U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

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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 i	(1)	community c	official,	(2) insurance ag	gent/company	, and ((3) b	building owner.
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		TION A - PROPERTY					
						FOR INSURANCE COMPANY USE Policy Number:	
THE ASHLAND							
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 601 TITON BEND 							IAIC Number:
City State ZIP Code							
SARASOTA Florida 34228							
A3. Property Desc LOT 1, COLLIER-		nd Block Numbers, Ta	ax Parce	l Number, Le	gal Description, et	c.)	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL							
A5. Latitude/Longit	ude: Lat. 2	7°22'17.8 N	Long, 8	2°37'42.6" W	Horizonta	I Datum: 🗌 NAD '	927 🛛 NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being u	sed to obtain floo	d insurance.	
A7. Building Diagra							
0 0		pace or enclosure(s):					÷
0		space or enclosure(s)			0.00 sq ft		
		ood openings in the cr				abovo adiacont ar	odo 0
		penings in A8.b	amopad	0.00 sq ir		above adjacent gra	due <u>0</u>
				Sy II			
u) Engineered	d) Engineered flood openings? 🗌 Yes 🔀 No						
A9. For a building w	A9. For a building with an attached garage:						
a) Square footage of attached garage 462.00 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 384.00 sq in							
d) Engineered flood openings? X Yes No							
	SE	CTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM) INF	ORMATION	
B1. NFIP Communi 125126 SARASOT	-	Community Number		B2. County SARASOTA		dana kaominina dia kaominina dia 2014 dia kaominina dia kaominina dia kaominina dia kaominina dia kaominina dia	B3. State Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	evation(s) Base Flood Depth)
12115C0107	F	11-04-2016	11-04-2		AE	10'	
		Base Flood Elevation				in Item B9:	
		sed for BFE in Item B			× NAVD 1988	Other/Source:	,
B12 le the building	located in -	Cooptal Damias De		atom (ODDO)		-	
	B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected AREPEVED IN No						
Designation [)ate:		CBRS	Ο ΟΡΑ		MA	R 1 2 2018
EEMA Earm 086 0 22	(7/45)					TANALAT	-LONGBOAT KEY

IMPORTANT: In these spaces, copy the	he corresponding information from	Section A	Expiration Date: November 30, 20 FOR INSURANCE COMPANY U
Building Street Address (including Apt., 601 TITON BEND			Policy Number:
City SARASOTA		ZIP Code 34228	Company NAIC Number
SECTION C	- BUILDING ELEVATION INFORM	ATION (SURVEY R	EQUIRED)
C1. Building elevations are based on: *A new Elevation Certificate will b	Construction Drawings*	-	uction* 🛛 Finished Constructior
C2. Elevations – Zones A1–A30, AE, Complete Items C2.a–h below ac Benchmark Utilized: SARCOUNT	cording to the building diagram specifi	ed in Item A7. In Puer	X/AE, AR/A1–A30, AR/AH, AR/AO. to Rico only, enter meters.
	the elevations in items a) through h) b	um: <u>88 DATUM</u>	
	1988 Other/Source:	elow.	
	s must be the same as that used for th	ne BFE.	
a) Top of bottom floor (including l	basement, crawlspace, or enclosure fl		Check the measurement used 11.45 X feet meters
	basement, crawispace, or enclosure th		22.77 feet meters
b) Top of the next higher floorc) Bottom of the lowest herizonta	letructural member (1/Zanas and 1)		N/A feet meters
d) Attached garage (top of slab)	l structural member (V Zones only)	-	8.27 X feet meters
	or equipment convising the building		
(Describe type of equipment a	or equipment servicing the building nd location in Comments)		11.72 X feet meters
f) Lowest adjacent (finished) gra	de next to building (LAG)		5.90 X feet meters
g) Highest adjacent (finished) gra	ade next to building (HAG)		7.70 X feet meters
 h) Lowest adjacent grade at lowe structural support 	est elevation of deck or stairs, including]	N/A feet meters
SECTION	D – SURVEYOR, ENGINEER, OR A	RCHITECT CERTIF	ICATION
This certification is to be signed and se I certify that the information on this Ce statement may be punishable by fine c	rtificate represents my best efforts to i	nterpret the data availa	y law to certify elevation information able. I understand that any false
Were latitude and longitude in Section	A provided by a licensed land surveyo	or? 🛛 Yes 🗌 No	Check here if attachments.
Certifier's Name	License Number		1 1
GERALD D. STROOP JR	4679		1/08/2018
Title PLS			/ (
Company Name			Place
Company Name CROSS SURVEYING			Seal
Address 5265 OFFICE PARK BLVD SUITE 10	01		Here
City BRADENTON	State Florida	ZIP Code 34203	M. get Sta
Signature	Date 01-08-2018	Telephone (941) 748-8340	Ext
man	te and all attachments for (1) communit	y official, (2) insurance	agent/company, and (3) building owr
Copy all pages of this Elevation Certifica			
Copy all pages of this Elevation Certifica Comments (including type of equipmer AC IS ON THE RIGHT SIDE OF THE SMART VENT MODEL (1540-520) US	and location, per C2(e), if applicable HOUSE ELEV =11.72)	RECEIVED
Comments (including type of equipmen AC IS ON THE RIGHT SIDE OF THE	and location, per C2(e), if applicable HOUSE ELEV =11.72		RECEIVED MAR 1 2 2018 OWN OF LONGBOAT KEY

ÉLEVATION CERTIFICATE			OMB No. 1660-0008 Expiration Date: November 30, 2018
IMPORTANT: In these spaces, copy the corresp	onding informatio	on from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite 601 TITON BEND	, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
City SARASOTA	State Florida	ZIP Code 34228	Company NAIC Number
SECTION E – BUILDING FOR Z	ELEVATION INF	ORMATION (SURVEY NO	T REQUIRED)
For Zones AO and A (without BFE), complete Item complete Sections A, B,and C. For Items E1–E4, u enter meters.	s E1–E5. If the Cer se natural grade, if	tificate is intended to suppor available. Check the measu	t a LOMA or LOMR-F request, rement used. In Puerto Rico only,
 E1. Provide elevation information for the following the highest adjacent grade (HAG) and the low a) Top of bottom floor (including basement, 			ner the elevation is above or below
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet me	
crawlspace, or enclosure) is E2. For Building Diagrams 6–9 with permanent floo	od openinas provid	ed in Section A Items 8 and/	
the next higher floor (elevation C2.b in the diagrams) of the building is		feet met	
E3. Attached garage (top of slab) is		feet met	ers above or below the HAG.
E4. Top of platform of machinery and/or equipmen servicing the building is	t	feet 🗌 met	ers 🗌 above or 🗌 below the HAG.
E5. Zone AO only: If no flood depth number is ava floodplain management ordinance?			accordance with the community's it certify this information in Section G.
SECTION F - PROPERTY	OWNER (OR OWN	ER'S REPRESENTATIVE)	CERTIFICATION
The property owner or owner's authorized represer community-issued BFE) or Zone AO must sign here	ntative who complet e. The statements i	tes Sections A, B, and E for Z n Sections A, B, and E are c	Zone A (without a FEMA-issued or orrect to the best of my knowledge.
Property Owner or Owner's Authorized Representa	tive's Name		
Address		City	State ZIP Code
Signature		Date	Felephone
Comments			
			RECEIVED
			MAR check 2018 if attachments.

Replaces all previous editions.

TOWN OF LONGBOAF the Page 3 of 6 Planning, Zoning & Building

ÉLEVATION CERTIFICATE			OMB No. 1660-0008 Expiration Date: November 30, 2018
IMPORTANT: In these spaces, copy the corr			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, S 601 TITON BEND	uite, and/or Bldg. No.)	or P.O. Route and Box	No. Policy Number:
City SARASOTA	State Florida	ZIP Code 34228	Company NAIC Number
SECTIO	DN G - COMMUNITY	INFORMATION (OPTIC	DNAL)
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete	the community's floodp the applicable item(s) a	ain management ordinance can complete Ind sign below. Check the measurement
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)	en from other docume ed by law to certify ele	entation that has been si evation information. (Ind	gned and sealed by a licensed surveyor, icate the source and date of the elevation
G2. A community official completed Section or Zone AO.	on E for a building loc	ated in Zone A (without	a FEMA-issued or community-issued BFE)
G3. The following information (Items G4-	G10) is provided for c	ommunity floodplain ma	nagement purposes.
G4. Permit Number	G5. Date Permit Iss	ued	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:	g basement)	[feet meters
G9. BFE or (in Zone AO) depth of flooding at	he building site:	[feet imeters 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 loc	cation, per C2(e), if ap	plicable)	
			DEACHUCA
			RECEIVED
			MAR 1 2 2018

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ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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

IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE		
Building Street Address (including A	Policy Number:		
601 TITON BEND			
City	State	ZIP Code	Company NAIC Number
SARASOTA	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.

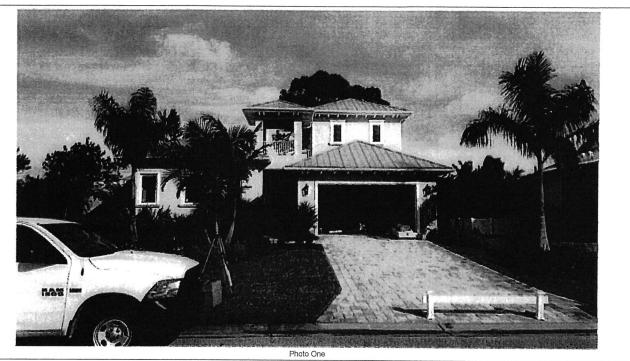


Photo One Caption FRONT HOSE AND GARAGE 01-08-2018

Clear Photo One

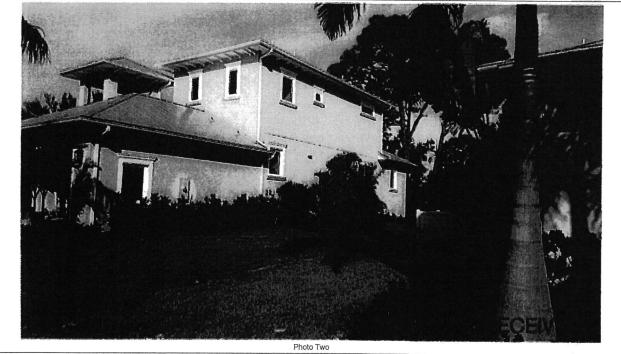


Photo Two Caption RIGHT SIDE 01-08-2018

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

Replaces all previous editions.

MAR 1 2 2018 Clear Photo Two

TOWN OF LONGBOAT KEY

ELEVATION CERTIFICATE

2.2

BUILDING PHOTOGRAPHS

Continuation Page

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

IMPO TANT: in these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Un 601 TITON BEND	Policy Number:		
City SARASOTA	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.

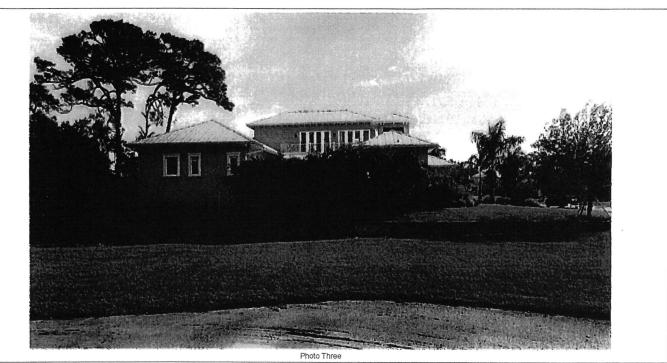
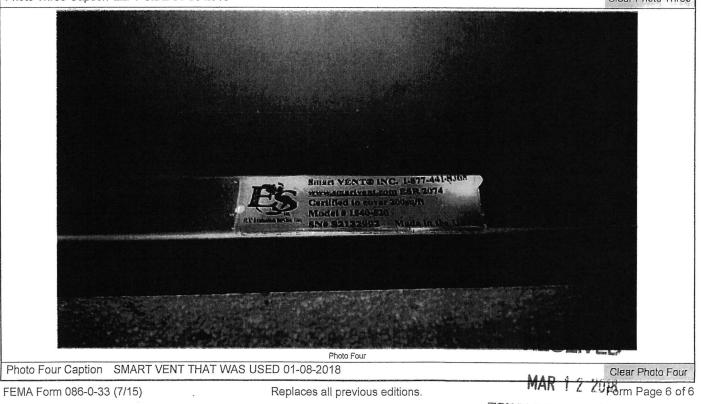


Photo Three Caption LEFT SIDE 01-08-2018

Clear Photo Three



Replaces all previous editions.

TOWN OF LONGBOAT KEY Planning, Zoning & Building