JAN 25 2000

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FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

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

		important:	Read the inst	WNER INFORM	ges 1 - 7.	
BUILDING OWNER'S NA	For Insurance Company Use:					
PHILLIP 5	Policy Number					
BUILDING STREET ADDR	RESS (Including	Apt., Unit, Suite, an	d/or Bldg. No.) OR	P.O. ROUTE AND	BOY NO	
CITY	OAKS L	AHE			DOX NO.	Company NAIC Number
LONGBOAT K	EY			STATE		ZIP CODE
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 52 QUEENS HARBOUL (Platted as Marchester Bay) BUILDING USE (e.g., Residential, Non-residential, Addition						34228
BUILDING USE OF DOL	ENS HALL	BOUL CPla	tted as	Marcheste	(Bay)	
RESIDENTIAL		idential, Addition, Ad	cessory, etc. Use	Comments section	if necessary.)	, 10 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1
LATITUDE/LONGITUDE (PTIONALL		TAL DATUM:	de la companya de la		
(##° - ##' - ##.##" or ##.	#####°)	NAD 1927	LI NAD 1983	SOURCE: L	GPS (Type):	300000000000000000000000000000000000000
			A desired of the fee		USGS Quad Ma	2017
100	SEC	TION B - FLOOD	INSURANCE R	ATE MAP (FIRM	INFORMATIO	N
B1. NFIP COMMUNITY NA	ME & COMMUN	VITY NUMBER	B2. COUNTY NA		, Granzerio	
TOWN OF LONGEOAT	Key 12	5126	SARA			B3. STATE
B4. MAP AND PANEL	85. SUFFIX	B6. FIRM INDEX		RM PANEL		FL.
125124-0010	В	DATE	EFFECTIVE/	REVISED DATE	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S
10 Indicate the source		MAY 18, 199	9 1 AILC	- 1900		(Zone AO, use depth of flooding
10. Indicate the source of LI FIS Profile	of the Base Flo	od Elevation (BFE) data or base fi	ood depth entere	d in B9.	12
11. Indicate the elevation	KI FIRM	L_ Communi	ty Determined	L Other (Des	cribe):	
11. Indicate the elevation12. Is the building locate	din a Coostel					escribe):
Designation Date:	o in a coastat	barner Resources	System (CBRS) area or Otherwi	se Protected Ar	escribe):
				the second secon		
1 Iding elevations are	SECTIO	N C - BUILDING	ELEVATION IN	ORMATION (SU	RVEY REQUIR	RED)
on ig cicyauolis ale	Daseu un	II Operation Da			The second name of the second	
- CONTRACTOR CAST	INCATA WILL BA -			uilding is comple	te.	Finished Construction
						certificate is being completed - see
pages 6 and 7. If no c 3. Elevations – Zones A1	liagram accura	itely represents th	e building, provi	de a sketch or oh	otoomeh \	cerunicate is being completed - see
S. Licrauoris - Zones A7	-A30 AF ALI	A freth DEE see		Pi	ologiapii.)	
 Elevations – Zones A1 Complete Items C3a-i 	below according	ng to the building	diagram specifie	d in Item C2 Sta	ANAE, ANA	1-A30, AR/AH, AR/AO ed. If the datum is different from
used for the	BFF in Section	D D	o and opening	0 m 10011 02. 30	te the datum us	ied. If the datum is different from
Datum	pace provided	or the Comments	area of Section	Dor Section C	low field measu	ed. If the datum is different from prements and datum conversion
Datuiti	Conversion/C	comments		D or Section G, a	s appropriate, t	rements and datum conversion to document the datum conversion
- or audit reference ma	ark used					
a) Top of bottom flo	or (including b	asement or enclos	sure)	12 4	# / a	aron the FIRM? LIYes 区:::
U) Top of next higher floor						Account to the second second second second
TO DOMONI DI IDMONI DONZONIO DI CALLANTI IL INCIDI DI CALLANTI IL						
January (top of Sidd)						
Secretarion	of machinery a	and/or equipment			ft.(m)	BP 15616
aci ficility ale bull	aina			17 3		
f) Lowest adjacent g	rade (LAG)		1.0	8 4	ft.(M) Number	Ell F non
g) Highest adjacent	grade (HAG)		T.P.L.		ft.(m) 250	
h) No. of permanent i) Total area of all pe	openings (floo	d vents) within 1	ft. above adjace	nt grade 5	ft.(sm)	001
i) Total area of all pe	ermanent open	ings (flood vents)	in C3h 1, 28		SQ. CITT)	id p. s.
					aurcin) . L	S. A. Grand
nis certification is to be si	aned and sool	N D - SURVEYOR	, ENGINEER, C	OR ARCHITECT	CERTIFICATIO	N
certify that the information Inderstand that any false RTIFIER'S NAME	in Sections A	ed by a land surve	eyor, engineer, o	r architect author	ized by law to d	certify elevation information
Inderstand that any false ERTIFIER'S NAME Ennis R. Hoover	statement me	, B, and C on this	certificate repre	sents my best eff	orts to interpret	t the data symbols
RTIFIER'S NAME	otatement ma	y de punishable b	y fine or impriso	nment under 18 (U.S. Code Sec	tion 1001
ennis R. Hoover,	P.S.M.			LICEN	SE NOMBER	don 1001.
00 P 11	Survey		COMPA	NY NAME	9	
2		11	Bish	op & Assoc	iates	
rasota Centa	Bouleva	£/3//	CILIT	sota	STATE	ZIP CODE
	-1/	4	DATE	111		ZIP CODE 34240-9770
AA Form 81-31 ALIG 99	V /			1/25/2000	TELEPHOI (941)	371-6362
		SFF REVE	RSF SIDE FOR	CONTAINITHO		
				The state of the s	K-PI	ACES ALL PREVIOUS EDITIONS

IMPORTANT: In these spaces, copy the corresponding STREET ADDRESS (In the Control of the Control	onding information from Sec	ction A.	For Insurance Company Use:		
BUILDING STREET ADDRESS (Including Apt., Unit, Suite,	and/or Bldg. No.) OR P.O. ROU	TE AND BOX NO.	Policy Number		
СПҮ	STATE	ZIP CODE	Company NAIC Number :		
SECTION D. CUDITION	2		and the same of th		
Copy both sides of this Elevative Outs	ENGINEER, OR ARCHITECT	CERTIFICATION (CON	ITINUED)		
Copy both sides of this Elevation Certificate for (1) co	ommunity official, (2) insurance	ce agent/company, and (3	building owner.		
			200 - F189.		
			· ·		
SECTION E - BUILDING ELEVATION INFORMA	TION (SUBVEY NOT BEOU	IDEAL CONTROL	Check here if attachment		
or Zone AO and Zone A (without RFE) complete the	TION (SURVEY NOT REQU	IRED) FOR ZONE AO A	ND ZONE A (WITHOUT BFE)		
or Zone AO and Zone A (without BFE), complete Iter information for a LOMA or LOMR-F, Section C must be					
1. Building Diagram Number (Select the building	no diagram most similar to th	a building for which this			
- The top of the bottom floor (including pasement or	enclosure) of the building is	1 Iff (m)	(om) labour -		
3. For Building Diagrams 6-8 with openings (see page	e 7), the next higher floor or e	elevated floor (elevation t	o) of the building is		
4. For Zone AO only. If no flood depth number is av	ailable is the ton of the botton	n floor elevated in accord	ance with the community's		
January Companies 165	INO L_IUNKNOWN, I he loc	al official must certify this	information in Carlina C		
OLOHOW P-PROPERTY O	WNER (OR OWNER'S REPR	RESENTATIVE) CERTIE	CATION		
the property owner or owner's authorized representati	tive who completes Sections	A, B, and E for Zone A (v	vithout a FEMA-issued or		
community-issued BFE) or Zone AO must sign here.		1			
PROPERTY OWNER'S OR OWNER'S AUTHORIZED REP	RESENTATIVE'S NAME				
ADORESS			· Committee Committee		
SIGNATURE	CITY	STATE	ZIP CODE		
	DATE	TELEPHO	ONE		
COMMENTS					
3. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10					
SECTION G	- COMMUNITY INFORMATI	ON/OPTIONAL \	Check here if attachment		
he local official who is authorized by law or ordinance	to administer the community	e floodoloin managemen	A		
centile of the contract of the clevation Centile	ate. Complete the applicable	item(e) and eign below			
El montadon in Section C was taken from o	ther documentation that has I	heen signed and embors	ed by a licensed supreme		
engineer, or endineer who is authorized by sta	te or local law to certify eleva	tion information. (Indica	te the source and date of the		
overage and the Comments area below.)					
2. LA community official completed Section E for a	building located in Zone A (v	vithout a FEMA-issued or	community-issued BFE) or		
zone Ao.			the state of the s		
3. The following information (Items G4-G9) is pro	vided for community floodplai	in management purpose	s.		
G4. PERMIT NUMBER G5, DATE PERMIT		. DATE CERTIFICATE OF	COMPLIANCE/OCCUPANCY		
7. This permit has been issued for: _ New Const	truction Substantial Im				
Elevation of as-built lowest floor (including baseme	ent) of the building is:		_ ft.(m) Datum:		
9. BFE or (in Zone AO) depth of flooding at the building	ng site is:		ft.(m) Datum:		
OCAL OFFICIAL'S NAME	TITLE		7 3 10 27 3 3 3 10 10 10 10 10 10 10 10 10 10 10 10 10		
COMMUNITY NAME	TELEPHONE				
SIGNATURE	And the second of the second o				
	DATE				
COMMENTS			Section 1		
The state of the s					
			Check here if attachmer		

REPLACES ALL PREVIOUS EDITIONS