O.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

FEMA Form 086-0-33 (7/12)

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

SECTI	ION A DEODERTY INE	DEMATION I	FOR INSURANCE COMPANY USE			
A1. Building Owner's Name Ms. Kimberly Howard	ION A – PROPERTY INFO	DRIVIATION	Policy Number:			
		\				
A2. Building Street Address (including Apt., Unit, Suite, and/or B 5911 EMERALD HARBOR DRIVE			Company NAIC Number:			
City LONGBOAT KEY	State FL ZIP Co	ode 34228				
A3. Property Description (Lot and Block Numbers, Tax Parcel No. IDS DESCRIBED IN ORB 2471, PAGE 5174-5176 Public Re	umber, Legal Description, etc cords of Sarasota County Flo	:.) orida				
 b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b d) Engineered flood openings? Yes No 	3.7764" e is being used to obtain flood A9. F N/A sq ft a b N/A N/A sq in c	for a building with an attact) Square footage of attact) Number of permanent within 1.0 foot above at Total net area of flood Engineered flood oper	ached garage <u>583</u> sq ft flood openings in the attached garage adjacent grade <u>5</u> openings in A9.b <u>1000</u> sq in nings? \square Yes \square No			
SECTION B – FLOOD I	INSURANCE RATE MAP	(FIRM) INFORMATIO	N			
	B2. County Name SARASOTA		B3. State FLORIDA			
B4. Map/Panel Number B5. Suffix D B6. FIRM Index D6 -8/45/83 5/18/92	ate B7. FIRM Panel Effective/Revised Da = 6/18/92	B8. Flood Zone(s) A13	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) EL 11			
B10. Indicate the source of the Base Flood Elevation (BFE) data	or base flood depth entered in		•			
☐ FIS Profile ☐ FIRM ☐ Community Dete						
 B11. Indicate elevation datum used for BFE in Item B9: \(\simeq \) NGV B12. Is the building located in a Coastal Barrier Resources Syste Designation Date: 	'D 1929 ☐ NAVD 198 em (CBRS) area or Otherwise ☐ CBRS ☐ OPA	Protected Area (OPA)?	☐ Yes ⊠ No			
SECTION C – BUILDING I	ELEVATION INFORMATI	ON (SURVEY REQUI	RED)			
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. 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 C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: MANATEECTYBM142903EL4.824 Vertical Datum: NGVD 1929 Indicate elevation datum used for the elevations in items a) through h) below. Datum used for building elevations must be the same as that used for the BFE.						
			k the measurement used.			
a) Top of bottom floor (including basement, crawlspace, or er	nclosure floor)	<u>12</u> .02 N/A.	☐ feet ☐ meters ☐ meters			
 b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zone 	es only)	N/A.	feet meters			
d) Attached garage (top of slab)	o omy)	<u>6.51</u>	⊠ feet ☐ meters			
e) Lowest elevation of machinery or equipment servicing the (Describe type of equipment and location in Comments)	building	<u>11.65</u>	☐ feet ☐ meters			
f) Lowest adjacent (finished) grade next to building (LAG)		<u>4.2</u>	⊠ feet ☐ meters			
 g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs 	s, including structural support	<u>5.3</u> 5.46	☐ feet ☐ meters ☐ meters			
SECTION D – SURVEYO	R, ENGINEER, OR ARCH	HITECT CERTIFICATION				
This certification is to be signed and sealed by a land surveyor, a information. I certify that the information on this Certificate repressive I understand that any false statement may be punishable by fine. Check here if comments are provided on back of form. Check here if attachments. Certifier's Name WALTER J. SMITH	engineer, or architect authoriz sents my best efforts to interp or imprisonment under 18 U. Were latitude and longitude licensed land surveyor?	ted by law to certify eleva tret the data available. S. Code, Section 1001.	tion San San San San San San San San San Sa			
Title PROF SURVEYOR Company Name (Address 1215 MANATEE AVE WEST City BRADENTON	OMC SURVEYING & MAPPII State FL	NG, LLC ZIP Code 34205	- STATE OF			
Gignature Date 3/31/15		941.345.5451	- Washington			

See reverse side for continuation.

Replaces all previous editions.

ELEVATION CERTIFICATE,	page 2						
IMPORTANT: In these spaces,	, copy the corresponding information from Section A.	FOR	INSURANCE COMPANY USE				
Building Street Address (including A 5911 EMERALD HARBOR DRIVE	Policy	/ Number:					
City LONGBOAT KEY	State FL ZIP Code 34228	Comp	pany NAIC Number:				
SECTIO	ON D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICAT	ION (CONTI	NUED)				
Copy both sides of this Elevation Ce	ertificate for (1) community official, (2) insurance agent/company, and (3)	building owner.					
OCK AS LOCATED ON 3/30/15.	THIS INTERIM ELEVATION CERTIFICATE IS TO SHOW THE FINISHED THE BENCH MARK SOURCE/BASIS IS MANATEE COUNTY BM14-29- CURB AT 5911 EMERALD HARBOR DRIVE ELEVATION 3.89 NGVD 19: ENT.	·03 EL4.824 NC	GVD 1929 AND SITE BM PKN				
Signature Signature	Date 3/31/15						
SECTION E - BUILDING EL	LEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZO	ONE AO AND	ZONE A (WITHOUT BFE)				
and C. For Items E1–E4, use natural E1. Provide elevation information grade (HAG) and the lowest a a) Top of bottom floor (including b) Top of Building Diagrams 6–9 with (elevation C2.b in the diagrams b) E3. Attached garage (top of slab) E4. Top of platform of machinery E5. Zone AO only: If no flood deptation of the slab in	ng basement, crawlspace, or enclosure) is feet meters above or above or below the HA and/or equipment servicing the building is feet meters feet meters above or feet meters above or feet meters above or feet meters feet	enter meters. evation is above meters above pages 8–9 of libelow the HAG. ters above ence with the cor	e or below the highest adjacent ove or below the HAG. ove or below the LAG. nstructions), the next higher floor G. or below the HAG.				
	Unknown. The local official must certify this information in Section G		.=				
	ON F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE porized representative who completes Sections A, B, and E for Zone A (with the complete in th						
or Zone AO must sign here. The sta	iorized representative who completes Sections A, B, and E for Zone A (wi atements in Sections A, B, and E are correct to the best of my knowledge.	ILITOUL A FEIVIA-	ssued of confinding-issued bit L				
Property Owner's or Owner's Autho	rized Representative's Name						
Address	City	State	ZIP Code				
Signature	Date	Telephone					
mments			3				
			Check here if attachments				
.*	SECTION G - COMMUNITY INFORMATION (OPTION						
The local official who is authorized by of this Flevation Certificate. Complete	law or ordinance to administer the community's floodplain management ord the applicable item(s) and sign below. Check the measurement used in Iter	linance can con ns G8–G10. In	nplete Sections A, B, C (or E), and G Puerto Rico only, enter meters.				
G1. ☐ The information in Section	C was taken from other documentation that has been signed and sealed ify elevation information. (Indicate the source and date of the elevation d	by a licensed s	urveyor, engineer, or architect who				
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–G10) is provided for community floodplain management purpos	ses.					
G4. Permit Number	G5. Date Permit Issued G6. Date Certification	ate Of Complian	nce/Occupancy Issued				
G7. This permit has been issued for	: New Construction Substantial Improvement		,				
G8. Elevation of as-built lowest floor	r (including basement) of the building: feet	eters Dat	tum				
G9. BFE or (in Zone AO) depth of flo	ooding at the building site: feet	eters Dat	tum				
G10. Community's design flood eleva	ation: feet _ me	eters Dat	tum				
Local Official's Name	D. Cushing Title Buildin	9 Offi	cial				
Community Name Town of L	Tolophon .	316-1966					
Signature .	Date /0-3-/6	4					
Comments 86, 27 Chan	ged to proper dates.		☐ Check here if attachments				

ELEVATION CERTIFICATE, page 3

Building Photographs See Instructions for Item A6.

FOR INSURANCE COMPANY USE IMPORTANT: In these spaces, copy the corresponding information from Section A. Policy Number: Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5911 EMERALD HARBOR DRIVE ZIP Code 34228 Company NAIC Number: State FL City LONGBOAT KEY

"using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions 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:



REAR VIEW:



SOUTH SIDE:



NORTH SIDE WITH VENTS:



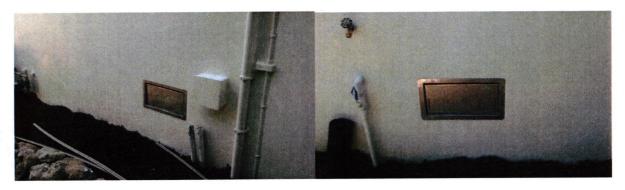
ELEVATION CERTIFICATE, page 4

Building Photographs Continuation Page

,	Continuation	age	
IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE Policy Number:		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No 5911 EMERALD HARBOR DRIVE			
City LONGBOAT KEY	State FL	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 'h: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, otographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

SMART VENTS NORTH SIDE GARAGE (3):





SMART VENT SOUTH SIDE GARAGE (1):



SMART VENT UNDER A/C PAD (1):

