U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

SECTION A – PROPERTY INFORMATION			OR INSURANCE COMPANY USE
A1. Building Owner's Name EDWARD J. & TERRY A. KOLODZIESKI			olicy Number:
Building Street Address (including Apt., Unit, Suite, 550 BAYOU HAMMOCK ROAD	and/or Bldg. No.) or P.O. Route and Box No). C	ompany NAIC Number:
City LONGBOAT KEY	State FL ZIP Code 34	1228	
A3. Property Description (Lot and Block Numbers, Tax A PARCEL OF LAND IN SECTION 22, TOWNSHIP 35		N #7832500008	
 A4. Building Use (e.g., Residential, Non-Residential, Ad A5. Latitude/Longitude: Lat. 27°25′58.154″ Long. 82°4 A6. Attach at least 2 photographs of the building if the C A7. Building Diagram Number 1B A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent g A8. Total enterse of flood openings in A8 by A8	$\begin{array}{c} 0 \text{'}41.926"\\ \text{Certificate is being used to obtain flood insura}\\ & \qquad $	ance. uilding with an attacher uare footage of attacher nber of permanent flor nin 1.0 foot above adje	ed garage <u>617</u> sq ft od openings in the attached garage acent grade <u>4</u>
c) Total net area of flood openings in A8.b d) Engineered flood openings?		al net area of flood op gineered flood openin	
SECTION B - F	LOOD INSURANCE RATE MAP (FIRM) INFORMATION	
B1. NFIP Community Name & Community Number TOWN OF LONGBOAT KEY & 125126	B2. County Name MANATEE	B	3. State L
	Index Date B7. FIRM Panel 5/1983 Effective/Revised Date 05/18/1992	B8. Flood Zone(s) A13	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
B11. Indicate elevation datum used for BFE in Item B9: B12. Is the building located in a Coastal Barrier Resource Designation Date: N/A	es System (CBRS) area or Otherwise Protection CBRS OPA		
	LDING ELEVATION INFORMATION (S	URVEY REQUIRE	D)
C1. Building elevations are based on:	action Drawings*	Construction*	☐ Finished Construction
 Elevations – Zones A1–A30, AE, AH, A (with BFE), very below according to the building diagram specified in Benchmark Utilized: USCGS BM 13 84 B07 		E, AR/A1–A30, AR/AF	H, AR/AO. Complete Items C2.a-h
Indicate elevation datum used for the elevations in it Datum used for building elevations must be the same	ems a) through h) below. NGVD 1929	/	er/Source:ne measurement used
a) Top of bottom floor (including basement, crawlspa	ice, or enclosure floor) 4.5	111	Figet Meters
b) Top of the next higher floor	<u>11.3</u>		Viget OF I meters 200
 c) Bottom of the lowest horizontal structural member d) Attached garage (top of slab) 	10) The state of t	The second secon	Tree! > Prileters
e) Lowest elevation of machinery or equipment servi (Describe type of equipment and location in Comm	6.2 cing the building N/A.	The second secon	feet meters
f) Lowest adjacent (finished) grade next to building (feet meters
g) Highest adjacent (finished) grade next to buildingh) Lowest adjacent grade at lowest elevation of deck	(HAG) <u>3.3</u>		feet meters
	106 4 1100	For Sand Line 1	feet meters
	RVEYOR, ENGINEER, OR ARCHITECT		
This certification is to be signed and sealed by a land su information. I certify that the information on this Certifica I understand that any false statement may be punishable.	te represents my best efforts to interpret the	data available.	1 8 12 VI
 ☐ Check here if comments are provided on back of fo ☐ Check here if attachments. 	rm. Were latitude and longitude in Secti licensed land surveyor? Ye		Muta
Certifier's Name MARTIN S. BRITT	License Number LS	S 5538	1/16Hzar4
ie PRESIDENT Company	Name MSB SURVEYING, INC.		STATE
Address 960 LENA LANE City SARA	ASOTA State FL ZIP Co	ode 34240	- 255550
Signature Date 1/07	7/2014 Telephone 941-34	1-9935	SAVE

IMPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6550 BAYOU HAMMOCK ROAD				Policy Number:	
City LONGBOAT KEY	Sta	ate FL ZIP Code 34	1228	Company NAIC Number:	
SEC.	TION D - SURVEYOR, ENGINEER,	OR ARCHITECT CER	TIFICATION (CO	ONTINUED)	
Copy both sides of this Elevation	Certificate for (1) community official, (2) in	nsurance agent/company,	and (3) building o	wner.	
Comments FOR COMMENTS S	SEE PAGE 3.			1960	
Signature Mut 5	BAT	Date 1/07/2014			
SECTION E – BUILDING	ELEVATION INFORMATION (SURV	YEY NOT REQUIRED)	FOR ZONE AO	AND ZONE A (WITHOUT BFE)	
	FE), complete Items E1–E5. If the Certifica				
grade (HAG) and the lower a) Top of bottom floor (incl b) Top of bottom floor (incl E2. For Building Diagrams 6–9 (elevation C2.b in the diag E3. Attached garage (top of sla E4. Top of platform of machine E5. Zone AO only: If no flood	uding basement, crawlspace, or enclosure uding basement, crawlspace, or enclosure with permanent flood openings provided rams) of the building is	e) is e) is in Section A Items 8 and// feet meters ab ers above or belo g is feet e bottom floor elevated in	feet meters [feet meters [or 9 (see pages 8- ove or below to ow the HAG. cm meters a accordance with to	□ above or □ below the HAG. □ above or □ below the LAG9 of Instructions), the next higher floor he HAG. bove or □ below the HAG.	
	TION F - PROPERTY OWNER (OR	•		TIFICATION	
	uthorized representative who completes S statements in Sections A, B, and E are co			EMA-issued or community-issued BFE)	
Property Owner's or Owner's Au	thorized Representative's Name			s Saeliji kultu u sauči u	
Address		City	State	ZIP Code	
Signature		Date	Telepl	hone	
Comments	×				
				☐ Check here if attachmer	
	1			Officer nere if attachmen	
he local official who is authorized	SECTION G – COMMUN by law or ordinance to administer the comm			an complete Sections A. B. C. (or F.), and	
f this Elevation Certificate. Comple	ete the applicable item(s) and sign below. C	check the measurement us	sed in Items G8–G	10. In Puerto Rico only, enter meters.	
1. The information in Section is authorized by law to compare the compared by the compared to	on C was taken from other documentation certify elevation information. (Indicate the	that has been signed and source and date of the ele	d sealed by a licer evation data in the	nsed surveyor, engineer, or architect whe Comments area below.)	
	mpleted Section E for a building located in			nity-issued BFE) or Zone AO.	
3. The following information	on (Items G4–G10) is provided for commun				
G4. Permit Number	G5. Date Permit Issued	G6. Date	e Certificate Of Co	mpliance/Occupancy Issued	
G7. This permit has been issued	for: New Construction S	Substantial Improvement			
38. Elevation of as-built lowest f	loor (including basement) of the building:	fee	meters	Datum	
39. BFE or (in Zone AO) depth of	of flooding at the building site:	fee	t meters	Datum	
G10. Community's design flood e	levation:	fee	t meters	Datum	
Local Official's Name	·	Title		e segment	
Community Name		Telephone			
Signature		Date			
Signature Comments		Date			