U. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

ELEVATION CERTIFICATE

OMB No. 1660-0008

| SECTION A - PROPERTY INFORMATION FOR RS. REARNER M BROWN, CO-TRUSTERS A1. Building Owner's Name JOHN S. & JEANNE M BROWN, CO-TRUSTERS A2. Building Street Address (including Apt., Unit, Sulls, and/or Big, Na.) or P.O. Route and Box No. Company NAIC Number: A2. Building Street Address (including Apt., Unit, Sulls, and/or Big, No.) or P.O. Route and Box No. CRY LONGEOUT REY Stafe FL ZIP Code \$4228 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) MINITER WINDING OAKS CONDOMINIUM A4. Building Use (a.g., Residential, Non-Residential, Adolton, Accessory, etc.) RESIDENTIAL A5. Albach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A6. Eathburst-Inquiries: Let. 2722-4274 (1 no. 98, 237, 186.11W A6. Adach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diginales: Let. 272-4274 (274 N 1 no. 98, 237, 186.11W A6. For a building with an attached garage. B7. Square floodage of cramisposer or enclosure(e): B7. Square floodage of cramisposer or enclosure(e): B8. Square floodage of cramisposer or enclosure(e): B9. Square floodage of cramisposer or enclosure(e): B9. Square floodage of cramisposer or enclosure(e): B1. Neight Community Name & Community Number B2. Courty Name SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. Neight Community Name & Community Number B2. Sulfix B3. Stafe F1. Stafe of Community Number B3. Stafe F1. Stafe of Community Number B4. MappFanel Number B5. Sulfix B6. First Marker Date B7. First M Panel B8. Base Flood Elevation (First Marker Date B7. First M Panel B8. Base Flood Elevation (First Marker Date B7. First M Panel B8. Base Flood Elevation (First Marker Date | National Field Insurance Proj | gram | Important: R | lead th | e instructions o | n pag | jes 1–9. | Expira | tion Date: July 31, 2015 |
|---|--|---|---|---|---|--|---|----------------------------|----------------------------------|
| A2. Building Street Address (Including Apt., Unit, Sulto, and/or Bidg, No.) or P.O. Routs and Box No. Company NAIC Number: A447 WND/NG OAKS DRIVE City LONS(BOAT KEY State Ft. ZiP Code 34228 A5. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) NUMTE AV WND/NG OAKS COMO/INIUM A6. Building Date (e.g., Reciterital, Non-Residential, Addition, Accessory, etc.) BESIDENTIAL A6. Albach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Numbers (1) A8. Possignary Numbers (1) A8. Possignary Numbers (1) A8. Possignary Numbers (1) A9. For a building with a crawkspace or enclosure(e): B1. NETPC Community (1) SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NETPC Community Number (1) B1. NETPC Community Number (1) B2. County Name B3. State (1) B4. Mapi-Panel Number (1) B5. Suffix (1) B6. FIRM Index Date (1) B7. FIRM Panel (1) B7. FIRM Panel (1) B8. Base Flood Elevation(s) (Zone 1/25/12600) B7. FIRM Panel (1) B11. Indicate selection datum used for BFE in Item B12: (2) NOVD 122: (2) B12. Is the building boated in a Coastal Barrier Resources System (1) B14. Indicate selection datum used for FFE in Item B12: (2) NOVD 122: (2) B15. Building scaled in a Coastal Barrier Resources System (1) B16. Indicate selection datum used for BFE in Item B12: (2) NOVD 122: (3) B17. Indicate selection datum used for FFE in Item B12: (3) NOVD 122: (3) B18. Indicate selection datum used for BFE in Item B12: (3) NOVD 122: (3) B19. Indicate selection datum used for BFE in Item B12: (3) NOVD 122: (3) B19. Indicate selection datum used for BFE in Item B12: (3) NOVD 122: (3) B19. Indicate selection datum used for BFE in Item B12: (3) NOVD 122: (3) B19. Indicate selection datum used for BFE in Item B12: (3) NOVD 122: (4) | | | | | | ORM | ATION | FOR IN | SURANCE COMPANY USE |
| State Part Part State Part Pa | A1. Building Owner's Nan | ne JOHN B. & J | EANNE M BROWN, | CO=TR | USTEE'S | | | Policy N | lumber. |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Logal Description, etc.) UNIT 24 WINDING OAKS CONDOMINTUM A. Building be (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Lattacket Longitude: Latt 27.22 42/14 Long. 22.37 15.01 W A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 12 A8. Extra building with a crawspace or enclosure(e): a) Square flootage of crawspace or enclosure(e): a) Square flootage of crawspace or enclosure(e): b) Number of permanent flood openings in Rab. c) Total and area of flood openings in Rab. c) Total and area of flood openings in Rab. c) Total and area of flood openings in Rab. c) Engineered flood openings | | | ., Unit, Suite, and/or | Bldg. No | o.) or P.O. Route and | Box No |). | Compar | ny NAIC Number: |
| A Bibliship Use (a., Residential, Mon-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Lathride/Longhude: Lat. 27.22.43.74.N. Long. 82.37.18.01.W A6. Attach at least 2 photographs of the biblishing if the Certificate is being used to obtain flood insurrance. A7. Biblishing User an investigation of the process of the biblishing of the Certificate is being used to obtain flood insurrance. A7. Biblishing User an investigation of the process of the biblishing of the Certificate is being used to obtain flood insurrance. A8. For a building with a crawkspace or enclosure(s): a) Square flotage of distached garage: a) Square flotage of distac | City LONGBOAT KE | Y | | - | State FL ZIP C | ode 34 | 4228 | | |
| A6. Latch the sets 2 photographs of the bulling if the Certificate is being used to obtain flood insurance. A7. Bulliding Diagram Number 18. A8. For a bulliding with a crawspace or enclosure(s): a) Square flotage of tackched garage c) Total net area of flood openings in Na. b) Number of permanent flood openings in Na. c) Total net area of flood openings in Na. SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name MANATEE & SARASOTA B3. State FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B4. MapPanel Number B5. Suffix B6. FIRM Index Date FfetUniveRevised Date Zona(s) A7. State B9. Bits Flood Zona(s) A7. State B9. Bits Flood Zona(s) A7. In the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item 89. FFORMS STATE STATE B11. Inclicate elevation datum used for BFE in Item 88: S INVO 1929 B12. Is the bullding located in a Coastal Barrier Resources System (EBRS) area or Observative Protected Area (OPA)? SECTION C = BUILDINN ELEVATION INFORMATION (SURVEY REQUIRED) C1. Bullding elevations are based on: C2. Elevations - Zonae A1-A3. AR. Al. Al. with BFE, V. V. V-V-30. V Vith BFE). AR. ARA, ARA, ARA, ARA, ARA, ARA, ARA, | A3. Property Description (UNIT 24 WINDING OAKS | Lot and Block No CONDOMINIUM | umbers, Tax Parcei I | Number, | Legal Description, et | c.) | | | |
| B1. NFIP Community Number | A5. Latitude/Longitude: Lat. 27 22 42.74 N Long. 82 37 19.01 W 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): B9. Square footage of crawispace or enclosure(s): B9. Square footage of crawispace or enclosure(s): B9. Square footage of attached garage: B9. Square footage of attached garage: B9. Number of permanent flood openings in the crawispace or enclosure(s) within 1.0 foot above adjacent grade B9. For a building with an attached garage: B9. Square footage of attached garage or enclosure(s) and the attached garage within 1.0 foot above adjacent grade B9. For a building with an attached garage: B9. Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade B9. For a building with an attached garage or enclosure(s) and square footage of attached garage within 1.0 foot above adjacent grade B9. For a building with an attached garage or enclosure(s) and square footage of attached garage or enclosure(s) and square footage of attached garage within 1.0 foot above adjacent grade or enclosure(s) and square footage of attached garage or enclosure(s) and square footage of attached garage within 1.0 foot above adjacent grade or enclosure(s) and square footage of attached garage or enclosure(s) | | | | | | | | |
| B4. Map.Panel Number B5. Suffix B6. FIRM Index Date B7. FIRN Period B8. Base Flood Elevation(s) (Zone 2/15/260010 B7. FIRN Period B8. Base Flood Elevation(s) (Zone 2/15/260010 B7. FIRN Period B8. Base Flood Elevation(s) (Zone 2/15/260010 B7. FIRN Period B8. Base Flood Elevation(s) (Zone 2/15/260010 B7. FIRN Period B8. Base Flood Elevation(s) (Zone 2/15/260010 B7. FIRN Period B8. Base Flood Elevation(s) (Zone 2/15/260010 B7. FIRN Period B8. Base Flood Elevation(s) (Zone 2/15/260010 B7. FIRN Period B8. Base Flood Elevation(s) (Zone 2/15/260010 B7. FIRN Period | | SEC | TION B - FLOOD | INSUR | ANCE RATE MAP | (FIRN | I) INFORMATIO | N | |
| 1251280010 B S/18/1992 Effective/Revised Date Zone(s) A (3) B (4) A (4) B (4) A (5) B (4) B (4) A (5) B (4) B (4 | | & Community I | Number | | | | | | • |
| FIS Profile FIS Profile FIRM Community Determined Other/Source: NAVD 1929 NAVD 1929 NAVD 1929 NAVD 1929 Yes No | | | | Date | Effective/Revised D | ate | Zone(s) | B9. E | O, use base flood depth) |
| C1. Building elevations are based on: | 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)? | | | | | | | | |
| *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/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) | | SECTIO | N C – BUILDING | ELEVA | TION INFORMATI | ON (S | URVEY REQUI | RED) | |
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 11.0 | *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 1938 Other/Source: | | | | | | | | |
| b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (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) h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 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 licensed land surveyor? Yes No Certifier's Name JOHN D. O'NEILL License Number PSM5233 Title LAND SURVEYOR Company Name JOHN D. O'NEILL License Number PSM5233 | Determ about of Dalamy | Cicrations must | De ule same as ulai | useu 101 | the Bra. | | Check | the meas | surement used. |
| (Describe type of equipment and location in Comments) 1) Lowest adjacent (finished) grade next to building (LAG) 2) Highest adjacent (finished) grade next to building (HAG) 3) Highest adjacent grade at lowest elevation of deck or stairs, including structural support 3) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 3) ECTION 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 licensed land surveyor? Check here if attachments. Certifier's Name JOHN D. O'NEILL License Number PSM5233 Title LAND SURVEYOR Company Name JOHN D. O'NEILL Address P.O. BOX 881 City ONECO State FL ZIP Code 34264 | b) Top of the next higher c) Bottom of the lowest I d) Attached garage (top e) Lowest elevation of m | r floor norizontal structu of slab) achinery or equi | ral member (V Zone | es only) | floor) | N.A N.A 8.33 | | ⊠ feet ⊠ feet ⊠ feet | ☐ meters ☐ meters ☐ meters |
| 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 licensed land surveyor? Yes No Certifier's Name JOHN D. O'NEILL License Number PSM5233 Title LAND SURVEYOR Company Name JOHN D. O'NEILL Address P.O. BOX 881 City ONECO State FL. ZIP Code 34264 | (Describe type of equ f) Lowest adjacent (finis g) Highest adjacent (finis | ipment and locat hed) grade next shed) grade next | tion in Comments) to building (LAG) to building (HAG) | _ | ng structural support | 8.0 10.5 | | ⊠ feet ⊠ feet | meters meters |
| 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 licensed land surveyor? Yes No Certifier's Name JOHN D. O'NEILL License Number PSM5233 Title LAND SURVEYOR Company Name JOHN D. O'NEILL Address P.O. BOX 881 City ONECO State FL ZIP Code 34264 | SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION | | | | | | | | |
| Address P.O. BOX 881 City ONECO State FL ZIP Code 34264 | information. I certify that the I understand that any false s Check here if comment Check here if attachme Certifier's Name JOHN D. O | information on to statement may be are provided on this. | his Certificate repres e punishable by fine n back of form. | sents my or impris Were lat licensed | best efforts to interpronment under 18 U.S titude and longitude in land surveyor? | et the of S. Code Section Yes | data evailable. e, Section 1001. on A provided by a | | Ps M 5233 |
| | | HI | | | | ZIP Co | de 34264 | | |
| | Signature de | RH . | Date 5/14/2013 | | | | | | |

| uilding Street Address (including Apt., Unit, Suite, and/o | | ection A | • | FURI | NSURANCE COMPANY USE | |
|---|---|-------------------------|--------------------------------------|-----------------------|---|--|
| <u> </u> | r Bldg. No.) or P.O. Route and B | Sox No. | | Policy | Number: | |
| ty LONGBOAT KEY | State FL ZI | P Code 3 | 4228 | Comp | any NAIC Number: | |
| SECTION D - SURVEYOR | , ENGINEER, OR ARCHITE | CT CER | TIFICATION (C | ONTIN | UED) | |
| opy both sides of this Elevation Certificate for (1) comm | unity official, (2) insurance agent | /company | and (3) building | owner. | | |
| omments LOWEST EQUIPMENT IS A/C UNIT | | | | | | |
| | | | | | | |
| gnature | Date 5/1 | 14/2013 | | | | |
| SECTION E - PUIII DING EL EVATION INFORM | ATION (CUDVEY NOT DE | NERE | | | | |
| SECTION E - BUILDING ELEVATION INFOR | ATION (SURVEY NOT REC | QUIRED) | FOR ZONE A | O AND | ZONE A (WITHOUT BFE) | |
| or Zones AO and A (without BFE), complete Items E1- | 5. If the Certificate is intended to | o support a | LOMA or LOMF | R-F requ | est, complete Sections A, B, | |
| nd C. For Items E1-E4, use natural grade, if available. | heck the measurement used. In | Puerto Ri | co only, enter me | eters. | | |
| Provide elevation information for the following and of grade (HAG) and the lowest adjacent grade (LAG). | | | er the elevation i | s above | or below the highest adjacent | |
| a) Top of bottom floor (including basement, crawlsp | ace, or enclosure) is | _ 🗆 | feet meters | abov | e or Delow the HAG. | |
| Top of bottom floor (including basement, crawlsp | ace, or enclosure) is | | eet meters | □ abov | e or D helow the LAG | |
| E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor | | | | | | |
| (elevation C2.b in the diagrams) of the building is feet ☐ meters ☐ above or ☐ below the HAG. E3. Attached garage (top of slab) is feet ☐ meters ☐ above or ☐ below the HAG. | | | | | | |
| E4. Top of platform of machinery and/or equipment servicing the building is feet _ meters _ above or _ below the HAG. | | | | | | |
| Zone AO only: If no flood depth number is available | , is the top of the bottom floor ele | evated in a | ccordance with t | he com | nunity's floodplain manageme | |
| ordinance? ∐ Yes ☐ No ☐ Unknown. The lo | cal official must certify this inform | nation in S | ection G. | | | |
| SECTION F - PROPERTY | OWNER (OR OWNER'S RE | PRESEN | TATIVE) CER | TIFICA | TION | |
| e property owner or owner's authorized representative Zone AO must sign here. The statements in Sections A | B, and E are correct to the best | d E for Zo | ne A (without a F wledge. | EMA-iss | ued or community-issued BFE | |
| perty Owner's or Owner's Authorized Representative's | Name | | | | | |
| dress | City | | State | | ZIP Code | |
| nature | Date | | Telep | none | | |
| mments | | | | | | |
| | | | | | | |
| | | | | | Check here if attachme | |
| SECTION (| - COMMUNITY INFORMA | TION (OI | PTIONAL) | | | |
| ocal official who is authorized by law or ordinance to adn s Elevation Certificate. Complete the applicable item(s) a | inister the community's floodplain nd sign below. Check the measur | n managen rement use | nent ordinance ca d in Items G8–G | n compli 10. In Pu | ete Sections A, B, C (or E), and erto Rico only, enter meters. | |
| The information in Section C was taken from other | documentation that has been si | igned and | sealed by a licen | ead eun | avar engineer or erebit- it uit | |
| is appropried by iaw to certify elevation information | . (Indicate the source and date | of the elev | ation data in the | Comme | nts area below.) | |
| A community official completed Section E for a bu | iding located in Zone A (without | a FEMA-is | sued or commun | ilty-issue | ed BFE) or Zone AO. | |
| The following information (Items G4–G10) is provi | ied for community floodplain ma | nagement | purposes. | | | |
| Permit Number G5. Date Permit | ssued | 36. Date (| Certificate Of Cor | npliance | Occupancy Issued | |
| This permit has been issued for: New Construc | tion Substantial Improv | rement | | | | |
| Elevation of as-built lowest floor (including basement) of | | ☐ feet | meters | Detur | | |
| BFE or (in Zone AO) depth of flooding at the building s | | ☐ feet | meters | Datum | | |
| Community's design flood elevation: | | ☐ feet | meters | Datum Datum | | |
| al Official's Name | Title | | | | | |
| a Official's Name | .100 | | | | | |
| nmunity Name | Tolonh | one | | | | |
| | Telephi Date | one | | | ~ | |

ELEVATION CERTIFICATE, page 3

Building Photographs See Instructions for Item A6.

| IMPORTANT: In these spaces, copy the correspond | FOR INSURANCE COMPANY USE | | |
|--|---------------------------|----------------|----------------------|
| Building Street Address (including Apt., Unit, Suite, and/or Bid 3447 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.

