· · · · · · · · · · · · · · · · · · ·	FEDERAL EMERGENCY MANAGEMENT AGEN NATIONAL FLOOD INSURANCE PROGRAM	CY O.M.B. No. 3067-0077 Expires December 31, 2005
	<b>ELEVATION CERTIFICATE</b>	
	Important: Read the instructions on pages 1 -	7. Building #4)
	SECTION A - PROPERTY OWNER INFORMAT	TION For insurance Company Use:
BUILDING OWNER'S NAME	itan Lic	Policy Number
BUILDING_STREET ADDRESS (Including Apt	Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BC	DX NO. Company NAIC Number
4985 Gulf 0		
CITY	STATE 20	ZIP CODE
a inter in	umbers, Tax Parcel Number, Legal Description, etc.)	34228
MEtes and Sauce		10355 Range ILE
BUILDING USE (e.g., Residential, Non-resider	ntial, Addition, Accessory, etc. Use a Comments area, if n	ecessary.)
Residential		
LATITUDE/LONGITUDE (OPTIONAL) ( ## <sup>e</sup> - ## - ##.## <sup>e</sup> or ##.##### <sup>e</sup> )	HORIZONTAL DATUM: SO NAD 1927 INAD 1983	OURCE:  GPS (Type): USGS Quad Map Other:
SEC	CTION B - FLOOD INSURANCE RATE MAP (FIRM) IN	IFORMATION
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBE	R B2. COUNTY NAME	B3. STATE
Town of Longboot	125126 Marte	Florida
B4. MAP AND PANEL	B7. FIRM PANEL	B9. BASE FLOOD ELEVATION(S)
	B6. FIRM INDEX DATE EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S) (Zone AO, use depth of flooding)
0005 D 5	5-18-1992 5-18-1992	AIB Elev. II'
B10. Indicate the source of the Base Flood Elevation		
FIS Profile Strendstream of the DEF		
B11. Indicate the elevation datum used for the BFE in	urces System (CBRS) area or Otherwise Protected Area (OPA	Other (Describe):
	ON C - BUILDING ELEVATION INFORMATION (SUR	
C1. Building elevations are based on: Construction		Finished Construction FCFIVED
*A new Elevation Certificate will be required whe	n construction of the building is complete. diagram most similar to the building for which this certificate is b	
accurately represents the building, provide a ske	-	
	E), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, A	JAN 0 2 2006
	uilding diagram specified in Item C2. State the datum used. If the	0.0 0.0 million (0.0 0.0 million (0.0 millio
Section B, convert the datum to that used for the	BFE. Show field measurements and datum conversion calcula	ation. Use the space provided or the Comments area of
Section D or Section G, as appropriate, to docum	nent the datum conversion.	e latining, zoning a building
Datum		
Elevation reference mark used $C$	elevation reference mark used appear on the FIRM?	No
🔊 Top of bottom floor (including basement or		TO LEDIL
(a) Top of next higher floor	<u>22 \_ft(m)</u>	
o c) Bottom of lowest horizontal structural mem		Dass
ø(d) Attached garage (top of slab)	$\underline{Q} \cdot \underline{Q} t(m)$	Empossed Seal
e) Lowest elevation of machinery and/or equip		a set of the set
servicing the building (Describe in a Comr	<u></u>	License Number, Signature,
(HAG) (Highest adjacent (finished) grade (HAG)	<u></u> <u>C</u> ft(m)	
$\mathbf{x}$ h) No. of permanent openings (flood vents) w		in the second seco
<ul> <li>☆ i) Total area of all permanent openings (flood</li> </ul>		
	TON D - SURVEYOR, ENGINEER, OR ARCHITECT O	CERTIFICATION
	a land surveyor, engineer, or architect authorized by law	
	and con this certificate represents my best efforts to inter-	
	punishable by fine or imprisonment under 18 U.S. Code,	
CERTIFIER'S NAME	O II	LICENSE NUMBER
( ) lastin )	Dritt	<u>5556</u>
TITLE Port in a	COMPANY NAME	- ton
ADDRESS		MICHICOL INC
ADDRESS	E Blud Whit I Four	stata FL 34240
SIGNATURE	DATE	TELEPHQNE
Man		-2006 (941)341-9935

-

「「「「「「「」」

IMPORTANT: In these spaces, copy	the corresponding information fi	rom Section A.		For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt, U	nit, Suite, and/or Bldg. No.) OR P.O. ROUTE	AND BOX NO.		Policy Number
CITY	sult of Mexic	STATE 1	ZIP CODE	Company NAIC Number
lendboot	tey H	orida	34278	company which with the
SECTIO	ON D - SURVEYOR, ENGINEER, C	OR ARCHITECT	CERTIFICATION (CONTINUED)	
Copy both sides of this Elevation Certificate t	ior (1) community official, (2) insurance a	agent/company, and	l (3) building owner.	
COMMENTS	\	١		
/ · · · · · · · · · · · · · · · · · · ·	sin herean are	- pasal	OD DUR MAR	marky RESA
	olished elevativ			(PS
2) Lowest eleik	ation of machin	DETY is	an Alcord	
				Check here if attachments
SECTION E - BUILDING EL	EVATION INFORMATION (SURV	EY NOT REQUIR	ED) FOR ZONE AO AND ZONE	
For Zone AO and Zone A (without BFE), comp				
Section C must be completed.				
E1. Building Diagram Number _(Select the bu		ng for which this cer	ificate is being completed - see page	s 6 and 7. If no diagram accurately
represents the building, provide a sketch of E2. The top of the bottom floor (including base		ft (m) in (cm)	] abaya az 🗔 balayy (abady aya) #	- Linkard - dia and and a dia
E2. The top of the bottom floor (including base natural grade, if available).	mentor endosale, or the building is	_ i(iii)iii.(Giii) [_		e nignest adjacent grade. (Use
E3. For Building Diagrams 6-8 with openings (	see page 7), the next higher floor or elev	vated floor (elevation	b) of the building is ft.(m) in.(c	m) above the highest adjacent
grade. Complete items C3.h and C3.i on	front of form.			
E4. The top of the platform of machinery and/o	r equipment servicing the building is $\_$	_ ft.(m)in.(cm) [_	above or 🗌 below (check one) th	e highest adjacent grade. (Use
natural grade, if available).	or is available is the tax of the hattern a	oon olou otl !		
E5. For Zone AO only: If no flood depth numb	cal official must certify this information in	oor elevated in acco	rdance with the community's floodpla	in management ordinance?
	ON F - PROPERTY OWNER (OR C		SENTATIVE) CERTIFICATION	
The property owner or owner's authorized re				ut a FEMA-issued or community-
issued BFE) or Zone AO must sign here. Th				acar Energies and a community
PROPERTY OWNER'S OR OWNER'S AU	THORIZED REPRESENTATIVE'S NAM	ИЕ		
ADDRESS		CITY	STATE	ZIP CODE
		OIT	SIATE	ZIFCODE
SIGNATURE	r	DATE	TELEPH	IONE
COMMENTS	•			
	·			
				Check here if attachments
	SECTION G - COMMUNI			
The local official who is authorized by law or or		floodplain managem	ent ordinance can complete Sections	A, B, C (or E), and G of this Elevation
Certificate. Complete the applicable item(s) an G1. The information in Section C was take		on alanad and amb	and by a licensed survey and inc	or or orphito studio is sutherized by state
	ation. (Indicate the source and date of the			ar, or architect who is authorized by state
G2. A community official completed Section				40.
G3. The following information (Items G4-G				
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	· .	G6. DATE CERTIFICATE OF COMPLI	ANCE/OCCUPANCY ISSUED
G7. This permit has been issued for: New		ment		-
G8. Elevation of as-built lowest floor (including G9. BFE or (in Zone AO) depth of flooding at the second s			ft.(m)	Datum:
	ie building sile is.		<u>ft(m)</u>	Datum:
LOCAL OFFICIAL'S NAME		TIT		
COMMUNITY NAME		TE	LEPHONE	
SIGNATURE		DA	TE	
COMMENTS			-	
	-	······	5	

-



## V Zone Building Design and Performance Certificate

For New Construction, Substantial Improvements, and the repair of Substantially Damaged structures in Coastal Special Flood Hazard Area (Zone V)

Section 1: Structure Location and Ownership Information

To be completed by a Registered Professional Engineer or Architect

Structure Decision 110
Owner TOSITANO, LLC
Mailing BUILDING #4
Address 4985 GULF OF MEXICO DRIVE
City LONGBOAT KEY State FL Zip Code 34-228
Structure
Location COASTAL A ZONE
Latitude
County SARASOTA
Other Legal
Description SECTION 36, T355, RIGE
Within City Limits? (Y) N_/ Coastal Barriers Resource Act (CBRA) Zone Y //N /)
Section 2: Flood Insurance Rate Map (FIRM) Data
NOTE: This Certificate is NOT a substitute for an Elevation Certificate.
Community Name OWN OF LONG BOAT Community ID Number 125126 FIRM Panel Number
0005
Panel Suffix D FIRM Zone A-13 Date of FIRM Panel 5/10/1992. Date of
Index 5/18/1992
Section 3: Elevation Information
Record elevations to one tenth of a foot.
Elevation of the bottom of the Lowest Horizontal Structural Member
Base Flood Elevation (BFE)
Elevation of Lowest Adjacent Grade (LAG)
Elevation of Highest Adjacent Grade (HAG)
Foundation type: Piling X Post / Pier / Column / Fill / Shear Wall / Enclosed Wall OF LONGBOAT KEY
Foundation Description: CONCRETE PILINGS W/C.I.P. CAPS Planning, Zoning & Building

Elevation at Bottom of Foundation
Approximate depth of scour/erosion used for foundation design
Embedment depth of pilings or foundation below LAG
Datum used: NGVD 29 X/ NAVD 88 / Other
Date of Construction 2.128105 Improvement/Repair (to existing Bldg) / New Building

## Section 4: V Zone Certifying Statement

I certify that I have developed or reviewed the structural design, plans, and specifications for construction and that the proposed design and methods of construction are in accordance with accepted standards of practice for meeting the following provisions:

The bottom of the lowest horizontal structural member of the lowest floor (including piles and columns) is elevated to above the BFE; and

The pile or column foundation and structure attached thereto are anchored to resist floatation, collapse, lateral movement, or other structural damage from the effects of wind and water loads acting simultaneously on all structure components. Water loading values used are those associated with the base flood. Wind loading values used are those required by the applicable state or local building code. The potential for scour and erosion at the foundation has been anticipated for conditions associated with the base flood. Including wave action.

## Section 5: Breakaway Wall Certifying Statement

I certify that I have developed or reviewed the structural design, plans, and specifications for construction and that the proposed design and methods of construction are in accordance with accepted standards of practice for meeting the following provisions:

Breakaway walls shall collapse from a water load no more than that which would occur during the base flood;

The elevated portion of the building and supporting foundation system shall not be subject to collapse, displacement, or other structural damage due to the effects of wind and water loads acting simultaneously on all structure components; and

The space below the lowest floor is designed to be used solely for parking of vehicles, building access, and/or storage.

	Section 6: Certificat	tion	
Check one: Section 4/	Section 5/	Section 4 & 5	AS CERT
Name (please print)	HOMAS OBRIE	IN T	KMAR (A)
Title PRINCIPAL ARC	HITECT License	umber AR 1312	12 NOV 06
Phone Number (941) 708 -	0048 EMAIL	11212	23000000000000000000000000000000000000
Representing <u>J. THom</u> Address <u>706</u> 916	AS OBRIEN. A	IA, PA	CEIVED
City BRADENTON	State PL	Zip Code 34	2.05 DEC 28 2006
	t a th	en e	TOWN OF LONGBOAT KEY Planning, Zoning & Building

## **CCCL ELEVATION CERTIFICATE** FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

3 8 . . .

This certificate is required by section 3107 of the Florida Building Code for habitable structures built seaward of a coastal construction control line to ensure the lowest horizontal structural member of such structures is located above the local one-hundred-year storm elevation as published in the Florida Department of Environmental Protection's document titled, "One-Hundred-Year Storm Elevation Requirements for Habitable Structures Located Seaward of a Coastal Construction Control Line". The elevation of the lowest horizontal structural member is to be shown in relation to National Geodetic Vertical Datum (N.G.V.D., 1929).

NOTICE: This certificate shall be completed as part of the permitting process and submitted to the building official who will note any deficiencies and notify the permit holder of any actions necessary to bring the structure into compliance with the elevation requirement. Any deficiencies found by the building official shall be corrected by the permit holder immediately and prior to proceeding with work. Any work undertaken prior to submission of this certification shall be at the property owner's risk.

SECTION A Property Information         PROPERTY OWNERS NAME         STREET ADDRESS (netwaker ANT, Unit, Suite, and/or Bidge, Number) OR PEO, BOX NUMBER         YOTHER DESIGNATION (Los and Biget Number) OR PEO, BOX NUMBER         YOTHER DESIGNATION (Los and Biget Number) OR PEO, BOX NUMBER         YOTHER DESIGNATION (Los and Biget Number) or PEO, BOX NUMBER         YOTHER DESIGNATION (Los and Biget Number) or PEO, BOX NUMBER         YOTHER DESIGNATION (Los and Biget Number) or PEO, BOX NUMBER         YOTHER DESIGNATION (Los and Biget Number) or PEO, BOX NUMBER         YOTHER DESIGNATION (Los and Biget Number) or PEO, BOX NUMBER         YOTHER DESIGNATION (Los and Biget Number) or PEO, BOX NUMBER         YOTHER DESIGNATION (Los and Biget Number), etc.)         CITY         SECTION B One-Hundred-Year Storm Elevation Information         1.       Pursuant to the above document, the bottom of the lowest horizontal structural member must be located at or above
STREET ADDRESS Andersking As, Unit, Sume and o'r Bide, Number) OR P.D. BOX NUMBER OTHER DESCRIPTION (Lot and Bige Number, etc.) SECTION B One-Hundred-Year Storm Elevation Information 1. Pursuant to the above document, the bottom of the lowest horizontal structural member must be located at or above
When the set of the set
When the set of the set
OTHER DESCRIPTION (Lor and Block Numbers, etc.)         Implies and finance for the section of the formation 3.5 Tourners in the section of the lowest horizontal structural member is a section 3.5 Tourner information regarding the location of the lowest horizontal structural member.         SECTION C Certification         This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information and be submitted to and approved by the building official prior to commencing any additional work.         I CERTIFIERS NAME         COMPANY NAME         Interner the data available.         CERTIFIERS NAME         Interner the data available.         CERTIFIERS NAME         COMPANY NAME
STATE       Var code         STATE         STATE         Langback Mey         STATE         Control elevation to the above document, the bottom of the lowest horizontal structural member of the building is         21.15.         feet N.G.V.D.         State of the diagrams on page 2 of this document for information regarding the location of the lowest horizontal structural member.         SECTION C Certification         This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information and be submitted to and approved by the building official prior to commencing any additional work.         I certify that the inf
SECTION B One-Hundred-Year Storm Elevation Information         1. Pursuant to the above document, the bottom of the lowest horizontal structural member must be located at or above <u>H.C.C.</u> feet N.G.V.D.         2. The bottom of the lowest horizontal structural member of the building is         2. The bottom of the lowest horizontal structural member of the building is         3. Control elevation reference mark used: Benchmark ID         Please refer to the diagrams on page 2 of this document for information regarding the location of the bottom of the lowest horizontal structural member.         SECTION C Certification         This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information and be submitted to and approved by the building official prior to commencing any additional work.         I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.         CERTIFIERS NAME         Mathematical Backers         Mathematical Backers         COMPANY NAME
SECTION B One-Hundred-Year Storm Elevation Information         1. Pursuant to the above document, the bottom of the lowest horizontal structural member must be located at or above
1. Pursuant to the above document, the bottom of the lowest horizontal structural member must be located at or above
1. Pursuant to the above document, the bottom of the lowest horizontal structural member must be located at or above
2. The bottom of the lowest horizontal structural member of the building is
3. Control elevation reference mark used: Benchmark ID <u>DNR-PLD2A</u> BM elevation: <u>S.S2</u> feet N.G.V.D. Please refer to the diagrams on page 2 of this document for information regarding the location of the bottom of the lowest horizontal structural member. SECTION C Certification This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information and be submitted to and approved by the building official prior to commencing any additional work. I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available. CERTIFIER'S NAME COMPANY NAME TITLE <u>COMPANY NAME</u> ADDRESS
Please refer to the diagrams on page 2 of this document for information regarding the location of the bottom of the lowest horizontal structural member.  SECTION C Certification  This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information and be submitted to and approved by the building official prior to commencing any additional work.  I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.  CERTIFIER'S NAME  COMPANY NAME  COMPANY NAME  ADDRESS
structural member.         SECTION C Certification         This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information and be submitted to and approved by the building official prior to commencing any additional work.         I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.         CERTIFIER'S NAME         CERTIFIER'S NAME         TITLE         COMPANY NAME         COMPANY NAME         ADDRESS
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information and be submitted to and approved by the building official prior to commencing any additional work. I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available. CERTIFIER'S NAME LICENSE NUMBER DESCRIPTION COMPANY NAME COMPANY NAME LICENSE NUMBER LICENSE NUM
and be submitted to and approved by the building official prior to commencing any additional work. I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available. CERTIFIER'S NAME CERTIFIER'S NAME COMPANY NAME COMPANY NAME COMPANY NAME ADDRESS
I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.
TITLE President MSB Surveying Inc.
ADDRESS MUSICEST MORE SURVEYING INC.
ADDRESS MUSICENT MUSE MUSEYing Inc.
ADDRESS CITY STATE ZIP CODE
SIGNATURE A CHARTENTICO CONTANT DUTA STALLAND DATE TELEPHONE
CONVENTS 11-7-2004 (941) 341-98735
100 year storm elevation for R-62
moniment per Department of
Environmental Patration de la carta de la carta
LITUTICA MEDICULTION CRITICIENSEL
reb. 2002.
No. when the second
Building # 4 RECEIVED
Building Alt 4 DEP Form 73-501
Building <sup>41</sup> 4 DEP Form 73-501 DEC 28 2006
Building 11 4 DEP Form 73-501 DEC 28 2006 TOWN OF LONGBOAT KE