## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

## **ELEVATION CERTIFICATE**

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

Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: DING OWNER'S NAME Policy Number METRIX CONSTRUCTION CORPORATION BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 585 OUTRIGGER LANE CITY ZIP CODE LONGBOAT KEY PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 1, BLOCK B, COUNTRY CLUB SHORES, UNIT 3, SECTION 1 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): ( ##° - ##' - ##.##" or ##.####") □ NAD 1927 ☒ NAD 1983 USGS Quad Map Other: 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 AND PANEL B5. SUFFIX B6. FIRM INDEX B7. FIRM PANEL** B8. FLOOD B9. BASE FLOOD ELEVATION(S) NUMBER DATE EFFECTIVE/REVISED DATE ZONE(S) (Zone AO, use depth of flooding) 0010 В 08/15/83 05/18/92 A13 11 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. ⊠ FIRM ☐ Community Determined Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: 

✓ NGVD 1929 

✓ NAVD 1988 

✓ Other (Describe): B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: ☐ Construction Drawings\* ☐ Building Under Construction\* new Elevation Certificate will be required when construction of the building is complete. jilding Diagram Number  $m{\mathcal{I}}$  (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 Conversion/Comments Elevation reference mark used RMS Does the elevation reference mark used appear on the FIRM? Yes No o a) Top of bottom floor (including basement or enclosure) 2 MD FLOOR o b) Top of next higher floor Embossed o c) Bottom of lowest horizontal structural member (V zones only) AA ft.(m) o d) Attached garage (top of slab) o e) Lowest elevation of machinery and/or equipment icense Number, servicing the building o f) Lowest adjacent grade (LAG) g) Highest adjacent grade (HAG) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade o i) Total area of all permanent openings (flood vents) in C3h \_\_\_\_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 ROBERT G. BRUCE LICENSE NUMBER 4519 TIT' - OWNER COMPANY NAME RED STAKE SURVEYORS, INC. ESS CITY STATE ZIP CODE 123 PROCTOR ROA SARASOTA 34241 SIGNATURE TELEPHONE 04/26/2002 941-923-9997

IMPORTANT: In these spaces, copy the corresponding information from Section A.				For Insurance Company Use:
BUILDING STREET ADDRESS (Incl 585 OUTRIGGER LANE	luding Apt., Unit, Suite, and/or Bldg. No.)	OR P.O. ROUT	<u> </u>	Policy Number
CITY ONGBOAT KEY	STATE	FL	ZIP CODE	Company NAIC Number
	N D - SURVEYOR, ENGINEER, OR	ARCHITECT	CERTIFICATION (CO	NTINUED)
y both sides of this Elevation	Certificate for (1) community official	l, (2) insurance	e agent/company, and	(3) building owner.
OMMENTS SECTION B - FLOO	DD INSURANCE RATE MAP (FIRM) INF	ORMATION TO	BE VERIFIED AT LOCAL	F.E.M.A. CONTROL OFFICE.
				Check here if attachmen
	EVATION INFORMATION (SURVE)			
formation for a LOMA or LOMR- 1. Building Diagram Number(	t BFE), complete Items E1 through E -F, Section C must be completed. Select the building diagram most sin a accurately represents the building,	nilar to the bui	lding for which this cert	
<ol><li>The top of the bottom floor (ir the highest adjacent grade.</li></ol>	ncluding basement or enclosure) of t	he building is	ft.(m)in.(cm)	above or
	th openings (see page 7), the next he highest adjacent grade	igher floor or	elevated floor (elevation	n b) of the building is
4. For Zone AO only: If no flood	d depth number is available, is the to nance?  Yes  No  Unknow			
	ON F - PROPERTY OWNER (OR OV			
	authorized representative who compl			
PROPERTY OWNER'S OR OWNER	R'S AUTHORIZED REPRESENTATIVE'S	S NAME		
ADDRESS		CITY	STATE	ZIP CODE
NATURE		DATE	TELEP	HONE
COMMENTS				
		V=25=		Check here if attachmer
	SECTION G - COMMUNITY			
ections A, B, C (or E), and G of 1. The information in Section engineer, or architect who elevation data in the Com 2. A community official comp Zone AO.	d by law or ordinance to administer this Elevation Certificate. Complete in C was taken from other documentate is authorized by state or local law to ments area below.) Deleted Section E for a building locate (Items G4-G9) is provided for comm	the applicable ation that has to certify eleva	e item(s) and sign below been signed and embos tion information. (Indic without a FEMA-issued	v. ssed by a licensed surveyor, ate the source and date of the or community-issued BFE) or
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		3. DATE CERTIFICATE C	OF COMPLIANCE/OCCUPANCY
67. This permit has been issued 68. Elevation of as-built lowest flo 69. BFE or (in Zone AO) depth of	por (including basement) of the build		ement ft.(m) ft.(m)	Datum: Datum:
LOCAL OFFICIAL'S NAME		TITLE		
COMMUNITY NAME		TELEPH	IONE	
SIGNATURE		DATE		
COMMENTS				
)				*
				☐ Check here if attachmer
EMA Form 81-31, AUG 99			RED	LACES ALL PREVIOUS EDITIO
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