## 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) incommunity official (2) incommunity official (2) incommunity official (3) incommunity official (3)

A1. Building Owner's Name HUNT BROTHERS DEVELOPMENT  A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  585 HALYARD LANE  City LONGBOAT KEY  State LONGBOAT KEY  State Florida  A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  LOT 8, BLOCK B, COUNTRY CLUB SHORES UNIT #4, TAX ID #0010020020  A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)  A5. Latitude/Longitude: Lat. 27.34611° Long82.59896°  Horizontal Datum: NAD 1927 NAD 1983  A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.  A7. Building Diagram Number 6
State ZIP Code Addition, etc.)  City State Florida 34228  A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  LOT 8, BLOCK B, COUNTRY CLUB SHORES UNIT #4, TAX ID #0010020020  A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL  A5. Latitude/Longitude: Lat. 27.34611° Long82.59896° Horizontal Datum: NAD 1927 NAD 1983  A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.
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A7. Building Diagram Number 6
A8. For a building with a crawlspace or enclosure(s):
a) Square footage of crawlspace or enclosure(s) sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 3
c) Total net area of flood openings in A8.b sq in
d) Engineered flood openings?   Yes  No
A9. For a building with an attached garage:
a) Square footage of attached garage 0 sq ft
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0
c) Total net area of flood openings in A9.b 0 sq in
d) Engineered flood openings? Yes X No
a) Eliginosios noos openingo. Teo [X] No
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION
B1. NFIP Community Name & Community Number B2. County Name B3. State
TOWN OF LONGBOAT KEY - 125126 SARASOTA Florida
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date B8. Flood Zone(s) B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)
12115C-0126 F 11-04-2016 AE 10'
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item BECEIVED
☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other/Source:
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:
TOWN OF LONGBOAT KEY
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? The Building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?
Designation Date: CBRS OPA

## **ELEVATION CERTIFICATE**

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.					CE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 585 HALYARD LANE				Number:	E COMPANT USE
LONGROUP		Code 228	Compa	any NAIC I	Number
SECTION C - BUILDING	ELEVATION INFORMA	TION (SURVEY R	EQUIRE	D)	
	iction Drawings*	ilding Under Constru			hed Construction
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE Complete Items C2.a–h below according to the b Benchmark Utilized: NGS #A715 EL:7.72'	F) VF V1_V30 V (with B	BFE), AR, AR/A, AR/ I in Item A7. In Puert	AE, AR/	A1-A30, Anly, enter	AR/AH, AR/AO. meters.
Indicate elevation datum used for the elevations in					
☐ NGVD 1929  ☐ NAVD 1988 ☐ Other	er/Source:				
Datum used for building elevations must be the sa		BFE.			
a) Top of bottom floor (including basement, crawledge)	danna or analogues flag				easurement used.
b) Top of the next higher floor	space, or enclosure floor	)		X feet	meters
c) Bottom of the lowest horizontal structural mem	shor (// Zanca anh/)			⊠ feet	☐ meters
d) Attached garage (top of slab)	ber (v Zones only)			⊠ feet	☐ meters
e) Lowest elevation of machinery or equipment so	sandaina tha buildina		7.0	× feet	meters
(Describe type of equipment and location in Co	omments)		11.4		meters
f) Lowest adjacent (finished) grade next to building	ng (LAG)		6.5		meters
g) Highest adjacent (finished) grade next to buildi	ing (HAG)		6.9	✓ feet	meters
<ul> <li>h) Lowest adjacent grade at lowest elevation of d structural support</li> </ul>	eck or stairs, including		6.7		meters
SECTION D - SURVEYO	R, ENGINEER, OR ARC	CHITECT CERTIFI	CATION		_
This certification is to be signed and sealed by a land s I certify that the information on this Certificate represen- statement may be punishable by fine or imprisonment	surveyor, engineer, or arch	chitect authorized by			ation information. hat any false
Were latitude and longitude in Section A provided by a			□с	heck here	e if attachments.
Certifier's Name B. GREGORY RIETH	License Number			27/02	
Title	5228		3	1.1	/w
PSM/CFM			323	(1)	10
Company Name STRAYER SURVEYING AND MAPPING, INC.				Po	acev
Address 742 SHAMROCK BLVD			14	X	ere
City VENICE	State Florida	ZIP Code 34293	1	191	ģ
Signature	Date 05-16-2017	Telephone (941) 497-1290	Ext.		
Copy all pages of this Elevation Certificate and all attachm	ents for (1) community off	icial. (2) insurance ac	rent/com	nany and	/2) building owner
Comments (including type of equipment and location, per FILE # 15-11-40. THE HOT WATER HEATER WAS USI ENGINEERED FOR 600 SQUARE INCHES (TOTAL). SAREA ABOVE THE GARAGE. SECTION A5 WAS DER CONVERSION). CERTIFICATE VALID ONLY WITH RA	er C2(e), if applicable) SED FOR SECTION C2e. : SUBJECT STRUCTURE IS	3 SMART VENTS H	IAVE BE RESIDEN PSTEST	ENINSTA	ALLED

TOWN OF LONGBOAT KEY

### **ELEVATION CERTIFICATE**

OMB No. 1660-0008

			Expiration Date: November 30, 2018
IMPORTANT: In these spaces, copy the corres	sponding information fr	om Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suit 585 HALYARD LANE	te, and/or Bldg. No.) or P	O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
LONGBOAT KEY	Florida	34228	
	ZONE AO AND ZONE	A (WITHOUT BFE)	•
For Zones AO and A (without BFE), complete Iter complete Sections A, B,and C. For Items E1–E4, enter meters.	ms E1–E5. If the Certification use natural grade, if avail	ate is intended to support ilable. Check the measure	a LOMA or LOMR-F request, ement used. In Puerto Rico only,
E1. Provide elevation information for the following the highest adjacent grade (HAG) and the low	g and check the appropri	ate boxes to show whether	er the elevation is above or below
<ul> <li>a) Top of bottom floor (including basement.</li> </ul>	Treat dajacont grado (EA	<i>5)</i> .	
crawlspace, or enclosure) is		feet mete	rs above or below the HAG.
<ul> <li>Top of bottom floor (including basement, crawlspace, or enclosure) is</li> </ul>			
N VI CONSCIONA		feet _ mete	
E2. For Building Diagrams 6–9 with permanent fluthe next higher floor (elevation C2.b in	ood openings provided in	Section A Items 8 and/or	9 (see pages 1-2 of Instructions),
the diagrams) of the building is		feet _ mete	rs above or below the HAG.
E3. Attached garage (top of slab) is		feet mete	
E4. Top of platform of machinery and/or equipme	ent		Below the FIAG.
servicing the building is		feet mete	rs above or below the HAG.
E5. Zone AO only: If no flood depth number is available floodplain management ordinance?  Yes	ailable, is the top of the b	nottom floor elevated in ac n. The local official must	cordance with the community's certify this information in Section G.
SECTION F - PROPERTY	OWNER (OR OWNER'S	REPRESENTATIVE) CI	ERTIFICATION
The property owner or owner's authorized represent	atativa viba I I O		
	ic. The statements in Se	ctions A, B, and E for Zo	ne A (without a FEMA-issued or rect to the best of my knowledge.
Property Owner or Owner's Authorized Representa	ative's Name		
Address	City	Sta	ate ZIP Code
Sianati un			
Signature	Dat	e Te	lephone
Comments			
			RECEIVED
			JUN 0 5 2017
			TOWN OF LONGBOAT KEY
			Planning Zoning and Building

Check here if attachments.

OMB No. 1660-0008

**ELEVATION CERTIFICATE** Expiration Date: November 30, 2018 IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number: 585 HALYARD LANE City State ZIP Code Company NAIC Number LONGBOAT KEY Florida 34228 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. Check the measurement used in Items G8-G10. In Puerto Rico only, enter meters. 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.) A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) G2. 🗆 or Zone AO. The following information (Items G4-G10) is provided for community floodplain management purposes. G4. Permit Number G5. Date Permit Issued G6. Date Certificate of Compliance/Occupancy Issued G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement G8. Elevation of as-built lowest floor (including basement) of the building: 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 location, per C2(e), if applicable) RECEIVED JUN 0 5 2017 TOWN OF LONGBOAT KEY lanning, Zoning and Building Check here if attachments.

### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

See Instructions for Item A6.

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 585 HALYARD LANE			
City LONGBOAT KEY	State Florida	ZIP Code 34228	Company NAIC Number

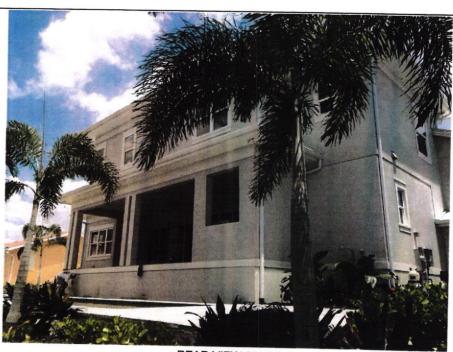
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, 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.



FRONT VIEW 05/16/17

Photo One Caption

Clear Photo One



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TOWN OF LONGBOAT KEY Planning, Zoning and Building

Photo Two Caption

REAR VIEW 05/16/17

Clear Photo Two

FEMA Form 086-0-33 (7/15)

Replaces all previous editions.

Form Page 5 of 6

### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

Continuation Page

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 585 HALYARD LANE			Policy Number:	
City LONGBOAT KEY	State Florida	ZIP Code 34228	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 Three Caption

Clear Photo Three



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VENTS 05/16/17

Photo Four Caption

Clear Photo Four