U.S. DEPARTMENT OF HOMELAND SECURITY

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28, 2009

Federal E gency Management Agency

National Flood Insurance Program

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION	For Insurance Company Use:
A1. Building Owner's Name Joe Nocito, Jr.	Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 605 Kingfisher Lane	Company NAIC Number
City State Longboat Key FL	ZIP Code
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 19 Block B Longboat Key Estates	
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 4. A8. For a building with a crawl space or enclosure(s), provide: a) Square footage of crawl space or enclosure(s) a) Square footage of att	ached garage
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION)N
B1. NFIP Community Name & Community Number Town of Longboat Key 125126 B2. County Name Sarasota	B3. State FL
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/Revised Date B8. Flood Zone(s) 125126 0005 D 05/18/92 05/18/92 A13	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. FIS Profile FIS FIRM Community Determined Other (Describe) B11. Indicate elevation datum used for BFE in Item 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)? Designation Date OPA	Yes X No
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUI	RED)
 C1. Building elevations are based on: Construction Drawings* Building Under Construction* "A new Elevation Certificate will be required when construction of the building is complete. C2. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/A below according to the building diagram specified in Item A7. Benchmark Utilized CCCL MONUMENT A-OI Vertical Datum NGVD 1920 Conversion/Comments 	Finished Construction AH, AR/AO. Complete Items C2.a-g
a) Top of bottom floor (including basement, crawl space, or enclosure floor)	eters (Puerto Rico only)
b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building A/C	eters (Puerto Rico only)
	eters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	
9 6 V foot m	ION

	copy the corresponding information from Sec		For Insurance Company Use:
Building Street Address (including Apt 605 Kingfisher Lane	., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box		Policy Number
City _ongboat Key	State FL	ZIP Code	Company NAIC Number
SECTION	D - SURVEYOR, ENGINEER, OR ARCHITECT	CERTIFICATION (CO	ONTINUED)
Copy both sides of this Elevation Cert	ficate for (1) community official, (2) insurance agent/co	mpany, and (3) building o	wner.
Comments Section B Flood insurance rate map (FIRM) information to be verified at local F.E.M.A. control office. Fi	ile # 0300000	
, , , , , , , , , , , , , , , , , , ,	y mornation to be verified at seal 1. E.M.A. control office 11	16 W 03030330	
Signature Signature	Date		
Touther	M. 07/19/2007		Check here if attachments
SECTION E - BUILDING ELE	VATION INFORMATION (SURVEY NOT REQU	IRED) FOR ZONE AO	AND ZONE A (WITHOUT BFE)
For Zones AO and A (without BFE), c and C. For Items E1-E4, use natural	omplete Items E1-E5. If the Certificate is intended to signate, if available. Check the measurement used. In F	upport a LOMA or LOMR- Puerto Rico only, enter me	F request, complete Sections A, B, oters.
E1. Provide elevation information for grade (HAG) and the lowest adj	r the following and check the appropriate boxes to show	whether the elevation is	above or below the highest adjacent
a) Top of bottom floor (including	basement, crawl space, or enclosure) is	feet meters	above or below the HAG.
b) Top of bottom floor (including	basement, crawl space, or enclosure) is	feet meters	above or below the LAG.
(elevation C2.b in the diagrams)	permanent flood openings provided in Section A Items of the building is feet meters	8 and/or 9 (see page 8 of above or below	Instructions), the next higher floor the HAG.
E3. Attached garage (top of slab) is	feet meters above or	below the HAG.	
E4. Top of platform of machinery an	d/or equipment servicing the building is	feet meters	above or below the HAG.
ordinance? Yes No	number is available, is the top of the bottom floor eleva Unknown. The local official must certify this informa	ated in accordance with the	e community's floodplain management
	on the section of the section	addi in Section 3.	
	F - PROPERTY OWNER (OR OWNER'S REP	the same of the sa	
The property owner or owner's authori	ized representative who completes Sections A, B, and I innents in Sections A, B, and E are correct to the best o	E for Zone A (without a FE	EMA-issued or community-issued BFE)
Property Owner's or Owner's Authorize		iny knowledge.	
ess	City	State	ZIP Code
Signature	Date	Teleph	
Comments			
			Check here if attachments
	SECTION G - COMMUNITY INFORMATION		
The local official who is authorized by la and G of this Elevation Certificate. Com	w or ordinance to administer the community's floodplain aplete the applicable item(s) and sign below. Check the	n management ordinance	can complete Sections A, B, C (or E),
	was taken from other documentation that has been sign		
is authorized by law to certify	elevation information. (Indicate the source and date of	the elevation data in the	Comments area below.)
	ed Section E for a building located in Zone A (without a		ity-issued BFE) or Zone AO.
G3. L The following information (Iter	ms G4G9.) is provided for community floodplain mana	gement purposes.	
G4. Permit Number	G5. Date Permit Issued G6	Date Certificate Of Com	npliance/Occupancy Issued
	New Construction Substantial Improvement	nt	
G8. Elevation of as-built lowest floor (inc		feet meters (PR) Datum
G9. BFE or (in Zone AO) depth of floodi	ng at the building site:	feet meters (PR) Datum
Local Official's Name	Title		
Community Name	Telephor	ne DEOF	
Signature	Date	MEVE	INFD
Comments		NOV '	מחס לי
		70	1 6000
		TOWN OF LO	NCDOAT WOULD
			NG & Build Chack here if attachments

Building Photographs See Instructions for Item A6.

	For Insurance Company Use:	
illding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5 KINGFISHER LANE	Policy Number	
City LONGBOAT KEY State FL ZIP Code	Company NAIC Number	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page, following.



FRONT VIEW

07/19/2007 REAR VIEW



PEAR VIEW

NOV 7 2008

TOWN OF LONGBOAT KEY Planning, Zoning & Building