FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires July 31, 2002

Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: **BUILDING OWNER'S NAME** Policy Number Emerald Pointe Development Inc. BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 1906 Harbour Links Circle CITY STATE ZIP CODE Longboat Key 34228 FL PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) CD Unit 14, Emerald Pointe South BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): (##° - ##' - ##.##" or ##.####") □ NAD 1927 □ NAD 1983 USGS Quad Map Other: SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME** B3 STATE Longoat Key 125126 Sarasota **B4. MAP AND PANEL** B5. SUFFIX **B7. FIRM PANEL** B9. BASE FLOOD ELEVATION(S) NUMBER **B6. FIRM INDEX DATE** EFFECTIVE/REVISED DATE B8. FLOOD ZONE(S) (Zone AO, use depth of flooding) 0010 5/18/92 8/15/83 A-13 110 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. ☐ FIS Profile **⊠** FIRM Community Determined Other (Describe): ☐ NAVD 1988 ☐ Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: X NGVD 1929 B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on:
Construction Drawings* ☐ Building Under Construction* *A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number 3 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) C3. 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 C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion. Datum NGVD1929 Conversion/Comments Elevation reference mark used Site B Does the elevation reference mark used appear on the FIRM? Yes No o a) Top of bottom floor (including basement or enclosure) 11. 4 ft.(m) **Embossed Seal** o b) Top of next higher floor 22.8ft.(m) o c) Bottom of lowest horizontal structural member (V zones only) <u>n/a</u>. __ft.(m) o d) Attached garage (top of slab) 8. 4 ft.(m) o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 14.4ft.(m) o f) Lowest adjacent (finished) grade (LAG) 6.6 ft.(m) o g) Highest adjacent (finished) grade (HAG) 8. 4 ft.(m) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 4 o i) Total area of all permanent openings (flood vents) in C3.h 512 sq. in. (sq. cm) 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 in Sections A, B, and C 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. CERTIFIER'S NAME William R. Knight, Jr. LICENSE NUMBER LS4212 TITLE COMPANY NAME Sampey and Burchett, Inc. **ADDRESS** CITY STATE ZIP CODE 5967 Cattlemen La Sarasota EL 342232 SIGNATURE DATE TELEPHONE 941-342-0349 1/28/02

DOILDING STREET MODRESS HIGHE	es, copy the corresponding information from \$ Ing Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND I			or Insurance Company Use Policy Number
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CITY Longboot Koy	STATE FL	ZIP COI 34228	DE C	Company NAIC Number
Longboat Key	SECTION D - SURVEYOR, ENGINEER, OR ARG		ONTINI IEDI	
			JATHOLD)	
• •	Certificate for (1) community official, (2) insurance agent	company, and (3) building owner.		
COMMENTS				
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SECTION E - BUILDI	NG ELEVATION INFORMATION (SURVEY NO	T REQUIRED) FOR ZONE AC	AND ZONE	
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natural grade, if available).				
	openings (see page 7), the next higher floor or elevated	floor (elevation b) of the building is	ft.(m)in.(cm) above the highest ad
grade. Complete items C3.h an	nd C3.i on front of form.			
E4. For Zone AO only: If no flood d	epth number is available, is the top of the bottom floor ϵ	levated in accordance with the con	nmunity's floodpl	lain management ordinan
	vn. The local official must certify this information in Sec			
5	SECTION F - PROPERTY OWNER (OR OWNER	S'S REPRESENTATIVE) CER	TIFICATION	
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