## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

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

## **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1-7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: Policy Number BUILDING OWNER'S NAME THOMAS & JANE DEWEY Company NAIC Number BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 3320 SABAL COVE LANE ZIP CODE STATE CITY **FLORIDA** LONGBOAT KEY PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 8, SABAL COVE, PLAT BOOK 33, PAGES 48-48C, PUBLIC RECORDS OF SARASOTA COUNTY, FLORIDA BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL SOURCE: GPS (Type): HORIZONTAL DATUM: LATITUDE/LONGITUDE (OPTIONAL) ☐ USGS Quad Map Other: □ NAD 1927 □ NAD 1983 ( ##° - ##' - ##.##f" or ##.#####") SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B3. STATE B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME **FLORIDA** SARASOTA TOWN OF LONGBOAT KEY - 125126 B9. BASE FLOOD ELEVATION(S) **B7. FIRM PANEL B4. MAP AND PANEL B5. SUFFIX** B8. FLOOD ZONE(S) (Zone AO, use depth of flooding) EFFECTIVE/REVISED DATE **B6. FIRM INDEX DATE** NUMBER 08/15/83 A13 05/18/92 В 125126-0010 B10. Indicate the source of the Base Flood Elevation (BFE) dafa or base flood depth entered in B9. Other (Describe): **⊠** FIRM Community Determined FIS Profile ☐ NAVD 1988 ☐ Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: X NGVD 1929 SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) ☐ Building Under Construction\* C1. Building elevations are based on: ☐ Construction Drawings\* \*A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number 1 (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 NGVD 1929 Conversion/Comments N/A Elevation reference mark used COBM Does the elevation reference mark used appear on the FIRM? Yes No a) Top of bottom floor (including basement or enclosure) 6. 77 fL(m) Seal 11.47 ft(m) □ b) Top of next higher floor Embossed and Date ☐ c) Bottom of lowest horizontal structural member (V zones only) N. Aft(m) 6. 77 ft.(m) d) Attached garage (top of slab) a e) Lowest elevation of machinery and/or equipment Signature, icense Number 10.76 ft(m) servicing the building (Describe in a Comments area) The following of the first transfer of 4.4ft.(m) q) Highest adjacent (finished) grade (HAG) 6. 7 ft.(m) h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade -LS 2915 3/28/01 i) Total area of all permanent openings (flood vents) in C3.h - sq. in. (sq. cm) SECTION D - SURVEYOR, ENCINEER, 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. They are selected. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. CERTIFIER'S NAME: CALVIN J. REED LICENSE NUMBER: LS 2915 TITLE: PROFESSIONAL LAND SURVEYOR COMPANY NAME: CALVIN REED SURVEYING, INC. ADDRESS: 4600 TRI-PAR DRIVE CITY: SARASOTA STATE: FLORIDA ZIP CODE: 34234 SIGNATURE DATE: March 28, 2001 TELEPHONE: 941-351-2317

IMPORTANT: In these spaces, copy the	IMPORTANT: In these spaces, copy the corresponding information from Section A			
BUILDING STREET ADDRESS (Including Apt.,	Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BO	X NO.		Policy Number
3320 SABAL COVE LANE	STATE		ZIP CODE	Company NAIC Number
LONGBOAT KEY	FLORID			
	ECTION D - SURVEYOR, ENGINEER, OR ARC			
	e for (1) community official, (2) insurance agent/co	ompany, and (3) building o	owner.	
COMMENTS NOTE: IN SECTION C, TOP OF BOTTOM FLC	OOR IS GARAGE LEVEL, NEXT HIGHER FLOOR APP	PEARS TO BE THE PRIMAF	RY LIVING AREA; ELEV.	OF
LOWEST VISIBLE MACH/EQUIP. IS ACCUNIT	Γ.			
			T AO AND ZONE A	Check here if attachment
SECTION E - BUILDI	NG ELEVATION INFORMATION (SURVEY NO mplete Items E1 through E4. If the Elevation Cert	T REQUIRED) FOR ZON	NE AO AND ZONE A	en for a LOMA or LOMP E
represents the building, provide a sketch 22. The top of the bottom floor (including bar natural grade, if available). 33. For Building Diagrams 6-8 with opening grade. Complete items C3 h and C3 is	sement or enclosure) of the building is ft.(m) is (see page 7), the next higher floor or elevated fi	_in.(cm)  above or above or or (elevation b) of the bu	below (check one)	the highest adjacent grade. (Use n.(cm) above the highest adjacent
Yes No Unknown. The	e local official must certify this information in Section	on G.		
	SECTION F - PROPERTY OWNER (OR OWNE	R'S REPRESENTATIVE	) CERTIFICATION	L. A. FTMA insued or community
The property owner or owner's authorized issued REF) or Zone AO must sign here.	representative who completes Sections A, B, C ( The statements in Sections A, B, C, and E are co	(Items C3.h and C3.i only) prrect to the best of my kn	), and E for Zone A (Wit owledge.	nour a FEMA-ISSUED OF CONTINUING-
PROPERTY OWNERS OR OWNERS AUTH				
8		CITY	STATE	ZIP CODE
ADDRESS			TELEF	PHONE
SIGNATURE		DATE		110112
COMMENTS			8	
				Check here if attachmer
			W.)	
	SECTION G - COMMUNITY IN	FORMATION (OPTIONA	*L)	
Certificate. Complete the applicable item(s G1. The information in Section C was t state or local law to certify elevation G2. A community official completed Se	or ordinance to administer the community's floodpl	ain management ordinan ned and embossed by a l ne elevation data in the Co n FEMA-issued or commu gement purposes.	ice can complete Section licensed surveyor, engionments area below.) inity-issued BFE) or Zo	neer, or architect who is authorized ne AO.
Certificate. Complete the applicable item(s G1. The information in Section C was t state or local law to certify elevation G2. A community official completed Se	or ordinance to administer the community's floodpl s) and sign below. taken from other documentation that has been sig on information. (Indicate the source and date of the ection E for a building located in Zone A (without a	ain management ordinan ned and embossed by a l ne elevation data in the Co n FEMA-issued or commu gement purposes.	ice can complete Section licensed surveyor, engionments area below.) inity-issued BFE) or Zo	neer, or architect who is authorized
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