U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

## **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008 Expiration Date: July 31, 2015

	SEC	TION A - PROPERT	Y INFORMATION	FOR INSURANCE COMPANY USE		
A1. Building Owner's Name JOS	A1. Building Owner's Name JOSEPH IANNELLO					
Building Street Address (inclu 638 BAYVIEW DRIVE	Company NAIC Number:					
City LONGBOAT KEY		State FL	ZIP Code 34228			
A3. Property Description (Lot and LOT 16 BAYVIEW ESTATES	Block Numbers, Tax Parcel	Number, Legal Descript	on, etc.)			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL         A5. Latitude/Longitude: Lat. 27*25'52"N Long. 82*40'27"W 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 1B         A8. For a building with a crawlspace or enclosure(s):       A9. For a building with an attached garage:         a) Square footage of crawlspace or enclosure(s)       N/A sq ft         b) Number of permanent flood openings in the crawlspace       b) Number of permanent flood openings in the attached garage         c) Total net area of flood openings in A8.b       0       sq in         d) Engineered flood openings?       Yes       No						
	SECTION B – FLOOD	INSURANCE RATE	MAP (FIRM) INFORMAT	ΓΙΟΝ		
B1. NFIP Community Name & Con TOWN OF LONGBOAT KEY 125		B2. County Name MANATEE		B3. State FLORIDA		
B4. Map/Panel Number B5 0005	. Suffix D B6. FIRM Index 5-18-22- 5-18-92	Effective/Rev	sed Date Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 10		
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       OPA						
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
<ul> <li>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.</li> <li>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/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <u>RM 2</u> Vertical Datum: <u>NGVD 1929</u></li> <li>Indicate elevation datum used for the elevations in items a) through h) below. ⊠ NGVD 1929 □ NAVD 1988 □ Other/Source:</li> </ul>						
			Ch	neck the measurement used.		
<ul> <li>a) Top of bottom floor (includin</li> <li>b) Top of the next higher floor</li> <li>c) Bottom of the lowest horizor</li> <li>d) Attached garage (top of slab</li> </ul>	ital structural member (V Zor	,	<u>11.0</u> 25.0 N/A 6.07	<ul> <li>☑ feet</li> <li>☐ meters</li> <li>☑ feet</li> <li>☐ meters</li> <li>☐ feet</li> <li>☐ meters</li> <li>☑ feet</li> <li>☐ meters</li> </ul>		
e) Lowest elevation of machinery or equipment servicing the building 11.34 (Describe type of equipment and location in Comments)						
<ul> <li>f) Lowest adjacent (finished) g</li> <li>g) Highest adjacent (finished) g</li> <li>h) Lowest adjacent grade at low</li> </ul>	grade next to building (HAG)	rs, including structural st	5.0 5.8 Ipport <u>6.3</u>	<ul> <li>☑ feet</li> <li>☐ meters</li> <li>☑ feet</li> <li>☐ meters</li> <li>☑ feet</li> <li>☐ meters</li> </ul>		
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 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.						
Check here if attachments.	NOV 19	4 deensed land surveyor	? 🛛 Yes 🗌 No	Bugstuse		
fier's Name WARREN G. BEF	TOWNUL	WARREN BERGSTRE	e Number PSM 5577	67SM 5577		
Address 6804 99 <sup>TH</sup> STREET EAS	City BRADENTC	N State	FL ZIP Code 34202	#1,5577		
Signature	Date 11-04-13	Telepl	none 941-758-7600			

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

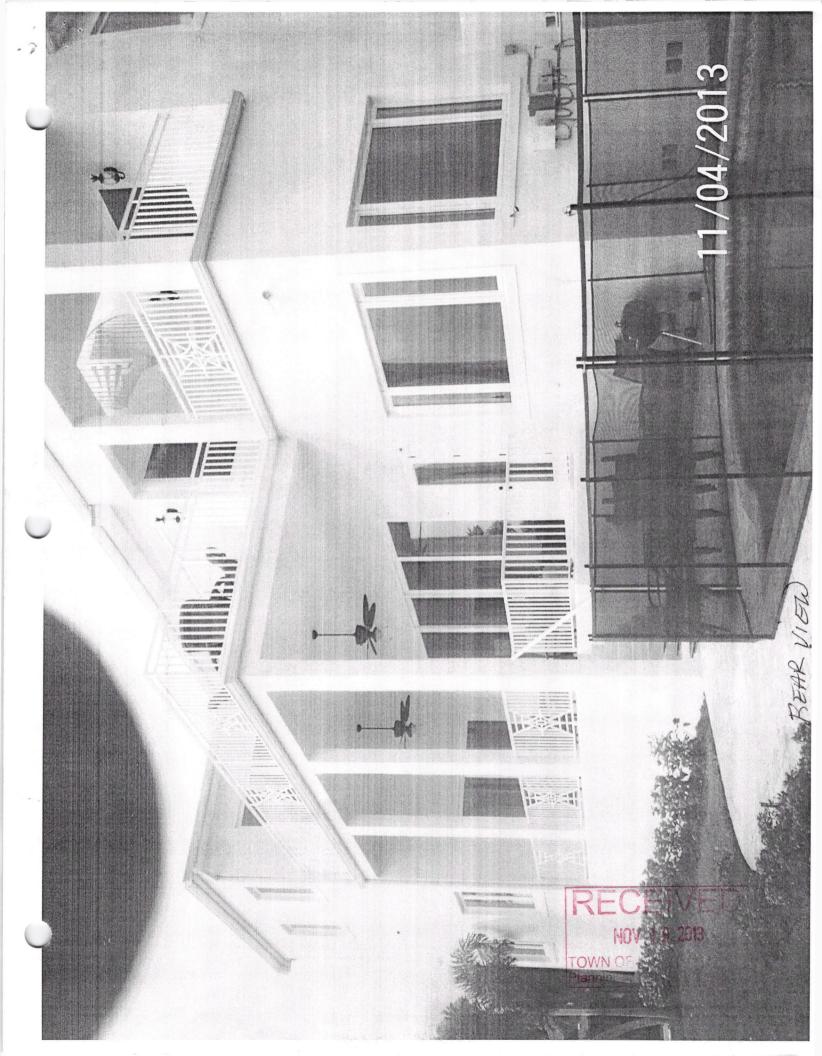
See reverse side for continuation.

Replaces all previous editions.

ELEVATION CERTIFICATE, p	age 2	
IMPORTANT: In these spaces,	copy the corresponding information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Ap 638 BAYVIEW DRIVE	t., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number:
City LONGBOAT KEY	State FL ZIP Code 34228	Company NAIC Number:
SECTIO	N D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICAT	ION (CONTINUED)
Copy both sides of this Elevation Cer	tificate for (1) community official, (2) insurance agent/company, and (3) b	building owner.
Comments THE LOWEST EQUIPM	ENT SERVICING THE BUILDING IS THE A/C UNIT	
Warren &	Berg freres Date 11-04-13	
-	EVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZO	ONE AO AND ZONE A (WITHOUT BEE)
	complete Items E1–E5. If the Certificate is intended to support a LOMA or grade, if available. Check the measurement used. In Puerto Rico only, et al.	
	or the following and check the appropriate boxes to show whether the ele	
grade (HAG) and the lowest ad	jacent grade (LAG).	с ,
	· · · · · · · · · · · · · · · · · · ·	meters
E2. For Building Diagrams 6-9 with	permanent flood openings provided in Section A Items 8 and/or 9 (see	pages 8–9 of Instructions), the next higher floor
(elevation C2.b in the diagrams E3. Attached garage (top of slab) is	a) of the building is ☐ feet ☐ meters ☐ above or ☐ a ☐ feet ☐ meters ☐ above or ☐ below the HA	
0 0 1 /	nd/or equipment servicing the building is feet free meters	
	n number is available, is the top of the bottom floor elevated in accordance	· · · ·
	Unknown. The local official must certify this information in Section G.	
a de la companya de l La companya de la comp	N F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE	
or "one AO must sign here. The state	rized representative who completes Sections A, B, and E for Zone A (wit ements in Sections A, B, and E are correct to the best of my knowledge.	hout a FEMA-issued or community-issued BFE)
srty Owner's or Owner's Authori:	zed Representative's Name	
Address	City	State ZIP Code
Signature	Date	Telephone
Comments		
		Check here if attachmer
e local official who is authorized by la	SECTION G – COMMUNITY INFORMATION (OPTIONA w or ordinance to administer the community's floodplain management ordin	
this Elevation Certificate. Complete th	e applicable item(s) and sign below. Check the measurement used in Item	ns G8–G10. In Puerto Rico only, enter meters.
<ol> <li>The information in Section C is authorized by law to certify</li> </ol>	was taken from other documentation that has been signed and sealed by elevation information. (Indicate the source and date of the elevation date of the el	by a licensed surveyor, engineer, or architect wh ta in the Comments area below.)
	ed Section E for a building located in Zone A (without a FEMA-issued or	
3. The following information (Ite	ems G4–G10) is provided for community floodplain management purpose	es.
G4. Permit Number	G5. Date Permit Issued G6. Date Certificat	e Of Compliance/Occupancy Issued
7. This permit has been issued for:	New Construction Substantial Improvement	
3. Elevation of as-built lowest floor (	including basement) of the building:	ters Datum
9. BFE or (in Zone AO) depth of floo	ding at the building site:	ters Datum
<ol> <li>Community's design flood elevation</li> </ol>	on: feetme	A CHEVED
ocal Official's Name Darin	D. Cushing Title Building	OFFICIAR 2013
Community Name Town	f Longboot Key Telephone 941-36	1-6411-X372KEY
ature O_D.	Date / 2 / 2 / 1	anning, Zoning and Build an
B6 FB7 - Cor		Check here if attachmer

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#### **ELEVATION CERTIFICATE**, page 3

## **Building Photographs**

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresp	FOR INSURANCE COMPANY USE		
Refiding Street Address (including Apt., Unit, Suite, and/o 3AYVIEW DRIVE	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.





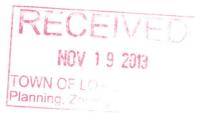
#### ELEVATION CERTIFICATE, page 4

# **Building Photographs**

Continuation Page

IMPORTANT: In these spaces, copy the corresponding informatio	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Ro 3AYVIEW DRIVE	Policy Number:				
City LONGBOAT KEY State F	L 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					

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.



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