	RGENCY MANAGEMENT		O.M.B. No. 3067-0077 Expires July 31, 2002
ELEVA	TION CERTIFICA	TE	
Important: Rea	ad the instructions on pag	ues 1 - 7.	
	ROPERTY OWNER INFORMA	and the second	For Insurance Company Use:
BUILDING OWNER'S NAME	1 <1 .		Policy Number
SHERRI KEILER LANE BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or 573 NOPTON ST	BID NO.) OR P.O. ROUTE AND	ANC BOX NO.	Company NAIC Number
CITY /	STATE	ZIP CODE	
Longboat Kay	FL		54228
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel)	GOON PARK	NO.2	MANATEE CO.
BUILDING USE (e.g., Residential, Non-residential, Addition, Acces	sory, etc. Use Comments section	if necessary.)	
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL	. DATUM: SOUR(] NAD 1983	CE: 🔲 GPS (Type) 🗌 USGS Qua	
SECTION B - FLOOD IN	SURANCE RATE MAP (FIRM) INFORMATION	
B1. NEIP COMMUNITY NAME & COMMUNITY NUMBER B	2. COUNTY NAME	[B3. STATE
B1. NEIE COMMUNITY NAME & COMMUNITY NUMBER B.	MANATEE		FL
B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX NUMBER DATE	B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)
B10. Indicate the source of the Base Flood Elevation (BFE) of		A13	10,0
FIS Profile Surce of the Base Flood Elevation (BFE) Community D			
B11. Indicate the elevation datum used for the BFE in B9:			cribe):
B12. Is the building located in a Coastal Barrier Resources S			
Designation Date			
SECTION C - BUILDING EL	EVATION INFORMATION (SU	JRVEY REQUIRE	ED)
Building elevations are based on: Construction Drawing			Finished Construction
*A new Elevation Certificate will be required when constr			
C2. Building Diagram Number 🗟 (Select the building diagram			cate is being completed - see
pages 6 and 7. If no diagram accurately represents the C3. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V			A30 AR/AH AR/AO
Complete Items C3a-i below according to the building dia			
the datum used for the BFE in Section B, convert the dat			
calculation. Use the space provided or the Comments a			
Datum 1929 Conversion/Comments			
Elevation reference mark used k Does the elevation	reference mark used appear o	n the FIRM?	Yes XNo
a) Top of bottom floor (including basement or enclosu	ire) <u>5</u> . <u>[</u> ft.(pr)	eal,	
b) Top of next higher floor	14.5ft.(m)	License Number, Embossed Seal Signature, and Date	X
c) Bottom of lowest horizontal structural member (V z		Embosse and Date	(2)
d) Attached garage (top of slab)	<u>5</u> .1ft.(m)	and	A 2 2012 D
 e) Lowest elevation of machinery and/or equipment 	10.0ft.(m)	ure,	a bar to
servicing the building	<u></u> <u></u> <u></u> <u></u> <u></u> <u></u> <u></u> <u></u>	s Number, Signature	1638 118
 f) Lowest adjacent grade (LAG) g) Highest adjacent grade (HAG) 	4. Gft.(m)	Sie	S. Namelie
 h) No. of permanent openings (flood vents) within 1 ft 		C Icer	CN PS NJ
 i) Total area of all permanent openings (flood vents) in 	n C3h4600sq. in. (sq. cm)	· - D	1 Jon 1 Carl
SECTION D - SURVEYOR	, ENGINEER, OR ARCHITECT	CERTIFICATIO	N
This certification is to be signed and sealed by a land survey	yor, engineer, or architect auth	orized by law to c	certify elevation information.
tify that the information in Sections A, B, and C on this lerstand that any false statement may be punishable by	fine or imprisonment under 18	8 U.S. Code, Sec	tion 1001.
TIFIER'S NAME	LICE	ME ASS	4
TITLE	COMPANY NAME B	tC Su	ZUEYING
ADDRESS/1 R BIND	CITY	STATE	ZIP CODE
STAN GATTLERIDGE DUUD	DARASOTA	TELEPHO	NE
SIGNATURE	5/16/00	(941	1342-0349

FEMA Form	81-31.	AUG	99
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REPLACES ALL PREVIOUS EDITIONS

SEE REVERSE SIDE FOR CONTINUATION

IMPORTANT: In these spaces, copy th	e corresponding information fro	om Section A.	For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt.	, Unit, Suite, and/or Bldg. No.) OR P.C		Policy Number
CITY ST3 NORTON S	STATE	ZIP CODE	Company NAIC Number
LONGBOAT		34228	
	RVEYOR, ENGINEER, OR ARCH		
Copy both sides of this Elevation Certifica COMMENTS	te for (1) community official, (2) in	surance agen/company, and	a (3) building owner.
COMMENTS			
			-
			Check here if attachments
SECTION E - BUILDING ELEVATION			
For Zone AO and Zone A (without BFE), co		ne Elevation Certificate is inte	ended for use as supporting
information for a LOMA or LOMR-F, Sectio E1. Building Diagram Number _(Select the		the building for which this ce	rtificate is being completed – see
pages 6 and 7. If no diagram accurate			tilleate is being completed – see
E2. The top of the bottom floor (including b			above or below (check one)
the highest adjacent grade.			
E3. For Building Diagrams 6-8 with opening		por or elevated floor (elevation	on b) of the building is
ft.(m)in.(cm) above the highest a E4. For Zone AO only: If no flood depth nu		bottom floor elevated in acc	cordance with the community's
floodplain management ordinance?			
	OPERTY OWNER (OR OWNER'S		
The property owner or owner's authorized		ctions A, B, and E for Zone	A (without a FEMA-issued or
community-issued BFE) or Zone AO must	sign here.		
PROPERTY OWNER'S OR OWNER'S AUTHO	RIZED REPRESENTATIVE'S NAME		5
ADDRESS	CITY	STAT	TE ZIP CODE
SIGNATURE	DATE	TELE	PHONE
COMMENTS			
	SECTION G - COMMUNITY INFO	RMATION (OPTIONAL)	Check here if attachments
The local official who is authorized by law o			ment ordinance can complete
Sections A, B, C (or E), and G of this Eleval			
G1. The information in Section C was ta	ken from other documentation that	t has been signed and embo	ssed by a licensed surveyor,
engineer, or architect who is author		elevation information. (Indi	cate the source and date of the
elevation data in the Comments are G2. A community official completed Sec		e A (without a FEMA-issued	or community-issued BEE) or
Zone AO.	tion L for a building located in 201	ICA (WILLOUL & LEWA-1350CC	of community-issued bit Ly of
G3. The following information (Items G4	-G9) is provided for community flo	odplain management purpos	ses.
G4. PERMIT NUMBER G5. D	ATE PERMIT ISSUED		OF COMPLIANCE/OCCUPANCY
G7. This permit has been issued for:	New Construction Substantial	ISSUED	
G8. Elevation of as-built lowest floor (includ		ft.(m)	Datum:
G9. BFE or (in Zone AO) depth of flooding a		ft.(m)	Datum:
LOCAL OFFICIAL'S NAME		TITLE	
COMMUNITY NAME		ELEPHONE	
SIGNATURE	[DATE	1
COMMENTS			
			Check here if attachments
FEMA Form 81-31, AUG 99		DCI	PLACES ALL PREVIOUS EDITIONS
		RCI	LAVES ALL PREVIOUS EDITIONS