BLDG PERMIT PLANS FILE Copy of Record

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 INSURANCE COMPANY USE							
A1. Building Owner's Name					Policy Number:		
LBK2, LLC							
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 590 Birdie Lane 						AIC Number:	
City State ZIP Code							
	Longboat Key Florida 34228						
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 2, Block B, Country Club Shores, Unit 5, Section One						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential							
A5. Latitude/Longitude: Lat. N	27°20'58" Lo	ng. w	82°36'06"	Horizontal Datun	n: NAD 1	927 X NAD 1983	
A6. Attach at least 2 photograpl	ns of the building if the C	ertific	ate is being used to	obtain flood insura	ance.		
A7. Building Diagram Number	1B						
A8. For a building with a crawls	pace or enclosure(s):						
a) Square footage of crawls	space or enclosure(s)		0 sq ft				
b) Number of permanent flo	ood openings in the craw	Ispace	e or enclosure(s) wi	thin 1.0 foot above	adjacent gr	ade	
c) Total net area of flood or	penings in A8.b0	s	q in				
d) Engineered flood openin	gs? 🗌 Yes 🔲 No						
A9. For a building with an attach	ned garage:						
a) Square footage of attached garage610 sq ft							
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 3							
c) Total net area of flood openings in A9.b 384 sq in							
d) Engineered flood opening							
a) Engineered need openings. [2] 165							
SE	CTION B - FLOOD INS	SURA	NCE RATE MAP	(FIRM) INFORMA	TION		
B1. NFIP Community Name & C	ommunity Number		B2. County Name			B3. State	
Town of Longboat Key 125126 Sarasota Florida							
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	Ef	IRM Panel fective/ evised Date	B8. Flood Zone(s	(Zo	se Flood Elevation(s) ne AO, use Base od Depth)	
12115C0126 F	11/04/2016	11/04		AE	10	ой Берип)	
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 DPA							

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				FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or B 590 Birdie Lane	ldg. No.) or P.O. Rout	e and Box No.	Policy Number:			
			Company NAIC Number			
Longboat Key Florida 34228						
SECTION C - BUILDING ELEV	ATION INFORMAT	ION (SURVEY RI	EQUIRED)			
*A new Elevation Certificate will be required when con		g is complete.		ed Construction		
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VI Complete Items C2.a–h below according to the buildir Benchmark Utilized: DOT 84 A08 REF MK 1	E, V1–V30, V (with BF ng diagram specified in Vertical Datum:	n Item A7. In Puert	/AE, AR/A1–A30, Al to Rico only, enter m 	R/AH, AR/AO. neters.		
Indicate elevation datum used for the elevations in iter ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/So	a ma on	V.				
Datum used for building elevations must be the same	as that used for the B	FE.	Check the mea	surement used.		
a) Top of bottom floor (including basement, crawlspan	ce, or enclosure floor)	11.6	× feet	meters		
b) Top of the next higher floor		25.0	× feet	meters		
c) Bottom of the lowest horizontal structural member	(V Zones only)	N/A.	× feet	meters		
d) Attached garage (top of slab)		<u>7.1</u>		meters		
e) Lowest elevation of machinery or equipment service (Describe type of equipment and location in Communication)	cing the building nents)	<u> </u>	X feet	meters		
f) Lowest adjacent (finished) grade next to building (LAG)	6,6	x feet	meters		
g) Highest adjacent (finished) grade next to building (HAG)	6.9	x feet	meters		
h) Lowest adjacent grade at lowest elevation of deck structural support	or stairs, including	<u>6</u> . <u>5</u>	X feet	meters		
SECTION D - SURVEYOR, E	NGINEER, OR ARC	HITECT CERTIF	ICATION			
This certification is to be signed and sealed by a land survey of the certification is to be signed and sealed by a land survey of the certificate represents a statement may be punishable by fine or imprisonment und	nv best efforts to inter	pret the data avails	y law to certify eleva able. I understand th	ation information. nat any false		
Were latitude and longitude in Section A provided by a lice			Check here	if attachments.		
Certifier's Name	License Number	V-1.100000000000000000000000000000000000	000	- Down		
James Burchett	LS 5701		7000	inchett		
Title President			Sights	5701		
Company Name Sampey, Burchett and Knight, Inc.	Se Pla	de /				
Address 1570 Global Court			He	10		
City Sarasota	State Florida	ZIP Code 34240		W.C.		
Signature Surchett	Date 08/17/2017	Telephone (941) 342-0349	•			
Copy all pages of this Elevation Certificate and all attachmen	its for (1) community of	ficial, (2) insurance	agent/company, and	d (3) building owner.		
Comments (including type of equipment and location, per C2.e) Air Conditioner rear of garage West side of house. A9. Flood Vents, Flood Flaps, FFWF08TFW 220 square in	C2(e), if applicable)					

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MPORTANT: In these spaces, copy the corresponding information from Section A.						ICE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 590 Birdie Lane							
City State ZIP Code Longboat Key Florida 34228				Company NAIC	Number		
LOII	SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED)						
		FOR ZONE AO AND ZO	NE A (WIT	HÒUT BFE)			
con	For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B,and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.						
E1.	E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).a) Top of bottom floor (including basement,						
	crawlspace, or enclosure) is			☐ feet ☐ met	ers 🔲 above or	below the HAG.	
	 Top of bottom floor (including ba crawlspace, or enclosure) is 	sement,		feet met	ers 🗌 above or	below the LAG.	
E2.	 For Building Diagrams 6–9 with peri the next higher floor (elevation C2.b the diagrams) of the building is 		led in Sectio	n A Items 8 and/o		-2 of Instructions), T below the HAG.	
E3.	. Attached garage (top of slab) is			☐ feet ☐ met	ers 🔲 above o	below the HAG.	
E4.	. Top of platform of machinery and/or servicing the building is	equipment	-	☐ feet ☐ met	ers 🗌 above o	r ☐ below the HAG.	
E5.	. Zone AO only: If no flood depth nun floodplain management ordinance?	nber is available, is the top of	the bottom known. The	floor elevated in a local official mus	accordance with the t certify this inforn	ne community's nation in Section G.	
	SECTION F - PR	OPERTY OWNER (OR OWI	NER'S REPI	RESENTATIVE)	CERTIFICATION		
The	e property owner or owner's authorize mmunity-issued BFE) or Zone AO mu	ed representative who comple st sign here. The statements	tes Sections in Sections	s A, B, and E for 2 A, B, and E are c	Zone A (without a orrect to the best	FEMA-issued or of my knowledge.	
Pro	operty Owner or Owner's Authorized F	Representative's Name			10		
Ad	dress		City	;	State	ZIP Code	
Sig	gnature		Date		Telephone		
Co	omments						
					☐ Check	here if attachments.	

ELEVATION CERTIFICATE

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

ELEVATION CERTIFICATE		Expiration Date. November 30, 2016				
MPORTANT: In these spaces, copy the corre		FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Su 590 Birdie Lane	ite, and/or Bldg. No.) or P.O. Route and Box I	No. Policy Number:				
City	State ZIP Code	Company NAIC Number				
Longboat Key	Florida 34228					
SECTIO	N G - COMMUNITY INFORMATION (OPTIO	NAL)				
The local official who is authorized by law or ord Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, entered the information in Section C was take	Certificate. Complete the applicable item(s) a ter meters. en from other documentation that has been significantly and the second sec	nd sign below. Check the measurement gned 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 or Zone AO.	on E for a building located in 2016 A (without	a i Livin-issued of community-issued bi Ly				
G3. The following information (Items G4-	G10) is provided for community floodplain ma	nagement 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 Improvem	ent				
G8. Elevation of as-built lowest floor (including of the building:	basement)	feet meters Datum				
G9. BFE or (in Zone AO) depth of flooding at	feet meters Datum					
G10. Community's design flood elevation:						
Local Official's Name	Title					
Community Name	Telephone					
Signature	Date					
Comments (including type of equipment and loa	cation, per C2(e), if applicable)					
a a		RECEIVED				
		AUG 2 5 2017				
		TOWN OF LONGBOAT KEY				

Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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IMPORTANT: In these spaces, copy th	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., 590 Birdie Lane	o. Policy Number:		
City	State	ZIP Code	Company NAIC Number
Longboat Key	Florida	34228	

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



BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, copy the c	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Uni 590 Birdie 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 One

Photo One Caption

