

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

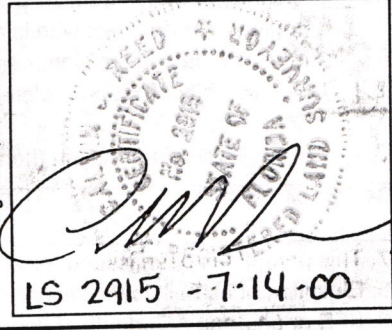
Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:
BUILDING OWNER'S NAME MARION SAVAGE		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 5821 GULF OF MEXICO DRIVE		Company NAIC Number
CITY LONG BOAT KEY	STATE FL	ZIP CODE 34228
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PART OF THE N'LY 80' OF LOT "C" & SLY 40' OF LOT "D" LYING W'LY OF		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL		GULF OF MEX. DR.
LATITUDE/LONGITUDE (OPTIONAL) (##° -##' -##.##" or #######°)	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____
N/A		

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION		
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER TOWN OF LONGBOAT KEY 125126	B2. COUNTY NAME MANATEE	B3. STATE FLORIDA
B4. MAP AND PANEL NUMBER 125126-0005	B5. SUFFIX D	B6. FIRM INDEX DATE 5-18-92
B7. FIRM PANEL EFFECTIVE/REVISED DATE 4-20-70 / 5-18-92		B8. FLOOD ZONE(S) A-13 & V-17
B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) A-13+11.0'; A-13+12.0'; V-17+13.0'; V-17+16.0'		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe): _____		
B11. Indicate the elevation datum used for the BFE in B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe): _____		
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____		

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction *A new Elevation Certificate will be required when construction of the building is complete.	
C2. Building Diagram Number <u>6</u> (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)	
C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO Complete Items C3a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion. Datum NGVD 1929 Conversion/Comments N/A	
Elevation reference mark used SARA.CO.Bm Does the elevation reference mark used appear on the FIRM? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<input checked="" type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>7.33</u> ft.(m)
<input checked="" type="checkbox"/> b) Top of next higher floor	<u>19.89</u> ft.(m)
<input checked="" type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>18.20</u> ft.(m)
<input checked="" type="checkbox"/> d) Attached garage (top of slab)	<u>6.83</u> ft.(m)
<input checked="" type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>13.00</u> ft.(m)
<input checked="" type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>6.60</u> ft.(m)
<input checked="" type="checkbox"/> g) Highest adjacent grade (HAG)	<u>6.60</u> ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>N/A</u>
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	<u>N/A</u> sq. in. (sq. cm)

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 in Sections A, B, and C 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.	
CERTIFIER'S NAME CALVIN J. REED	LICENSE NUMBER LS 2915
TITLE PROFESSIONAL LAND SURVEYOR	COMPANY NAME CALVIN REED SURVEYING, INC.
ADDRESS 4600 TRIPPAR DR.	CITY SARASOTA
SIGNATURE <i>[Signature]</i>	STATE FL
DATE 07-14-00	ZIP CODE 34234
	TELEPHONE 941-351-2317



IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 5821 GULF OF MEXICO DR.			Policy Number
CITY LONG BOAT KEY	STATE FL	ZIP CODE	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

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

* **COMMENTS** STRUCTURE LIES IN FEMA ZONE V-17 ELEVATION ^{BASE FLOOD} + 13.0'.

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number _____ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is _____ ft.(m) _____ in.(cm) above or below (check one) the highest adjacent grade.
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is _____ ft.(m) _____ in.(cm) above the highest adjacent grade.
- E4. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

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.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME			
ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPHONE	
COMMENTS			

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local 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-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m) Datum: _____

G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____

LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
SIGNATURE	DATE
COMMENTS	

Check here if attachments

V-ZONE CONSTRUCTION CERTIFICATE

Name SAVAGE RESIDENCE Policy No. _____
 Street Address 5821 GULF OF MEXICO DRIVE
 Other Description _____
 City LONGBOAT KEY State FL Zip Code 34228

Section I - Flood Insurance Rate Map Information

COMMUNITY NO.	PANEL NO.	SUFFIX	DATE OF FIRM	FIRM ZONE	BASE FLOOD ELEV IN FEET, MMS HEIGHT	COMMUNITY ESTIMATED BASE FLOOD ELEVATION ESTABLISHED FOR ZONE A OR ZONE V, IF AVAILABLE
125126	0005	D	05-18-92	V-17	13.0	

Section II - Elevation Information

1. Bottom of the Lowest Horizontal Structural Member..... 18.20 ft.
2. Base Flood Elevation..... 13.00 ft.
3. Elevation of Highest Adjacent Grade..... 6.60 ft.
4. Elevation of Lowest Adjacent Grade..... 6.60 ft.
5. Elevation of Bottom of Pilings or Foundation..... 14.00 ft.

SECTION III - V Zone Certification Statement

[NOTE: This section must be completed by a registered engineer or architect.]

I certify that based upon development and/or review of structural design, specifications, and plans for construction including consideration of the hydrostatic, hydrodynamic and impact loading involved, that the 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 (excluding the pilings or columns) is elevated to or above the base flood elevation;
- The pile or column foundation and structure attached thereto is anchored to resist flotation, collapse and lateral movement due to the effects of wind and water loads acting simultaneously on all building components.

SECTION IV - Breakaway Wall Certification Statement

[NOTE: This section must be completed by a registered engineer or architect when breakaway walls are used which exceed a design safe loading resistance of 20 pounds per square foot.]

I certify that based upon development and/or review of structural design, specifications, and plans for construction that the design and methods of construction of the breakaway walls are in accordance with accepted standards of practice for meeting the following provisions:

- Breakaway collapse shall result from a water load less 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 building components;
- The space below the lowest floor is useable solely for parking of vehicles, building access and storage.

SECTION V - Certification

Check one: Section III _____, Section IV _____, Sections III and IV _____
 Certifier's Name STEPHEN WILBUR
 Title STRUCTURAL ENGINEER License No. RE 12119
 Company Name STIRLING & WILBUR ENGINEERING GROUP
 Street Address 9085 SO. TAMiami TRAIL
 City SARASOTA State FL Zip 34231
 Signature [Signature] Telephone 941-929-1552

