U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

ELEVATION CERTIFICATE

1	3	-0	Q	Q	FI
	•	·v	o	o	

National Flood Insurance Program

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

SE	FOR INSURANCE COMPANY USE				
A1. Building Owner's Name BEACH TO BAY INVESTMENT	Policy Number:				
A2. Building Street Address (including Apt., Unit, Suite, and/o	Company NAIC Number:				
City LONGBOAT KEY	State FL ZIP Cod	de 34228			
A3. Property Description (Lot and Block Numbers, Tax Parce PARCEL 0005-08-0037	l Number, Legal Description, etc.))			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Latitude/Longitude: Lat. 27.372507 Long82.628538 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 7 A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 2600 / 3 c) Total net area of flood openings? ☐ Yes ☐ No d) Engineered flood openings? ☐ Yes ☐ No					
	D INSURANCE RATE MAP (TIKIN) IN OKNIATIO			
B1. NFIP Community Name & Community Number CITY OF SARASOTA - 125126	B2. County Name SARASOTA	127	B3. State FL		
B4. Map/Panel Number 125126-0010 B5. Suffix B6. FIRM Index 9-29-96	B7. FIRM Panel Effective/Revised Dat 7-15-83	B8. Flood Zone(s) A13	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)		
310. Indicate the source of the Base Flood Elevation (BFE) da ☐ FIS Profile ☐ FIRM ☐ Community D 311. Indicate elevation datum used for BFE in Item B9: ☐ NO 312. Is the building located in a Coastal Barrier Resources Systems Designation Date: NA	etermined	ce: B	☐ Yes ⊠ No		
SECTION C - BUILDING	G ELEVATION INFORMATIO	N (SURVEY REQUIF	RED)		
C1. Building elevations are based on: C3. Construction Drawings* C4. Building elevations are based on: C5. Construction Drawings* C6. Elevation Certificate will be required when construction of the building is complete. C6. 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. C6. Benchmark Utilized: R 79 SARA 01"-ELEV=3.90' C7. Vertical Datum: NVGD 1929 Indicate elevation datum used for the elevations in items a) through h) below. C8. Similary C7. 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. C8. Benchmark Utilized: R 79 SARA 01"-ELEV=3.90' Vertical Datum: NVGD 1929 Indicate elevation datum used for the elevations in items a) through h) below. C8. Similary C7. 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. C9. Building Under Construction* S Finished Construction* C9. Finished Construction* AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Items A7. In Puerto Rico only, enter meters. C9. Building Under Construction* AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Items C2.a–h below according to the building diagram specified in Items C2.a–h below according to the building diagram specified in Items C2.a–h below according to the building diagram specified in Items C2.a–h below according to the building diagram specified in Items C2.a–h below according to the building diagram specified in Items C2.a–h below according to the building diagram specified in Items C2.a–h below according to the building diagram specified in Items C2.a–h below according to the building diagram specified in Items C2.a–h below according to the building diagram specified in Items C2.a–h below ac					
a) Top of bottom floor (including basement, crawlspace, or	enclosure floor)	4. <u>5</u>	☐ feet ☐ meters		
b) Top of the next higher floor	,	<u>16.0</u>	⊠ feet □ meters		
c) Bottom of the lowest horizontal structural member (V Zo	nes only)	<u>NA</u>	☑ feet ☐ meters		
d) Attached garage (top of slab)	r a succes	<u>na</u>	☑ feet ☐ meters		
 e) Lowest elevation of machinery or equipment servicing the (Describe type of equipment and location in Comments) 		<u>14</u> . <u>1</u>	☐ feet ☐ meters		
f) Lowest adjacent (finished) grade next to building (LAG)			☑ feet ☐ meters		
 g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or sta 	a a series		☐ feet ☐ meters ☐ meters		
	OR, ENGINEER, OR ARCHI				
This certification is to be signed and sealed by a land surveyor					
information. I certify that the information on this Certificate repr I understand that any false statement may be punishable by fir	resents my best efforts to interpre ne or imprisonment under 18 U.S.	t the data available. Code, Section 1001.	LELAND E. BEDWELL		
Check here if comments are provided on back of form.Check here if attachments.	Were latitude and longitude in licensed land surveyor?	Section A provided by a	12-22-2013		
Certifier's Name LELAND E. BEDWELL	License Numb	er PSM#5884	Digitally signed by		
Title REGISTERED SURVEYOR Company Name	LELAND E. BEDWELL SURVE	2.88-6. A. 4650193.0 (65000.00 A	leland e bedwell DN: cn=leland e		
Address 3423 55TH DRIVE EAST City BRADENTO			Do 12 , / bedwell, o, ou,		
		ZIP Code 34203			

IMPORTANT: In these spaces, co	opy the corresponding information for	om Section A		FOR IN	SURANCE COMPANY USE
Building Street Address (including Apt., #603 BUTTONWOOD DR	Unit, Suite, and/or Bldg. No.) or P.O. Route	and Box No.			Number:
City LONGBOAT KEY	State FL	ZIP Code 3	4228	Compa	ny NAIC Number:
SECTION	D – SURVEYOR, ENGINEER, OR ARC	CHITECT CER	TIFICATION (C	ONTINU	JED)
Copy both sides of this Elevation Certific	cate for (1) community official, (2) insurance	agent/company,	and (3) building	owner.	
	LOODS ARE SUBJECT TO VERIFICATION THE LOWEST MACHINERY/EQUIPMENT				
Signature Island Dedwell	and and gon sole venton are c, e-os	ate 12-22-2013			
	Pate: 2013.12.26 17:09:26 -05'00' ATION INFORMATION (SURVEY NO	T DECLIDED	EOR ZONE AC	A NID 7	ONE A (MITHOUT BEE)
For Zones AO and A (without BFE), con and C. For Items E1–E4, use natural or	mplete Items E1–E5. If the Certificate is inte rade, if available. Check the measurement u	nded to support sed. In Puerto R	a LOMA or LOMR	R-F reque	est, complete Sections A, B,
E1. Provide elevation information for t	the following and check the appropriate boxe		Committee of the contract of t		or below the highest adjacent
grade (HAG) and the lowest adjac a) Top of bottom floor (including b	asement, crawlspace, or enclosure) is NA.				below the HAG.
 b) Top of bottom floor (including b 	asement, crawlspace, or enclosure) is NA. ermanent flood openings provided in Section	🛛 🖾 fee	t meters m	above or	below the LAG.
(elevation C2.b in the diagrams) of	of the building is <u>NA</u> 🛛 feet 🗌 m	eters 🗌 above	or \square below the	–9 of inst HAG.	tructions), the next higher floor
E3. Attached garage (top of slab) is	NA			🗆	h-l# 1140
	umber is available, is the top of the bottom				
ordinance? ☐ Yes ☐ No ☒	Unknown. The local official must certify this	information in S	ection G.		amy o noopan managomon
SECTION	F - PROPERTY OWNER (OR OWNER	'S REPRESE	NTATIVE) CER	TIFICAT	TION
or Zone AO must sign here. The statement	ed representative who completes Sections A ents in Sections A, B, and E are correct to the	, B, and E for Zo ne best of my kno	ne A (without a F owledge.	EMA-iss	ued or community-issued BFE)
Property Owner's or Owner's Authorized					
Address NA	City	NA	State	FL	ZIP Code NA
Signature NA	Date	NA	Telep	hone NA	
Comments NA					
					☐ Check here if attachmer
	SECTION G - COMMUNITY INF	ORMATION (C	PTIONAL)		
he local official who is authorized by law of	or ordinance to administer the community's floapplicable item(s) and sign below. Check the	odplain manager	ment ordinance ca	n comple	ete Sections A, B, C (or E), and
1. The information in Section C wa	as taken from other documentation that has evation information. (Indicate the source ar	been signed and	sealed by a licen	sed surv	evor engineer or architect who
	Section E for a building located in Zone A (
	G4-G10) is provided for community floodp				,
G4. Permit Number	G5. Date Permit Issued	G6. Date	Certificate Of Cor	mpliance	Occupancy Issued
7. This permit has been issued for:	☐ New Construction ☐ Substantia	Improvement			
Elevation of as-built lowest floor (incl		leet	☐ meters	Datum	
9. BFE or (in Zone AO) depth of flooding	g at the building site:	leet	☐ meters	Datum	
10. Community's design flood elevation:		feet	☐ meters	Datum	
Local Official's Name	C 1.	Title 73	. /		2001 1 1

Community Name Town of Coshing

Community Name Town of Consport of Key

Signature

Comments Against Ag

to wone block - ABL Wome Box Make Visit

Check here if attachments.

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

Replaces all pre

ELEVATION CERTIFICATE, page 3

Building Photographs See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A	١.
---	----

FOR INSURANCE COMPANY USE

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. #603 BUTTONWOOD DR

Policy Number:

City LONGBOAT KEY

State FL

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.





DATED; 12-22-2013

PROJECT #13-088Fi