## U.S. DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency National Flood Insurance Program

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 (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION				FOR INSUR	ANCE COMPANY USE	
A1. Building Owner's Name  BENNIE W. FOWLER, JR. AND KELLY FOWLER  Policy Number:					per:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  625 DREAM ISLAND PLACE  Company NAIC Numl					AIC Number:	
City	7/D Code					
TOWN OF LONGBOAT KEY Florida 34228						
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 5, DREAM ISLAND SUBDIV.						
A4. Building Use (e.g., Residential,	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL					
A5. Latitude/Longitude: Lat. 27d25	5'25.52"N Lo	ong. 82	2d39'59.16"W	Horizontal Datum	n: NAD 1	927 🔀 NAD 1983
A6. Attach at least 2 photographs of	of the building if the C	Certifica	ate is being used to	obtain flood insura	ance.	
A7. Building Diagram Number	7					
A8. For a building with a crawlspac	ce or enclosure(s):					
a) Square footage of crawlspar	ce or enclosure(s)		161 sq ft			
b) Number of permanent flood	openings in the crav	vIspace	e or enclosure(s) wi	thin 1.0 foot above	adjacent gra	ade1
c) Total net area of flood openi	ings in A8.b 108	s	q in			
d) Engineered flood openings?	? 🗵 Yes 🗌 No					
, ,						
	A9. For a building with an attached garage:					
a) Square footage of attached garage1,075 sq ft						
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade6						
c) Total net area of flood openi	c) Total net area of flood openings in A9.b 648 sq in					
d) Engineered flood openings?   Yes   No						
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number TOWN OF LONGBOAT KEY, FLORIDA 125126  B2. County Name SARASOTA  B3. State Florida						
B4. Map/Panel B5. Suffix B Number	36. FIRM Index Date	Ef	IRM Panel fective/ evised Date	B8. Flood Zone(s	(Zoi	se Flood Elevation(s) ne AO, use Base od Depth)
120153C0291 E 0	03/17/2014		/2014	AE	10	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:						
☐ FIS Profile ☑ FIRM ☐ Community Determined ☐ Other/Source:						
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?   Yes   No						
Designation Date: CBRS OPA						
NOV 2 1 2019						

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route 625 DREAM ISLAND PLACE	Policy Number:			
City State ZIP C TOWN OF LONGBOAT KEY Florida 34228	Company NAIC Number			
SECTION C - BUILDING ELEVATION INFORMATION	ON (SURVEY RE	EQUIRED)		
C1. Building elevations are based on:				
structural support	HITCOT OFFICE	OATION.		
SECTION D – SURVEYOR, ENGINEER, OR ARCI  This certification is to be signed and sealed by a land surveyor, engineer, or archi I certify that the information on this Certificate represents my best efforts to interp statement may be punishable by fine or imprisonment under 18 U.S. Code, Section  Were latitude and longitude in Section A provided by a licensed land surveyor?	itect authorized by ret the data availa on 1001.	law to certify elevation information.		
SARASOTA Florida  Signature Date  (1/2019	ZIP Code 34236 Telephone (941) 955-6333	Place Seal Here		
Copy all pages of this Elevation Certificate and all attachments for (1) community office Comments (including type of equipment and location, per C2(e), if applicable) C2: ELEVATIONS CONVERTED TO NAVD 1988 DATUM USING CORPSCON6 C2e: AIR CONDITIONING COMPRESSOR LOCATED ON WEST SIDE OF RES A9 & A8(c): THESE VENTS ARE RATED TO PROVIDE SUFFICIENT HYDROST	SOFTWARE.			

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,		ZIP Code 34228	Company NAIC Number		
SECTION E – BUILDING EL FOR ZONE	EVATION INFORMA E AO AND ZONE A (	TION (SURVEY NOT WITHOUT BFE)	REQUIRED)		
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.					
<ul><li>E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).</li><li>a) Top of bottom floor (including basement,</li></ul>					
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet meter	rs above or below the HAG.		
crawlspace, or enclosure) is	nonings provided in C	feet meter			
E2. For Building Diagrams 6–9 with permanent flood o the next higher floor (elevation C2.b in the diagrams) of the building is	penings provided in So				
E3. Attached garage (top of slab) is		feet meter	rs above or below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is		feet meter	rs above or below the HAG.		
E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?   Yes No Unknown. The local official must certify this information in Section G.					
SECTION F - PROPERTY OWN	NER (OR OWNER'S F	REPRESENTATIVE) CI	ERTIFICATION		
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	e who completes Sec ne statements in Section	tions A, B, and E for Zoons A, B, and E are cor	one A (without a FEMA-issued or rect to the best of my knowledge.		
Property Owner or Owner's Authorized Representative	s Name				
Address	City	St	ate ZIP Code		
Signature	Date	Te	lephone		
Comments					
			Check here if attachments.		

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Building Street Address (including Apt., Unit, Su 625 DREAM ISLAND PLACE	No. Policy Number:		
City TOWN OF LONGBOAT KEY	Company NAIC Number		
SECTIO	N G - COMMUNITY INFORMATION (OPTIC	DNAL)	
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.			
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)			
or Zone AO.	on E for a building located in Zone A (without		
G3. The following information (Items G4–	G10) is provided for community floodplain ma	anagement purposes.	
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued	
G7. This permit has been issued for:	New Construction  Substantial Improven	nent	
G8. Elevation of as-built lowest floor (including of the building:	p basement)	feet meters Datum	
G9. BFE or (in Zone AO) depth of flooding at t	the building site:	feet meters 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 applicable)		
		Check here if attachments.	

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

See Instructions for Item A6.

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City	State	ZIP Code	Company NAIC Number
TOWN OF LONGBOAT KEY	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

#### Photo One Caption FRONT VIEW



Photo Two

Photo Two Caption REAR VIEW

#### **BUILDING PHOTOGRAPHS**

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Continuation Page

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City TOWN OF LONGBOAT KEY	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 One Caption TYPICAL FLOW-THRU VENT

**Photo Two** 

Photo Two