U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

OMB No. 1660-0008

Important: Read the instructions on pages 1–9.	Expiration Date: July 31, 2015					
SECTION A - PROPERTY INFORMATION	FOR INSURANCE COMPANY USE					
A1. Building Owner's Name MARILYNN ERICKSON	Policy Number:					
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3425 WINDING OAKS DRIVE	Company NAIC Number:					
City LONGBOAT KEY State FL ZIP Code 34228						
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) UNIT 13 WINDING OAKS CONDOMINIUM						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Latitude/Longitude: Lat. 27 22 38.06 N Long. 62 37 20.49 W Horizontal Datum: NAD 1927 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 1B						
A8. For a building with a crawispace or enclosure(s): a) Square footage of crawispace or enclosure(s) b) Number of permanent flood openings in the crawispace or enclosure(s) within 1.0 foot above adjacent grade c) Total net area of flood openings? A9. For a building with an attata and square footage of attatata and square footage of attatatata and square footage of attatatatata and square footage of attatatatatatatatatatatatatatatatatata	ched garage 420 sq ft flood openings in the attached garage idjacent grade 0 sq in					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATIO	N					
B1. NFIP Community Name & Community Number LONGBOAT KEY B2. County Name MANATEE & SARASOTA	B3. State FL					
B4. Map/Panel Number B5. Suffix B 66. FIRM Index Date 1251260010 B5. Suffix B 5/18/1992 B7. FIRM Panel Effective/Revised Date 8/15/1983 B8. Flood Zone(s) A 13	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)					
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? No Designation Date: OPA						
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: GPS READINGS (1000) Vertical Datum: NGVD 1929 VERTCON 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.					
b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) 8.33						
(Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) g) Highest adjacent (finished) grade next to building (HAG) 10.5	⊠ feet ☐ meters ☑ feet ☐ meters					
	☑ 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. Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a	PSM - 5233					
☐ Check here if attachments.	- C733					
Certifier's Name JOHN D. O'NEILL License Number PSM5233	_ 3 2 3 2					
Title LAND SURVEYOR Company Name JOHN D. O'NEILL Address P.O. BOX 881 City ONECO State FL ZIP Code 34264	_					
A K	_					
Date 5/14/2013 Telephone 941-345-5726						

ELEVATION CERTIFICATE, page 2					
					NSURANCE COMPANY USE
					Number:
City LONGBOAT KEY	State FL :	ZIP Code 3	4228	Comp	any NAIC Number:
SECTION D - SURVEYO	R, ENGINEER, OR ARCHIT	ECT CER	TIFICATION (C	ONTIN	IUED)
Copy both sides of this Elevation Certificate for (1) comm	nunity official, (2) insurance age	nt/company	and (3) building	owner.	
Comments LOWEST EQUIPMENT IS A/C UNIT					
Signature	Date (5/14/2013			
SECTION F. BUILDING ELECATION INTO					
SECTION E - BUILDING ELEVATION INFOR	MATION (SURVEY NOT RE	QUIRED)	FOR ZONE AC	DAND	ZONE A (WITHOUT BFE)
For Zones AO and A (without BFE), complete Items E1- and C. For Items E1–E4, use natural grade, if available. E1. Provide elevation information for the following and grade (HAG) and the lowest adjacent grade (LAG) a) Top of bottom floor (including basement, crawls b) Top of bottom floor (including basement, crawls b) Top of bottom floor (including basement, crawls E2. For Building Diagrams 6–9 with permanent flood of (elevation C2.b in the diagrams) of the building is E3. Attached garage (top of slab) is E4. Top of platform of machinery and/or equipment see E5. Zone AO only: If no flood depth number is availabed ordinance? Yes No Unknown. The ISECTION F – PROPERTY The property owner or owner's authorized representative or Zone AO must sign here. The statements in Sections Address Signature Comments	Check the measurement used. check the appropriate boxes to be pace, or enclosure) is pace, or enclosure) is pace, or enclosure) is penings provided in Section A It feet meters above ryicing the building is le, is the top of the bottom floor ocal official must certify this information ocal official must certify this information ocal official must certify the information ocal official must be occurred to the best ocal must be occurred to the best occurred to the	In Puerto R show wheth ems 8 and/o ters abo or belo feet elevated in a rmation in S	ico only, enter me er the elevation is feet	above or he comr	or below the highest adjacent re or below the HAG. re or below the LAG. structions), the next higher floor below the HAG. below the HAG. munity's floodplain management
					Check here if attachments
SECTION	G - COMMUNITY INFORM	ATION (O	PTIONAL)		
The local official who is authorized by law or ordinance to ad of this Elevation Certificate. Complete the applicable item(s) G1. The information in Section C was taken from oth is authorized by law to certify elevation information. A community official completed Section E for a because of the community official completed Section E for a because of the community of the community of the complete of the community of the community of the complete of the community of the communit	minister the community's floodple and sign below. Check the meas er documentation that has been on. (Indicate the source and dat wilding located in Zone A (withou	ain manager urement use signed and e of the elec- ut a FEMA-l	nent ordinance ca ed in Items G8-G' sealed by a licen ration data in the ssued or commur	10. In Pu sed sun Comme	erto Rico only, enter meters. veyor, engineer, or architect who ints area below.)
G4. Permit Number G5. Date Permit	t Issued	G6. Date	Certificate Of Cor	npliance	/Occupancy Issued
37. This permit has been issued for: New Constru	uction Substantial Impr	ovement			
38. Elevation of as-built lowest floor (including basement)		☐ feet	meters	Datum	1
39. BFE or (in Zone AO) depth of flooding at the building	site:	feet feet	☐ meters	Datum	1
G10. Community's design flood elevation:		☐ feet	meters	Datum	1
Local Official's Name	Title				
Community Name	Telep	ohone	2.1		
Signature	Date	×	* 1.		
Comments					
,					Check here if attachments.

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Building Photographs See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. 3425 WINDING OAKS DR.	Policy Number:		
City LONGBOAT KEY	State FL	ZIP Code 34228	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.

