

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

| | | | | | |
|--|-------------|---|---|--|--|
| BUILDING OWNER'S NAME EMERALD KEY ESTATES | | | For Insurance Company Use: Policy Number | | |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 623 BUTTONWOOD DRIVE | | | Company NAIC Number | | |
| CITY LONGBOAT KEY | STATE FL | ZIP CODE | | | |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOTS 7 & 8, BLOCK 10, REVISED PLAT OF BLOCKS 1-2-3-5-10-11-12-14-15 & 16 LONGBOAT SHORES | | | | | |
| BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL | | | | | |
| LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.###" or ##.#####") | | HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983 | | SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____ | |

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

| | | | | | |
|---|-----------------|-----------------------------|---|--------------------------|---|
| B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER TOWN OF LONGBOAT KEY 125126 | | B2. COUNTY NAME SARASOTA | | B3. STATE FLORIDA | |
| B4. MAP AND PANEL NUMBER 0010 | B5. SUFFIX B | B6. FIRM INDEX DATE | B7. FIRM PANEL EFFECTIVE/REVISED DATE 08/15/83 | B8. FLOOD ZONE(S) A13 | B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 11 |

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.

- FIS Profile FIRM Community Determined Other (Describe): _____

B11. Indicate the elevation datum used for the BFE in 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)? Yes No
Designation Date _____

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

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.

Building Diagram Number 6 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. 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 C3a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
Datum NGVD Conversion/Comments _____

Elevation reference mark used A-DAD Does the elevation reference mark used appear on the FIRM? Yes No

a) Top of bottom floor (including basement or enclosure) 11.1 ft.(m) FIN. FLR.

b) Top of next higher floor 21.0 ft.(m)

c) Bottom of lowest horizontal structural member (V zones only) N/A ft.(m)

d) Attached garage (top of slab) 5.5 ft.(m)

e) Lowest elevation of machinery and/or equipment servicing the building 15.0 ft.(m)

f) Lowest adjacent grade (LAG) 3.0 ft.(m)

g) Highest adjacent grade (HAG) 5.4 ft.(m)

h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 11

i) Total area of all permanent openings (flood vents) in C3h _____ sq. in. (sq. cm) 330 sq. in.

License Number, Embossed Seal, Signature, and Date

Robert G. Bruce
1/23/02

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.

I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.

I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME ROBERT G. BRUCE

LICENSE NUMBER 4519

| | | | | | |
|-------------------------------------|------------------|--|-------------------|--|--|
| TITLE OWNER | | COMPANY NAME RED STAKE SURVEYORS, INC. | | | |
| ADDRESS 7123 PROCTOR ROAD | CITY SARASOTA | STATE FL | ZIP CODE 34241 | | |
| SIGNATURE <i>Robert G. Bruce</i> | DATE 01/23/02 | TELEPHONE 941-923-9997 | | | |