## FED! LEMERGENCY MANAGEMENT AGE! No. . ONAL FLOOD INSURANCE PROGRAM

## **ELEVATION CERTIFICATE**

	FEDY L EMERGENCY MANAGEMENT AGEY  No. ONAL FLOOD INSURANCE PROGRAM					
		ATION CERTIFICA				
elle.		Read the instructions on page				
		A - PROPERTY OWNER INFORMA	NOITA	For Insurance Company Use:		
ING OWNER'S NAM	E			Policy Number		
THE SING STREET ACCE	ESS (Including Apt. Unit Suite a	rbara L Brown and/or Bidg. No.) OR P.O. ROUTE AND	BOX NO	Company NAIC Number		
BUILDING 31KEE1 XDOK	642 Ringer Lar	10	BOX NO.			
CITY	Longboat Key	STATE	Florida	ZIP CCOE 34228		
PROPERTY DESCRIPTION	N (Lot and Block Numbers, Tax Pr Lot 1, Block	arcel Number, Legal Description, etc.) 'C'' Country Club Sho	res, IV			
BUILDING USE (e.g., Resi	dential, Non-residential, Addition,	Accessary, etc. Use Comments section	if necessary.)			
	Residential	NTAL DATUM: SOURCE: I				
LATITUDE/LONGITUDE (C	)PTIONAL) HORIZO	NTAL DATUM: SOURCE: L	_ GPS (Type): _ USGS Quad Mag	1 1 Other		
			_ GGGG Quad May	Guier		
	SECTION B - FLOO	D INSURANCE RATE MAP (FIRM	1) INFORMATION	T		
	ME & COMMUNITY NUMBER	B2. COUNTY NAME				
Longboat Key	125126	Sarasota		B3. STATE FL		
B4. MAP AND PANEL	B5. SUFFIX   B6. FIRM IND	EX   87. FIRM PANEL	B8. FLOOD	B9. BASE FLOOD ELEVATION(S)		
NUMBER	DATE	EFFECTIVE/REVISED DATE	ZONE(S)	(Zone AO, use depth of flooding)		
25126 0010	B 05-18-92	08-15-83	A13	11		
		FE) data or base flood depth enter- unity Determined Other (De				
		9: X NGVD 1929 NAVD 19		secriba): :		
17. Indicate the elevation	ed in a Coastal Barrier Resource	cas System (CBRS) area or Otherw	vise Protected Are	a (OPA)? I I Yas K I No		
Designation Date:_		_				
	SECTION C - BUILDIN	G ELEVATION INFORMATION (S	HEVEY BEOLIE	ED)		
· initializa eleventione as		Drawings'Building Unde				
iliding elevations at	difficate will be required when o	construction of the building is comp	lete	Finished Construction		
2 Building Diagram Nur	mber 1 (Select the buildin	g diagram most similar to the buildi	ing for which this	cartificate is being completed - see		
names 6 and 7. If no	diagram accurately represents	s the building, provide a sketch or p	hotograph)	ser uncate is being completed - see		
		VE, V1-V30, V (with BFE), AR, AR		-A30, AR/AH, AR/AO		
Complete Items C3a-	i below according to the buildi	ng diagram specified in Item C2. Si	tate the datum us	ed. If the datum is different from		
the datum used for th	ne BFE in Section B, convert th	te datum to that used for the BFE.	Show field measu	rements and datum conversion		
		nts area of Section D or Section G	, as appropriate, t	o document the datum conversion.		
Datum UGVD		NA				
Elevation reference n		Does the elevation reference	mark used appea	r on the FIRM? Yes   No		
	foor (including basement or en		2 (ft)(m) rg	Company was to the first of the first		
☐ b) Top of next hig	ner noor	24.		et Sun plantagigner aug 1., 2		
	st horizontal structural member	r (V zones aniy)	Fr.(E) The passed and Date	1 000		
d) Attached garag	e (lup of slau)	ent	7 (ft)m) 2 g	1 Stalin		
Li a) Lowest elevation of machinery and/or equipment						
Q · f) Lowest adjacen		5	O (ft.(m) 5 (ft.)(m)	1161		
g) Highest adjacent grade (HAG)						
Dh) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 3 in garage 3						
	permanent openings (flood ve		1. (sq. cm)			
	SECTION D - SURVE	YOR, ENGINEER, OR ARCHITEC	T CERTIFICATIO	ON THE PROPERTY OF THE PROPERT		
This certification is to be	signed and sealed by a land	surveyor, engineer, or architect aut	horized by law to	certify elevation information.		
		this certificate represents my best				
	ise statement may be punishal	ble by fine or imprisonment under t		tion 1001.		
CERTIFIER'S NAME		LICE	ENSE NUMBER			

NUMBER 125126 0010	В	DATE 0.5-18-92	08-15-83	ZONE(S) A 1 3	(Zone AO, use death of flooding)
	of the Base Flo	od Elevation (BFE)	data or base flood depth enti	ered in 89.	
	X FIRM		Determined Other (0		
11. Indicate the elevation	n datum used t	or the SFE in B9: X	_ NGVD 1929   NAVD 1	988    Other (De	escribe):
12. Is the building locate	ed in a Coastal	Barrier Resources S	System (CBRS) area or Othe	wise Protected Are	ea (OPA)? Yes No
Designation Date:_					
	SECTIO	N C - BUILDING E	EVATION INFORMATION	SURVEY REQUIR	ED)
		Construction Draw			Finished Construction
			ruction of the building is com		
					certificate is being completed - see
			building, provide a sketch or		
			V1-V30, V (with BF≘), AR, A		
Complete Items C3a	-i below accord	ing to the building di	lagram specified in Item C2.	State the datum use	ed. If the datum is different from
the datum used for the	he BFE in Secti	on B, convert the da	itum to that used for the BFE	Show field measu	rements and datum conversion
calculation. Use the	space provided	or the Comments	rea of Section D or Section	G, as appropriate, to	o document the datum conversion.
Datum UGVD		Comments N	+		
Elevation reference r	mark used	RM7	Oces the elevation reference	e mark used appea	r on the FIRM? WYes     No
a) Top of bottom	floor (including	basement or enclose	ure)1_1	_	Continued in Property and Inc.
a b) Top of next hig	her floor		24	· 2 (ft)(m) re . 2 (ft)(m) 89	or and the particle particle.
a c) Bottom of lowe		uctural member (V z	cones aniy) NA		A CONTRACTOR CONTRACTOR
d) Attached garag			8	FL(E)	( -0110)
a) Lowest elevation	on of machinery	and/or equipment		——O	Joseph Status
servicing the b			11	0 (A (m) 4	3/29/06
Q · f) Lowest adjacen			5	Number, Signalure,	11/61
g) Highest adjace		ſ	7	5 (ft.m) 3"	4441
D h) No. of permane	ent openings (fl	ood vents) within 1 f	t above adjacent grade 3 in	garage	
( i) Total area of all				in. (sq. cm)	. 12. Company of his company
	The same of the sa		R, ENGINEER, OR ARCHITE		
			eyor, engineer, or architect a		
					t the data available.
	alse statement n	nay be punishable b	y fine or imprisonment under		#on 1001.
CERTIFIER'S NAME	1			CENSE NUMBER	ADD - 6 2001
neth R. Pa	Imer		COMPANY NAME		APR O AIM
rveyor			Cyrix Engi	neering. In	C
ADDRESS		Cuina 111	CITY	STATE	ZIP CODE G DEPARTMENT
1144 Tallavas	ST KOAO	Suite III	Sarasota _ / DATE/	Florid TELEPHO	
Just Vent	) of fai	me)	3/29/01		8-8812
FMA Form 81-31 ALIG	99	SEE REVE	RSE SIDE FOR CONTINUIA	TION REDI	ACES ALL PREVIOUS EDITIONS
	100 mm (100 mm)				

		responding information	on from Sectio	n.A.	П	For Insurance Company Use:
BUILDING STREET ADDR	ESS (Including Apt., L	juite, and/or Bidg. No.) O				Policy Number
CITY Longboat		STATE F1	orida	34228 <sup>Z</sup>	IP CODE	Company NAIC Number
	SECTION D - SURVE	YOR, ENGINEER, OR	ARCHITECT C	ERTIFICAT	ION (CONT	(GEUNT
Copy both sides of this i	Elevation Certificate fo	r (1) community official, (	(2) insurance a	gent/compa	ny, and (3)	building owner.
COMMENTS						
	*					
			***************************************			
264 033		*****				
264-011						Check here if attachments
				and the same of th		d ZONE A (WITHOUT BFE)
information for a LOMA of		ete Items E1 through E3	. If the Elevation	on Certificati	e is intende	d for use as supporting
			similar to the b	uilding for w	rhich this ce	ertificate is being completed -
see pages 6 and 7.	If no diagram accurate	ly represents the building	g, provide a ske	etch or photo	ograph.)	
E2. The top of the bottom (check one) the high		ment or enclosure) of the	building is	ft.(m	)jin.(	(cm)   sbove or   below
		er is available, is the top	of the bottom fi	por elevater	in accorda	ince with the community's
						information in Section G.
	SECTION F - PROPE	RTY OWNER (OR OWN	VER'S REPRES	SENTATIVE	) CERTIFIC	CATION
		resentative who complete	es Sections A, I	B, and E for	Zone A (wi	thout a FEMA-issued or
community-issued BFE)	or Zone AO must sign	here.				
PROPERTY OWNER'S DE	R OWNER'S AUTHORIZE	ED REPRESENTATIVE'S N	AME			
ADDRESS			YTI		STATE	ZIP CODE
SIGNATURE		E	PATE		TELEPHO	NĒ.
COMMENTS				×*************************************		
			***************************************			
	0.7.0					Check here if attachments
The local official who is a		TION G - COMMUNITY I				
Sections A. B. C (or E), a	and G of this Elevation	Certificate. Complete the	community"s 11 e applicable ite	iooopiain ma m(s) and sid	anagement an hélow	ordinance can complete
G1. [ ] The information	in Section C was taker	from other documentati	on that has bee	en signed ar	nd embosse	ed by a licensed surveyor,
			certify elevation	n informatio	n. (Indicate	the source and date of the
	the Comments area b		in Zone ( /w#h		innund or	community-issued BFE) or
Zone AO.	iolar completed decilor	I E TOT & DUTIEST TO TOTALED	III ZONE A (WILL	IDUL & FEIVIF	4-1550E0 OI	Community-issued Si E) of
G3. [ ] The following inf	ormation (Items G4-G9	9) is provided for commu	nity floodplain r	managemen	t purposes.	
G4. PERMIT NUMBER	G5. DATE	PERMIT ISSUED	GE. D		ICATE OF C	COMPLIANCE/OCCUPANCY
G7. This permit has been	issued for:     Nev	w Construction     Su	bstantial Impro			
GB. Elevation of as-built I	owest floor (including t	essement) of the building	is:			ft.(m) Datum:
G9. BFE or (in Zone AO)		e building site is:			·-	ft.(m) Datum:
LOCAL OFFICIAL'S NAME			TITLE		•	
COMMUNITY NAME		<del></del>	TELEPHON	NE		
SIGNATURE			DATE			
COMMENTS						
						. "
		•		•	1	Check here if attachments