OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

				or (1) contained inty on	iciai, (2) insurance a	gent/compa	ny, and (3) building owner
SECTION A – PROPERTY INFORMATION				FOR INSURANCE COMPANY USE			
A1. Building Owner's Name				Policy Nur			
A2 Building Stree	at Addrage (in	Icluding Ant Unit Cuit		les Dide No. V. D. C			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 545 BAY ISLES PARKWAY					Company	NAIC Number:	
City							
LONGBOAT I	ŒV			State		ZIP Code	
		and Disability at a T		Florida		34228	
A PORTION OF L	OT 1 OF "BA	ind Block Numbers, Ta Y ISLES UNIT NO.12",	P.B. 4	el Number, Legal D 47, P.G. 50, OF THE	escription, etc.) E PUBLIC RECORD	S SARASO	TA COUNTY, FL
A4. Building Use	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) NON-RESIDENTIAL						
A5. Latitude/Long	itude: Lat. 2	7°22'05.75"N	Long.	82°37'24.86"W	Horizontal Datum	: NAD	1927 X NAD 1983
A6. Attach at leas	t 2 photograp	hs of the building if the	Certifi	cate is being used t	o obtain flood insura	ince	
A7. Building Diagr				•			
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawl	space or enclosure(s)		N/A sq ft			
b) Number of	permanent flo	ood openings in the cra	wlspa	ce or enclosure(s) w	vithin 1.0 foot above	adjacent gr	rade 0
		penings in A8.b0		sq in			
d) Engineered	flood openin	gs? Yes No					
A9. For a building	with an attach	ned garage:					
a) Square foo	tage of attach	ned garageN/A		sq ft			
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0							
			0	sq in	, ,		
d) Engineered flood openings? 🗵 Yes 🗌 No							
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Community Name & Community Number TOWN OF LONGBOAT KEY 125126		B2. County Name SARASOTA			B3. State Florida		
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date		IRM Panel	B8. Flood Zone(s)	B9. Bas	e Flood Elevation(s)
		Date		ffective/ evised Date		(Zor	ne AO, use Base
12115C0126	F	11/04/2016		/2016	A 13	11	od Depth)
B10 Indicate the s	ource of the B	Base Flood Elevation (E	DEE) de	ata as base de sal de			
☐ FIS Profile	⊠ FIRM [Community Determi	ned [Other/Source:	ptn entered in Item	39:	
B11. Indicate eleva	tion datum us	sed for BFE in Item B9:	□ N	GVD 1929 🗵 NA	VD 1988 Oth	er/Source:	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes X No							
Designation Date: N/A ☐ CBRS ☐ OPA							
=				_ 3.7,			1
MA Form 096 0 22	(7/45)						
MA Form 086-0-33	(7/15)	Rep	laces a	all previous editions			Form Page 1 of 6

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ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these seconds		Expiration Date: November 30, 2018		
IMPORTANT: In these spaces, copy the corresponding information from Se	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Ro 545 BAY ISLES PARKWAY	ute and Box No.	Policy Number:		
City State ZIP LONGBOAT KEY Florida 342	Code 228	Company NAIC Number		
SECTION C - BUILDING ELEVATION INFORMA	TION (SURVEY R	FOURED)		
C4 Pulleting of the C4	Iding Under Constru			
A new Elevation Certificate will be required when construction of the build	ing is complete	ction X Finished Construction		
 Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with B Complete Items C2.a–h below according to the building diagram specified Benchmark Utilized: SITE BM #1, ELE 4.21(NAVD88) Vertical Datum: 	FE), AR, AR/A, AR/ in Item A7. In Puerto NAVD88	AE, AR/A1-A30, AR/AH, AR/AO. o Rico only, enter meters.		
Indicate elevation datum used for the elevations in items a) through h) belo	w.			
☐ NGVD 1929 ☑ NAVD 1988 ☐ Other/Source: Datum used for building elevations must be the same as that used for the E) FE			
		Check the measurement used.		
 Top of bottom floor (including basement, crawlspace, or enclosure floor) 	11.1			
b) Top of the next higher floor	N/A	X feet meters		
 Bottom of the lowest horizontal structural member (V Zones only) 	N/A	X feet meters		
d) Attached garage (top of slab)	N/A	X feet meters		
 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 	N/A	X feet meters		
f) Lowest adjacent (finished) grade next to building (LAG)	9.2	X feet meters		
g) Highest adjacent (finished) grade next to building (HAG)	11, 1	X feet meters		
 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 	N/A,	X 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.				
Were latitude and longitude in Section A provided by a licensed land surveyor?		Check here if attachments.		
Certifier's Name License Number RICHARD E. COUSINS 4188				
RICHARD E. COUSINS 4188		0		
LAND SURVEYOR & MAPPER		First at ErCan		
Company Name COUSINS SURVEYORS & ASSOCIATES, INC.		Product E.C.		
Address		Here		
3921 SW 47TH AVENUE, SUITE 1011		10/2/17		
City State DAVIE Florida	ZIP Code 33314	1 10/10/1		
Signature Date 10/02/2017	Telephone (954) 689-7766			
Copy all pages of this Elevation Certificate and all attachments for (1) community offi	cial. (2) insurance ac	ent/company and (3) building curpor		
Comments (including type of equipment and location, per C2(e), if applicable) Latitude and Longitude was obtained by the GPS Street Finder installed in our trucks and verified by the Google Earth program. Field survey datum is same as datum used for BFE in item B9. No conversion needed. C2e - All equipment servicing the building are at/above finished floor elevation.				
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ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the co	rresponding informati	on from Continue		Date. November 30, 201
Building Street Address (including Apt., Unit	Suite and/or Pide No.	or D.O. Dection A.		RANCE COMPANY US
545 BAY ISLES PARKWAY	, Guite, and/or Blog. No.)	or P.O. Route and Bo	ox No. Policy Nun	nber:
City	State	ZIP Code	Company I	NAIC Number
ONGBOAT KEY	Florida	34228		
SECTION E - BUIL	DING ELEVATION IN OR ZONE AO AND ZO	FORMATION (SURV ONE A (WITHOUT B	EY NOT REQUIRED	0)
For Zones AO and A (without BFE), complete complete Sections A, B,and C. For Items E1- enter meters.	e Items E1–E5. If the Ce -E4, use natural grade, i	rtificate is intended to f available. Check the	support a LOMA or Lo measurement used. I	OMR-F request, n Puerto Rico only,
 Provide elevation information for the folk the highest adjacent grade (HAG) and the a) Top of bottom floor (including basem 		ropriate boxes to sho (LAG).	w whether the elevation	on is above or below
crawlspace, or enclosure) is			meters abov	e or Delow the HAG
 Top of bottom floor (including basemerawlspace, or enclosure) is 	ent,			e or below the LAG.
For Building Diagrams 6–9 with permane the next higher floor (elevation C2.b in	ent flood openings provid	ed in Section A Items	8 and/or 9 (see pages	s 1–2 of Instructions).
the diagrams) of the building is				e or below the HAG.
Attached garage (top of slab) is		feet		e or below the HAG.
 Top of platform of machinery and/or equi servicing the building is 	pment	□feet		
Zone AO only: If no flood depth number if floodplain management ordinance?	s available, is the top of	the bettern floor alous		or below the HAG.
	res 🗆 No 🗀 Unk	nown. The local offic	ial must certify this inf	ormation in Section G.
SECTION F - PROPE	RTY OWNER (OR OWN	ER'S REPRESENTA	TIVE) CERTIFICATIO	N
operty Owner or Owner's Authorized Repre		City	State	ZIP Code
ignature		Date	Telephone	
omments				
			Chec	k here if attachments.
MA Form 086-0-33 (7/15)	Replaces all prev	ious editions.		Form Page 3 of
(5)				rom rage 3 or

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ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the cor	Expiration Date: November 30, 2018	
Building Street Address (including Apt., Unit,	A. FOR INSURANCE COMPANY USE Box No. Policy Number:	
545 BAY ISLES PARKWAY		
City LONGBOAT KEY	State ZIP Code	Company NAIC Number
	Florida 34228	
	ION G - COMMUNITY INFORMATION (
used in Items G8-G10. In Puerto Rico only, e	nter meters.	loodplain management ordinance can complete m(s) and sign below. Check the measurement
data in the Comments area below.)	zed by law to certify elevation information	een signed and sealed by a licensed surveyor, . (Indicate the source and date of the elevation
		thout a FEMA-issued or community-issued BFE)
	-G10) is provided for community floodpla	in management purposes.
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
	New Construction Substantial Impre	ovement
G8. Elevation of as-built lowest floor (includin of the building:	g basement) —————	feet meters Datum
G9. BFE or (in Zone AO) depth of flooding at	the building site:	feet meters Datum
G10. Community's design flood elevation:		feet meters Datum
Local Official's Name	Title	
Community Name	Telephone	
Signature	Date	
Comments (including type of equipment and loc	cation, per C2(e), if applicable)	
	,	
		☐ Check here if attachments.
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BUILDING PHOTOGRAPHS

See In

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2019

IMPORTANT: In these services			Expiration Date. November 30, 2018
Building Street Address (including Ag 545 BAY ISLES PARKWAY	FOR INSURANCE COMPANY USE Policy Number:		
City LONGBOAT KEY	State Florida	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.

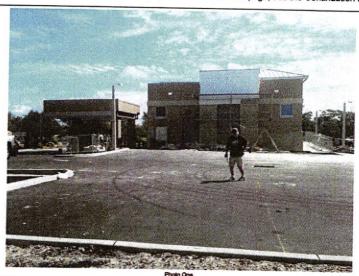


Photo One Caption PIC TAKEN: 09/29/2017

ELEVATION CERTIFICATE



Photo Two Caption PIC TAKEN: 09/29/2017

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BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

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 Box No.

545 BAY ISLES PARKWAY

City

State

ZIP Code

LONGBOAT KEY

Florida

34228

FOR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. 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.

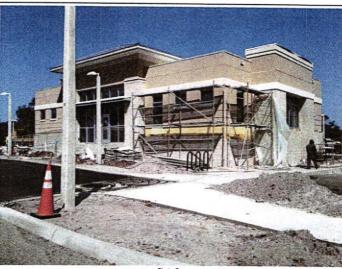


Photo One

Photo One Caption PIC TAKEN: 09/29/2017

ELEVATION CERTIFICATE



Photo Two Caption PIC TAKEN: 09/29/2017

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TOWN OF LONGBOAT KEY

Planning, Zoning & Building 501 Bay Isles Road Longboat Key, FL 34228 (941) 316-1966 FAX (941) 316-1970 www.longboatkey.org

Incorporated November 14, 1955

August 24, 2018

Rycon Construction Inc 2501 Smallman Street Pittsburgh PA 15222

Re: Final FEMA Elevation Certificate

Dear Rycon Construction Inc

We are contacting you as contractor of record for the permit for 545 Bay Isles Parkway. It has come to our attention that we do not have a final FEMA Elevation Certificate for 545 Bay Isles Parkway.

Per Florida Building Code (FBC) $2017-6^{th}$ Edition, *Building*, Section 110.3 (5.1), "In flood hazard areas, upon placement of the lowest floor, including basement, and prior to further vertical construction, the elevation certification shall be submitted to the authority having jurisdiction."

Please provide our office a final FEMA Elevation Certificate for 545 Bay Isles Parkway by August 31, 2018.

If you should have any questions concerning this request, please contact me at 941-316-1966 Ext 2511.

Sincerely,

Stan Dinwoodie Building Official

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