FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires December 31, 2005

DI III DINIC CIAN IFFEI			Name and Address of the Owner, where the Person of the Owner, where the Person of the Owner, where the Owner, which is the Owner, wh		NAME AND ADDRESS OF TAXABLE PARTY.			
DI III DINIC CHAIRDIC	Important: Read the instructions on pages 1-7. SECTION A-PROPERTY OWNER INFORMATION							
BUILDING OWNER'S NAME						Policy Number		
SEA GATE LANDIN								
JILDING STREET ADD	RESS (Including A	Apt., Unit, Suite, and/o	or Bidg. No.) OR F			Company NAIC Number		
CITY LONGBOAT KEY				STATE FL	ZIPC	9°228		
PROPERTY DESCRIPTION	ON (Lot and Block	Numbers, Tax Parce	Number, Legal I			7000		
LOT 8 BLOCK G COUNR	Y CLUB SHORE	S UNIT 4 PART 2	_					
BUILDING USE (e.g., Res RESIDENTIAL	idential, Non-resid			Comments area, if n	ecessary.)			
LATITUDE/LONGITUDE (ONTAL DATUM:		DURCE: GPS (T			
(##°-##-###" or ##.	######*)	☐ NAD 19	27 ⊠ NAD 19	33	USGS	Quad Map		
	S	ECTION B - FLOOD	INSURANCE R	ATE MAP (FIRM) IN	FORMATION			
B1. NFIP COMMUNITY NAME 8	& COMMUNITY NUM	IBER	B2. COUNTY NAM			B3. STATE		
TOWNOF LONGBOAT KEY 12	25126		SARASOTA			FL		
B4. MAP AND PANEL			B7.	FIRM PANEL	I	B9. BASE FLOOD ELEVATION(S)		
NUMBER	B5. SUFFIX	B6. FIRM INDEX DATI	E EFFECTI	/E/REVISED DATE	B8. FLOOD ZONE(S)			
125126 0010	В	05/18/92		08/15/83	A13	11		
310. Indicate the source of the								
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe):								
311. Indicate the elevation date 312. Is the building located in a	um used for the Br	E III BB. KAI NGVD 192	(2) S) area ar Othonuis					
12. is the building located in a						Designation Date.		
	NAME OF TAXABLE PARTY.	TION C - BUILDING	The second linear section is the second					
 Building elevations are bas 			Building Under		Finished Construction			
*A new Elevation Certifica								
2. Building Diagram Number,	1(Select the building	ng diagram most similar	r to the building for	vhich this certificate is b	eing completed - see p	pages 6 and 7. If no diagram		
accurately represents the	building, provide a	sketch or photograph.)						
3. Elevations - Zones A1-A3	O, AE, AH, A (with I	BFE), VE, V1-V30, V (w	ith BFE), AR, AR/A	, ARIAE, ARIA1-A30, A	R/AH, AR/AO			
Complete Items C3a-i be	alow according to th	e building diagram spec		ate the details read If the				
Section B, convert the dat			cified in Item C2. St	ate the dailim used. If the	ne datum is different fro	om the datum used for the BFE in		
	rum to that used for	the BFE. Show field me	cified in Item C2. St easurements and d	ate the datum used. If the atum conversion calcula	ne datum is different fro ution. Use the space p	om the datum used for the BFE in rovided or the Comments area of		
Section D or Section G, as		the BFE. Show field me	easurements and d	atum conversion calcula	ne datum is different fro ution. Use the space p	om the datum used for the BFE in rovided or the Comments area of		
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TOWN OF LONGBOAT KEY Planning, Zoning & Building

IMPORTANT: In these spaces, cop	y the corresponding information from Se	ction A.		For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt.,	Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX	KNO.		Policy Number
550 YARDARM LANE	STATE	ZIP	CODE	Company NAIC Number
LONGBOAT KEY	FL			
	ION D - SURVEYOR, ENGINEER, OR ARC		CONTINUED)	
Copy both sides of this Elevation Certificate	e for (1) community official, (2) insurance agent/cor	mpany, and (3) building owner.		
MENTS	SAAD (FIDAN INIFODMATION TO DE VEDICIED	ATLOCALEEMA CONTROL	OFFICE	
EII E#0/10126	MAP (FIRM) INFORMATION TO BE VERIFIED		OTTIOL	
* OPENI	NGS IN GARAGE ARE	EA ONLY.	and the second s	A STATE OF THE STA
				Check here if attachments
SECTION E - BUILDING E	LEVATION INFORMATION (SURVEY NO	FREQUIRED) FOR ZONE A	O AND ZONE A	(WITHOUT BFE)
	nplete Items E1 through E4. If the Elevation Certifi			
Section C must be completed.				17 K
	building diagram most similar to the building for wh	ich this certificate is being comp	eted – see pages 6	and /. If no diagram accurately
represents the building, provide a sketch	n or photograph.) sement or enclosure) of the building isft.(m) _	in (cm) \square above or \square belo	w (check one) the h	ighest adjacent grade. (Use
E2. The top of the bottom floor (including bas natural grade, if available).	parient or endocute) of the building isit((ii)_		(oncon one) ale i	.g22
E3. For Building Diagrams 6-8 with openings	s (see page 7), the next higher floor or elevated floo	or (elevation b) of the building is	ft.(m)in.(cm	above the highest adjacent
grade. Complete items C3.h and C3.i o	n front of form.			
	Nor equipment servicing the building is $\ _$ ft.(m) $\ _$	_in.(cm) 🗌 above or 🔲 belo	w (check one) the h	ighest adjacent grade. (Use
natural grade, if available).	nber is available, is the top of the bottom floor eleva	atad in accordance with the com	munity's floodolain	management ordinance?
	local official must certify this information in Section		munity 3 noodplain	naragorion orananoo.
	ION F - PROPERTY OWNER (OR OWNER		RTIFICATION	
	representative who completes Sections A, B, C (Ite			a FEMA-issued or community-
issued BFE) or Zone AO must sign here.	The statements in Sections A, B, C, and E are con	rect to the best of my knowledge		
	UTHORIZED REPRESENTATIVE'S NAME	· · · · · · · · · · · · · · · · · · ·		- War
ADDDESS		CITY	STATE	ZIP CODE
ADDRESS		GITT	SIAIL	ZIFOODL
SIGNATURE		DATE	TELEPHO	NE
COMMENTS				
- COMMENTO			<u>,</u>	
				–
		OPILITON (OPTIONAL)		Check here if attachments
	SECTION G - COMMUNITY INF			D 0 / D 10 /#: Fl - F
	ordinance to administer the community's floodplain	n management ordinance can c	omplete Sections A	, B, C (or E), and G of this Elevati
Certificate. Complete the applicable item(s)	and sign below. ken from other documentation that has been signe	ed and embossed by a licensed:	survevor engineer.	or architect who is authorized by
or local law to certify elevation infor	mation. (Indicate the source and date of the eleva	tion data in the Comments area	below.)	,
G2. A community official completed Sec	tion E for a building located in Zone A (without a F	EMA-issued or community-issue	ed BFE) or Zone AC).
G3. The following information (Items G4	-G9) is provided for community floodplain manage	ment purposes.		
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFI	CATE OF COMPLIAN	ICE/OCCUPANCY ISSUED
	1			
	ew Construction Substantial Improvement		# (m)	Datem
G8. Elevation of as-built lowest floor (including G9. BFE or (in Zone AO) depth of flooding a	-	-	ft.(m) ft.(m)	Datum: Datum:
	the building site is.			Datari.
LOCAL OFFICIAL'S NAME		TITLE	IREC	FIVED
COMMUNITY NAME		TELEPHONE	E & Busses	noon 1 V bear had
SIGNATURE		DATE	DEC	1 9 2006
COMMENTS			000	T 0 1000
				LONGBOAT KEY
<u> </u>			Planning, z	Check here if attachments