



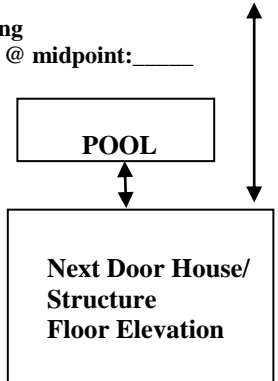
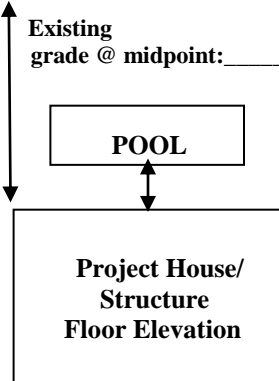
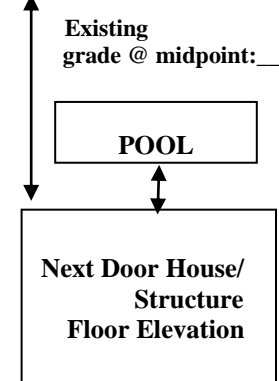
City of Treasure Island

120 108th Avenue
 Treasure Island, FL 33706-4702
 (727) 547-4575
 Fax (727) 547-4584

ELEVATION WORKSHEET

**For construction that raises the elevation of the seawall, cap,
 or raises the grade of the site, or that which brings in fill to the site.**

Owners Name: _____ Address: _____

Next Door Existing Seawall Elevation _____	Project Existing Seawall Elevation _____ + increased elevation: _____ = proposed new elevation: _____	Next Door Existing Seawall Elevation _____
Seawall _____		_____ Seawall
Existing grade @ midpoint: _____ 	Existing grade @ midpoint: _____ 	Existing grade @ midpoint: _____ 
X _____ X _____ Back of Curb Elevation _____ Centerline Elevation of Street _____	X _____ X _____ Back of Curb Elevation _____ Centerline Elevation of Street _____	X _____ X _____ Back of Curb Elevation _____ Centerline Elevation of Street _____

*****IDENTIFY ANY RETAINING WALLS AND THEIR HEIGHT*****

Contractor Name: _____ License # _____

Contractor Address: _____

Contractor Phone #: _____ Contractor's Email: _____

Contractor Signature: _____ Date: _____

State of Florida
 County of Pinellas

The foregoing instrument was acknowledged before me this _____ day of _____,
 20_____.

Notary Public
 Personally known _____ Produced ID _____
 Type of ID Produced _____

_____ Date