

ITEMS	MATERIALS COST	LABOR COST	TOTAL COST
Demolition	\$1504.04	\$2,874.04	\$4,378.08
Foundation, Slab(s)	\$2,401.76	\$5,102.64	\$7,504.40
Drywall	\$935.56	\$1,475.88	\$2,411.44
Bearing Walls, Tie Beams, Trusses			
Framing, Joists, Beams, Subflooring	\$336.98	\$1,379.27	\$1,715.27
Interior Non-Bearing Walls	\$435.62	\$822.38	\$1,258.00
Exterior Finishes (Stucco, Siding, Painting, Trim, Brick, etc.)	\$438.78	\$960.31	\$1,399.09
Windows and Exterior Doors	\$265.16	\$397.74	\$662.90
Cabinets / Vanities / Countertops		\$1,265.56	\$1,265.56
Hardware			
Attached Decks & Porches			
Floor Covering	\$189.23	\$757.41	\$946.64
Bathroom Tile / Kitchen Tile	\$1,436.72	\$3,552.12	\$4,988.84
Wall Finish / Painting / Covering	\$626.32	\$1,189.47	\$1,815.79
Built-In Appliances			
Built-In Cabinets, Bookcases, Furniture, Mirrors, Closet Shelving			
Interior Doors	\$327.38	\$260.60	\$587.98
Baseboards / Crown Molding / Trim Boards	\$334.92	\$494.32	\$829.24
Hardware (Strapping, bolts, screws, etc)			
Insulation			

Fireplace / Hearth / Mantel / Chimney			
Stairs / Handrails / Guardrails			
<b>BUILDING TOTAL</b>			\$ 29,763.23

### ELECTRICAL

(Materials and Labor Cost are required)

ITEMS	MATERIALS COST	LABOR COST	TOTAL COST
Electrical Wiring	\$1,874.69	\$4,043.45	\$5,918.14
Electrical Fixtures, Ceiling Fans, Outlets, Switches	\$797.62	\$2,040.40	\$2,837.40
Security System, Intercom System			
Smoke Detectors			
Electrical Panel(s) & Meter Base(s)			
<b>ELECTRICAL TOTAL</b>			\$ 8,755.54

### PLUMBING

(Materials and Labor Cost are required)

ITEMS	MATERIALS COST	LABOR COST	TOTAL COST
Plumbing Piping	\$1,801.23	\$3,362.17	\$5,163.40
Plumbing Fixtures		\$840.60	\$840.60
Water Heaters			
Water Filtration, Conditioning and Recirculation Systems			
<b>PLUMBING TOTAL</b>			\$ 6,004.00

**MECHANICAL**

(Materials and Labor Cost are required)

ITEMS	MATERIALS COST	LABOR COST	TOTAL COST
HVAC Equipment			
Ductwork, Grills	\$234.62	\$208.24	\$442.86
Bathroom Fan(s), Range Hood, Central Vacuum, Dryer Exhaust	\$214.08	\$208.24	\$422.32
<b>MECHANICAL TOTAL</b>			\$ 865.18

**GAS**

(Materials and Labor Cost are required)

ITEMS	MATERIALS COST	LABOR COST	TOTAL COST
Gas Piping			
Gas Tank			
<b>GAS TOTAL</b>			\$

**ROOF**

(Materials and Labor Cost are required)

ITEMS	MATERIALS COST	LABOR COST	TOTAL COST
Shingles, Underlayment, Mod Bit	\$2,001.41	\$3,002.11	\$5,003.52
Gutters, Downspouts			
<b>ROOF TOTAL</b>			\$ 5,003.52

**MISCELLANEOUS**

(Materials and Labor Cost are required)

ITEMS	MATERIALS COST	LABOR COST	TOTAL COST
Construction Management & Supervision		\$6,000.00	\$6,000.00
Overhead & Profit		\$8,780.43	\$8,780.43
Sales Tax on Materials	\$1,240.64		\$1,240.64
ITEMS PURCHASED BY HOMEOWNER			
<b>MISCELLANEOUS TOTAL</b>			\$ 16,021.07



<b>TOTALS</b>	
<b>BUILDING TOTAL</b>	\$ 29,763.23
<b>ELECTRIC TOTAL</b>	\$ 8,755.54
<b>PLUMBING TOTAL</b>	\$ 6,004.00
<b>MECHANICAL TOTAL</b>	\$ 865.18
<b>GAS TOTAL</b>	\$
<b>ROOF TOTAL</b>	\$ 5,003.52
<b>MISCELLANEOUS TOTAL</b>	\$ 16,021.07
<b>TOTAL</b>	\$66,412.54
<b>(THE 10% CONTINGENCY IS REQUIRED)</b>	\$ \$6,641.25
<b>10% CONTINGENCY</b>	
<b>GRAND TOTAL</b>	\$ \$73,053.79

The value placed on all donated or discounted materials should be equal to the actual or estimated cost of such materials and must be included in the total cost. Where materials or servicing equipment are donated or discounted below normal market values, the value should be adjusted to an amount that would be equivalent to that estimated through normal market transactions. *Section 4.4.4\**

The situation described above that involves donated or discounted materials may also involve volunteer labor. Also, property owners may undertake fairly significant improvement and repair projects on their own. In both cases, the normal "market" value or "going rate" for labor must be included in the estimates of the cost of improvement and the costs to repair. *Section 4.4.5\**

I understand that I am subject to enforcement, penalties and / or fines for violation if inspection of the property reveals that I have made additions, renovations or remodeling to the property which were not included in the permit documents.

Violating the FEMA improvement threshold may result in removal of improvement work, revocation of the Certificate of Occupancy for the building, and/or an order to remove the structure.

(PLEASE attach any additional information)

Contractor's Name: Frank Fulghum License #: CBC060542-CBC1263686

Address: 14308 Knoll Ridge Dr. Tampa FL Phone: 813-503-4942  
33625

Contractor's Signature:  Date: 9/9/23

*\*FEMA P-758/May 2010 "Substantial Improvement/Substantial Damage Desk Reference", Chapter 4, Making Substantial Improvement and Substantial Damage Determinations.*

**CONTRACTOR**

**IMPROVEMENT/RECONSTRUCTION AFFIDAVIT**

Parcel ID#: 09-31-15-60858-000-0940

Owner's Name: Elizabeth Holloway & Jason Holloway

Phone: 704-604-3418 Email: Jason.Holloway@sclogistics.com

Address: 14830 N. Bayshore Dr., Madeira Beach, FL  
33708

Contractor's Name: Frank Fulghum License #: CBC060542-CBC1263686

I hereby attest to the fact that I, or a member of my staff, personally inspected the above-mentioned property and produced the attached itemized list of repairs/reconstructions and/or remodeling which is hereby submitted for the **SUBSTANTIAL IMPROVEMENT/DAMAGE REVIEW**. These listed damages/improvements are **ALL of the improvements/damages** sustained by this structure and all additions, improvements, or repairs proposed on the subject building are included in this estimate.

I understand that I am subject to enforcement action and/or fines if inspection of the property reveals that I have made repairs **NOT included on the attached list of improvements/repairs**, or improvements or illegal structures/additions to the existing structure without having present plans for such additions. I understand that any permit issued by the City of Madeira Beach pursuant to this affidavit does not authorize the reconstruction, repair or maintenance of any illegal additions, fences, sheds or non-conforming uses or structures on the subject property.

Total Labor and Materials	<u>\$ 51,632.11</u>
Overhead and Profit	<u>\$ 14,780.43</u>
10% Contingency	<u>\$ 6,641.25</u>
<b>TOTAL COST</b>	<u>\$ 73,053.79</u>

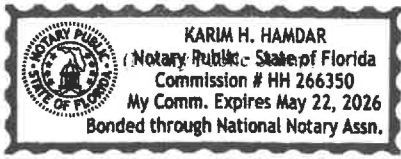
Frank Fulghum  
**Contractor Signature**

STATE OF Florida  
COUNTY OF Hillsborough

Before me this day personally appeared Frank Fulghum who, being duly sworn disposes and says that s/he has read, understands, and agrees to comply with all the aforementioned conditions.

Sworn and subscribed before me this 12<sup>th</sup> day of September, 2023. Personally known or produced personally known as identification.

[Signature]  
Notary Public  
Commission #: HH266350



Date Commission Expires: 05/22/2026

**OWNER**  
**IMPROVEMENT/RECONSTRUCTION AFFIDAVIT**

Parcel ID#: 09-31-15-60858-000-0940  
Owner's Name: Elizabeth Holloway & Jason Holloway  
Phone: 704-604-3418 Email: Elizabethwatkinsholloway@gmail.com  
Address: 14830 N. Bayshore Dr., Madeira Beach, FL 33708  
  
Contractor's Name: Frank Fulghum License #: CBC060542-CBC1263686

I hereby attest to the fact that I, or a member of my staff, personally inspected the above-mentioned property and produced the attached itemized list of repairs/reconstructions and/or remodeling which is hereby submitted for the **SUBSTANTIAL IMPROVEMENT/DAMAGE REVIEW**. These listed damages/improvements are **ALL of the improvements/damages** sustained by this structure and all additions, improvements, or repairs proposed on the subject building are included in this estimate.

I understand that I am subject to enforcement action and/or fines if inspection of the property reveals that I have made repairs **NOT included on the attached list of improvements/repairs**, or improvements or illegal structures/additions to the existing structure without having present plans for such additions. I understand that any permit issued by the City of Madeira Beach pursuant to this affidavit does not authorize the reconstruction, repair or maintenance of any illegal additions, fences, sheds or non-conforming uses or structures on the subject property.

**TOTAL COST** \$ 73,053.79

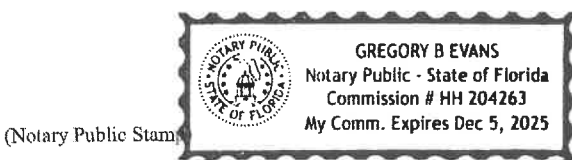
Elizabeth Holloway \_\_\_\_\_ Jason Holloway \_\_\_\_\_  
Owner Signature Co-Owner Signature

STATE OF Florida  
COUNTY OF Pinellas

Elizabeth Holloway

Before me this day personally appeared and Jason Holloway who, being duly sworn disposes and says that s/he has read, understands, and agrees to comply with all the aforementioned conditions.

Sworn and subscribed before me this 13<sup>th</sup> day of September, 2023. Personally known or produced Driver License as identification.



Gregory B Evans  
Notary Public  
Commission #: HH 204263  
Date Commission Expires: Dec 5, 2025

Prepared by and return to:  
Synergy Title Partners, LLC  
15027 Gulf Blvd  
Madeira Beach, FL 33708  
File Number: 1480STP20  
Consideration: \$325,000.00

(Space Above This Line For Recording Data)

## Warranty Deed

This Warranty Deed made this 14th day of July, 2020, between Jeffrey Gocken and Arlene Gocken, husband and wife and as Trustees of the Jeffrey and Arlene Gocken Living Trust Dated July 12, 2017, whose post office address is, 163 Scenic Dr, Hot Springs, AR.71913, Grantor, and Elizabeth Holloway and Jason K. Holloway, husband and wife whose post office address is 3281 Westridge Lane SW, Concord, NC 28027, Grantee:

(Whenever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, trusts and trustees)

Witnesseth, that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in the Pinellas FL, to-wit:

Lot 94 and the following portion of Lot 93: From a point of beginning at the most Westerly corner of said Lot 93 run by a curve to the right, radius 140.58 feet, arc 0.51 feet, chord North 66 degrees 03'20" East, 0.51 feet; thence South 27°44'08" East, 72.03 feet; thence South 88° 04'07" West, 5.55 feet; thence North 24°02'54" West, 70.79 feet to the point of beginning, all in NORTH MADEIRA SHORES, according to the map or plat thereof, as recorded in Plat Book 23, Page 68, of the Public Records of Pinellas County, Florida.

Parcel Identification Number: 09-31-15-60858-000-0940

Property address: 14830 N. Bayshore Drive, Madeira Beach, FL 33708

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2019.

In Witness Whereof, grantor has hereunto set grantor's hand and seal the day and year first above written.

COPY

Signed, sealed and delivered in our presence:

Jeffrey Gocken individually and as Trustee of the Jeffrey and Arlene Gocken Living Trust Dated July 12, 2017

*Tonya Gayle Graham*  
Witness Name: Tonya Gayle Graham

X *Jeffrey Gocken*  
By Jeffrey Gocken

*Sue Graham*  
Witness Name: Sue Graham

Arlene Gocken individually and as Trustee of the Jeffrey and Arlene Gocken Living Trust Dated July 12, 2017

X *Arlene Gocken*  
By Arlene Gocken

State of AR  
County of Garland

The foregoing instrument was acknowledged before me this 14<sup>th</sup> day of July, 2020, by Jeffrey Gocken and Arlene Gocken as Trustees of the Jeffrey and Arlene Gocken Living Trust Dated July 12, 2017, they ( ) are personally known to me or (  ) have produced Driver's License as identification.

TONYA GAYLE GRAHAM  
NOTARY PUBLIC - ARKANSAS  
GARLAND COUNTY  
My Commission Expires 03-15-2027  
Commission # 12359395

*Tonya Gayle Graham*  
Notary Public  
Printed Name: Tonya Gayle Graham  
My Commission Expires: 3-15-2027

COPY



# ELEVATION CERTIFICATE

**Important:** Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name ARLENE GOCKEN				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 14830 N. BAYSHORE DRIVE				Company NAIC Number:	
City MADEIRA BEACH		State Florida		ZIP Code 33708	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL NUMBER 093115608580000940					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>27.80043</u> Long. <u>-82.79712</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983					
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.					
A7. Building Diagram Number <u>8</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>951</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>28</u>					
c) Total net area of flood openings in A8.b <u>700</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>N/A</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>					
c) Total net area of flood openings in A9.b <u>N/A</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number CITY OF MADEIRA BEACH 125127			B2. County Name PINELLAS COUNTY		B3. State Florida
B4. Map/Panel Number 12103C0191	B5. Suffix G	B6. FIRM Index Date 08/18/2009	B7. FIRM Panel Effective/ Revised Date 09/03/2003	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 10 FT.
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: <u>N/A</u> <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

**ELEVATION CERTIFICATE**

OMB No. 1660-0008  
Expiration Date: November 30, 2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 14830 N. BAYSHORE DRIVE			Policy Number:
City MADEIRA BEACH	State Florida	ZIP Code 33708	Company NAIC Number

**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. 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 C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: PINELLAS CO. B.M. AG5434 Vertical Datum: NAVD 1988

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE.


Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 3.6  feet  meters
- b) Top of the next higher floor 5.4  feet  meters
- c) Bottom of the lowest horizontal structural member (V Zones only) N.A  feet  meters
- d) Attached garage (top of slab) N.A  feet  meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 4.1  feet  meters
- f) Lowest adjacent (finished) grade next to building (LAG) 3.6  feet  meters
- g) Highest adjacent (finished) grade next to building (HAG) 3.8  feet  meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support N.A  feet  meters

**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 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.

Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  Check here if attachments.

Certifier's Name CLYDE MCNEAL	License Number LB 8111
Title SURVEYOR	
Company Name NEXGEN SURVEYING, LLC.	
Address 5601 CORPORATE WAY, SUITE 103	
City WEST PALM BEACH	State Florida
	ZIP Code 33407
Signature 	Date 08/02/2019
	Telephone (561) 508-6272

**Clyde O. McNeal**  
Digitally signed by Clyde O. McNeal  
Date: 2019.08.02 11:42:26 -04'00'

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)

Latitude/Longitude in A5 derived from Google Maps. Machinery/Equipment in C2e is an A/C Pad.

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
 Expiration Date: November 30, 2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 14830 N. BAYSHORE DRIVE			Policy Number:
City MADEIRA BEACH	State Florida	ZIP Code 33708	Company NAIC Number

**SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED)  
 FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ N . A \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ N . A \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_ N . A \_\_\_\_\_  feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_ N . A \_\_\_\_\_  feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ N . A \_\_\_\_\_  feet  meters  above or  below the HAG.
- E5. 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. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative's Name

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_  
 Florida

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments

Check here if attachments.

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expiration Date: November 30, 2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 14830 N. BAYSHORE DRIVE			Policy Number:
City MADEIRA BEACH	State Florida	ZIP Code 33708	Company NAIC Number

## 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. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

- G1.  The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by 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–G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
-------------------	------------------------	---

- G7. This permit has been issued for:       New Construction     Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name	Title
Community Name	Telephone
Signature	Date

Comments (including type of equipment and location, per C2(e), if applicable)

Check here if attachments.

**ELEVATION CERTIFICATE**

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

OMB No. 1660-0008  
Expiration Date: November 30, 2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 14830 N. BAYSHORE DRIVE			Policy Number:
City MADEIRA BEACH	State Florida	ZIP Code 33708	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One Caption Photo Taken 07/31/2019 "Front View"



Photo Two Caption Photo Taken 07/31/2019 "Rear View"



**ELEVATION CERTIFICATE**

**BUILDING PHOTOGRAPHS**

Continuation Page

OMB No. 1660-0008  
Expiration Date: November 30, 2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 14830 N. BAYSHORE DRIVE			Policy Number:
City MADEIRA BEACH	State Florida	ZIP Code 33708	Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo One Caption Photo Taken 07/31/2019 "Side View"



Photo Two Caption Photo Taken 07/31/2019 "Side View with A/C"

# ELEVATION CERTIFICATE

**Important:** Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name ARLENE GOCKEN				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 14830 N. BAYSHORE DRIVE				Company NAIC Number:	
City MADEIRA BEACH		State Florida		ZIP Code 33708	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL NUMBER 093115608580000940					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>27.80043</u> Long. <u>-82.79712</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983					
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.					
A7. Building Diagram Number <u>8</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>951</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>28</u>					
c) Total net area of flood openings in A8.b <u>700</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>N/A</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>					
c) Total net area of flood openings in A9.b <u>N/A</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number CITY OF MADEIRA BEACH 125127			B2. County Name PINELLAS COUNTY		B3. State Florida
B4. Map/Panel Number 12103C0191	B5. Suffix G	B6. FIRM Index Date 08/18/2009	B7. FIRM Panel Effective/ Revised Date 09/03/2003	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 10 FT.
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: <u>N/A</u> <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

**ELEVATION CERTIFICATE**

OMB No. 1660-0008  
Expiration Date: November 30, 2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 14830 N. BAYSHORE DRIVE			Policy Number:
City MADEIRA BEACH	State Florida	ZIP Code 33708	Company NAIC Number

**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. 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 C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: PINELLAS CO. B.M. AG5434 Vertical Datum: NAVD 1988

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE.


Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 3.6  feet  meters
- b) Top of the next higher floor 5.4  feet  meters
- c) Bottom of the lowest horizontal structural member (V Zones only) N.A  feet  meters
- d) Attached garage (top of slab) N.A  feet  meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 4.1  feet  meters
- f) Lowest adjacent (finished) grade next to building (LAG) 3.6  feet  meters
- g) Highest adjacent (finished) grade next to building (HAG) 3.8  feet  meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support N.A  feet  meters

**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 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.

Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  Check here if attachments.

Certifier's Name CLYDE MCNEAL	License Number LB 8111
Title SURVEYOR	
Company Name NEXGEN SURVEYING, LLC.	
Address 5601 CORPORATE WAY, SUITE 103	
City WEST PALM BEACH	State Florida
	ZIP Code 33407
Signature 	Date 08/02/2019
	Telephone (561) 508-6272

**Clyde O. McNeal**  
Digitally signed by Clyde O. McNeal  
Date: 2019.08.02 11:42:26 -04'00'

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)

Latitude/Longitude in A5 derived from Google Maps. Machinery/Equipment in C2e is an A/C Pad.







## BUILDING PHOTOGRAPHS

OMB No. 1660-0008  
Expiration Date: November 30, 2018

### ELEVATION CERTIFICATE

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 14830 N. BAYSHORE DRIVE			Policy Number:
City MADEIRA BEACH	State Florida	ZIP Code 33708	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One Caption Photo Taken 07/31/2019 "Front View"



Photo Two Caption Photo Taken 07/31/2019 "Rear View"

# BUILDING PHOTOGRAPHS

OMB No. 1660-0008  
Expiration Date: November 30, 2018

## ELEVATION CERTIFICATE

Continuation Page

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 14830 N. BAYSHORE DRIVE			Policy Number:
City MADEIRA BEACH	State Florida	ZIP Code 33708	Company NAIC Number

*If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.*



Photo One Caption Photo Taken 07/31/2019 "Side View"



Photo Two Caption Photo Taken 07/31/2019 "Side View with A/C"



