U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

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.

SECTION A - PROPERTY INFORMATION					FOR INSU	JRANCE COMPANY USE	
A1. Building Owner's Name TRENT & MARNI ZENKEWICZ					Policy Nur		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 560 GUNWALE LANE					Company NAIC Number:		
	City State TOWN OF LONGBOAT KEY Florida					ZIP Code 34228	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 3, BLOCK C, COUNTRY CLUB SHORES, UNIT 3-SECTION 1							
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL							
A5. Latitude/Long	A5. Latitude/Longitude: Lat. 27°30'34.99"N Long. 82°35'50.36"W Horizontal Datum: Hor						
A6. Attach at leas	t 2 photograp	hs of the building if the	Certifi	cate is being used t	o obtain flood insura	ance.	ILE PLANS
A7. Building Diagr	am Number	1B				COPYO	FRECORD
A8. For a building	with a crawls	space or enclosure(s):					
a) Square foo	tage of crawl	space or enclosure(s)		0 sq ft			
b) Number of	permanent fle	ood openings in the cra	wlspa	ce or enclosure(s) v	vithin 1.0 foot above	adiacent or	rade 0
ı		penings in A8.b 0		sq in			
		ngs? Yes No		•		K	ECEIVIT
	A9. For a building with an attached garage: JAN 2 9 2019						AN 2.9 2019
35.0	a) Square footage of attached garage 528 sq ft TOWN OF LONG-10-10-10-10-10-10-10-10-10-10-10-10-10-						F LONG-Family
Planning, Zoning and							
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade c) Total net area of flood openings in A9.b g sq in							
				sq in			
d) Engineered flood openings? Yes No							
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Communi				B2. County Name		ION	B3. State
TOWN OF LONGBOAT KEY, FLORIDA 125126 SARASOTA					Florida		
B4. Map/Panel	B5. Suffix	B6. FIRM Index	B7 F	IRM Panel	B8 Flood Zana(a)	DO Dee	se Flood Elevation(s)
Number		Date	E	ffective/ evised Date	bo. Flood Zorie(s)	(Zor	ne AO, use Base
12115C0128	F	11/04/2016	11/04		AE	10	od Depth)
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:							
☐ FIS Profile ☑ FIRM ☐ Community Determined ☐ Other/Source:							
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)? Yes 🗵 No							
Designation Date: CBRS CPA							

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corresponding information from Sec	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Rou 560 GUNWALE LANE	Policy Number:		
City State ZIP TOWN OF LONGBOAT KEY Florida 3423	Company NAIC Number		
SECTION C - BUILDING ELEVATION INFORMAT	TION (SURVEY R	EQUIRED)	
C1. Building elevations are based on: Construction Drawings* Building	ding Under Constru	uction* Finished Construction	
*A new Elevation Certificate will be required when construction of the building			
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BI Complete Items C2.a–h below according to the building diagram specified i Benchmark Utilized: NGS DATAPOINT A715 Vertical Datum:	in Item A7. In Puert NAVD 1988	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) below NGVD 1929 X NAVD 1988 Dother/Source:			
Datum used for building elevations must be the same as that used for the B	SFE.	Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	5. 7		
b) Top of the next higher floor	N/A	X feet meters	
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A	X feet	
d) Attached garage (top of slab)	5, 3	X feet meters	
 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 	e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 5. 3		
f) Lowest adjacent (finished) grade next to building (LAG)	5. 0	X feet meters	
g) Highest adjacent (finished) grade next to building (HAG)	<u> </u>	X feet meters	
 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 	X feet meters		
SECTION D - SURVEYOR, ENGINEER, OR ARC	HITECT CERTIFI	CATION	
This certification is to be signed and sealed by a land surveyor, engineer, or arch I certify that the information on this Certificate represents my best efforts to interpretatement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1.	oret the data availal	law to certify elevation information. ble. I understand that any false	
Were latitude and longitude in Section A provided by a licensed land surveyor?		Check here if attachments.	
Certifier's Name License Number JAMES B. AMBERGER LS6333		0 18 11	
JAMES B. AMBERGER LS6333 Title		1/24/2019	
PRESIDENT	(3)		
Company Name	Place		
JIM AMBERGER LAND SURVEYING LLC	of - Seal		
Address 1055 S. TAMIAMI TRAIL, SUITE 110-B	Here		
	ZIP Code 34236	P10(3.1)	
	Telephone (941) 955-6333		
Copy all pages of this Elevation Certificate and all attachments for (1) community office	cial, (2) insurance a	gent/company, and (3) building owner.	
Comments (including type of equipment and location, per C2(e), if applicable)			
C2e: AIR CONDITIONING COMPRESSOR LOCATED ON SOUTH SIDE OF RES	SIDENCE	RECEIVED	
		JAN 2 9 2019	
	TO	WN OF LONGBOAT KEY	
		oning Zoning and Building	

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding i	FOR INSURA	NCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or E 560 GUNWALE LANE	Policy Number				
City State TOWN OF LONGBOAT KEY Florid		Code 28	Company NAI	Number	
SECTION E – BUILDING ELEVA FOR ZONE AC	TION INFORMATION AND ZONE A (WIT	N (SURVEY NOTHOUT BFE)	T REQUIRED)		
For Zones AO and A (without BFE), complete Items E1–E5. complete Sections A, B,and C. For Items E1–E4, use natura enter meters.	al grade, if available. (Check the measur	ement used. In Po	uerto Rico only,	
 E1. Provide elevation information for the following and check the highest adjacent grade (HAG) and the lowest adjacent a) Top of bottom floor (including basement, 	k the appropriate box ent grade (LAG).	es to show wheth	er the elevation is	above or below	
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		☐ feet ☐ mete	ers 🗌 above or	below the HAG.	
crawlspace, or enclosure) is		feet mete	_	below the LAG.	
E2. For Building Diagrams 6–9 with permanent flood openir the next higher floor (elevation C2.b in the diagrams) of the building is	ngs provided in Section	on A Items 8 and/o		2 of Instructions), below the HAG.	
E3. Attached garage (top of slab) is		feet mete		below the HAG.	
E4. Top of platform of machinery and/or equipment servicing the building is		☐ feet ☐ mete	ers above or	below the HAG.	
E5. Zone AO only: If no flood depth number is available, is t floodplain management ordinance? Yes No	he top of the bottom f	loor elevated in a local official must	ccordance with the	o communitule	
SECTION F - PROPERTY OWNER (OR OWNER'S REPE	RESENTATIVE) C	ERTIFICATION		
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.					
Property Owner or Owner's Authorized Representative's Name					
Address	City	Si	tate	ZIP Code	
Signature	Date	Te	elephone		
Comments					
			RECEIV	/ED	
			JAN 292	019	
		TOV Plan	VN OF LONGB Ining, Zoning ar	OAT KEY nd Building	
			Check he	re if attachments.	

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, S 560 GUNWALE LANE	Policy Number:					
City TOWN OF LONGBOAT KEY	State Florida	ZIP Code 34228		Company NAIC Number		
SECTION	ON G - COMMUNITY II	NFORMATION (OPTIO	NAL)			
The local official who is authorized by law or o Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, er	rdinance to administer to	ho community's floodale	· · · · · ·	agement ordinance can complete below. Check the measurement		
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)						
G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.						
G3. The following information (Items G4-	-G10) is provided for co	mmunity floodplain man	ageme	nt purposes.		
G4. Permit Number	G5. Date Permit Issue	ed	G6. Da	ate Certificate of ompliance/Occupancy Issued		
G7. This permit has been issued for: New Construction Substantial Improvement						
G8. Elevation of as-built lowest floor (including of the building:	p basement)	[] feet	meters Datum		
G9. BFE or (in Zone AO) depth of flooding at t	he building site:		feet [meters Datum		
G10. Community's design flood elevation: Local Official's Name] feet [meters Datum		
		Title				
Community Name		Telephone				
Signature		Date				
Comments (including type of equipment and location, per C2(e), if applicable)						
				Daniel Steam South Micros S.M. St. Steam Steam		
				RECEIVED		
			7.	JAN 2 9 2019		
				OWN OF LONGBOAT KEY anning, Zoning and Bullage		
				Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT. I. II			Expiration Date. November 30, 2018
Building Street Address (including Apt., Un 560 GUNWALE LANE	FOR INSURANCE COMPANY USE Policy Number:		
City TOWN OF 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 FRONT VIEW



Photo Two Caption REAR VIEW

Photo Two