FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires December 31, 2005

Important: Read the instructions on pages 1 - 7.

		SECTION A -	PROPERTY OWNER INFORM	IATION		For Insurance Company Use:
BUILDING OWNER'S NA	Policy Number					
WESTWATER CONSTRUCTION, INC. BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.						Company NAIC Number
661 DREAM ISLAND RD	!	-	STATE		ZIP (CODE
LONGBOAT KEY			FLORIDA		3422	8
LOT 8, DREAM ISLAND	ON (Lot and Block SUB.	Numbers, Tax Parcel Nu	ımber, Legal Description, etc.)			
		dential, Addition, Accesso	ry, etc. Use a Comments area, i	f necessary.)).	
LATITUDE/LONGITUDE (##° - ##' - ##.##" or ##			TAL DATUM: ☐ NAD 1983	SOURCE:	GPS (T	ype): Quad Map
		SECTION B - FLOOD IN	SURANCE RATE MAP (FIRM)	INFORMA"	ПОМ	
B1. NFIP COMMUNITY NAME LONBOAT KEY 125126	& COMMUNITY NUM		COUNTY NAME NATEE			B3. STATE FLORIDA
B4. MAP AND PANEL NUMBER 125126 0005	B5. SUFFIX D	B6. FIRM INDEX DATE 05/18/92	B7. FIRM PANEL EFFECTIVE/REVISED DATE 05/18/92	B8. FL0	OOD ZONE(S) A13	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) +11'
B11. Indicate the elevation data	☐ FIRM um used for the BFE	☐ Community Determ in B9: ☐ NGVD 1929	ined Other (Des	8 Other		
b 12. Is the building located in a			a or Otherwise Protected Area (OP/ EVATION INFORMATION (SU			Designation Date
C1. Building elevations are bas				Finished C		
22. Building Diagram Number accurately represents the IC3. Elevations – Zones A1-A30 Complete Items C3a-i be Section B, convert the datu Section D or Section G, as	7 (Select the building building, provide a sk D, AE, AH, A (with Bf low according to the um to that used for the appropriate, to docu	tetch or photograph.) FE), VE, V1-V30, V (with BFI building diagram specified in the BFE. Show field measure the datum conversion.	building for which this certificate is building for which this certificate is building for which this certificate is building for which the building for which the datum used. If the ments and datum conversion calculates	AR/AH, AR/AC) fferent from th	ne datum used for the BFE in
Datum NGVD 1929 Conv	_		dd	v 5 10		
a) Top of bottom floor (nduding basement (o ine elevation reference ma or enclosure)	rk used appear on the FIRM?	res ⊠No	[
 a) Top of bottom floor (including basement or enclosure) b) Top of next higher floor 			6. 3 ft.(m) 16. 0 ft.(m) N. A ft.(m) 6. 3 ft.(m)			
c) Bottom of lowest horizontal structural member (V zones only)			16.0ft(m) N.Aft(m)			The state of the s
☐ d) Attached garage (top of slab)			6. 3ft(m)			70
e) Lowest elevation of r		ந் க			Cal pust Brot	
servicing the building (Describe in a Comments area)			12 . 3 ft.(m)	12.3ft.(m)		
☐ f) Lowest adjacent (finished) grade (LAG)			5.9ft.(m)	_ 2 1 Limit		
g) Highest adjacent (fini			6. 1 ft.(m)		Suse	06/09/05
 i) No. of permanent op i) Total area of all permanent 	enings (flood vents) v	within 1 ft. above adjacent gr d vents) in C3.h <u>1920</u> sq. in.	ade <u>15</u>		Lice	
a ij rota area or air perink			ENGINEER, OR ARCHITECT	CEDTIEICA	TION	
This certification is to be si	gned and sealed b	ov a land surveyor, engine	eer, or architect authorized by la	w to certify a	levation info	ormation
I certify that the information	n in Sections A, B,	and C on this certificate	represents my best efforts to inte	ernret the day	ta available	Amauon.
CERTIFIER'S NAME	элалының тау De	puriishable by tine or im	prisonment under 18 U.S. Code,	LICENSE	NUMBER	Marin Marin
C. DREW BRANCH TITLE			COMPANY NAME	LS 5542		Russia P. W. Merson Cares
PRESIDENT, PROFESSION	AL SURVEYOR & N	MAPPER	DREW BRANCH SUR	VEYING & M	APPING, INC	2.
ADDRESS 909 CATTLEMEN ROAD			CITY SARASOTA		STATE	
SIGNATURE New/	int		DATE 06/09/05	DI ANIA	TELEP	
EMA Form 81-31, January	2003	See reve	rse side for continuation.	PLANN	MALOF	OREPIACES All previous editions
				1 101	VIN UF	TO MERSONAL MARIANS entrous

IMPORTANT: In these spaces, copy the corresponding information f			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE 6691 DREAM ISLAND RD	E AND BOX NO.		Policy Number
CITY CONGBOAT KEY	STATE FLORIDA	ZIP CODE 34228	Company NAIC Number
SECTION D - SURVEYOR, ENGINEER,			D)
opy both sides of this Elevation Certificate for (1) community official, (2) insurance a			
COMMENTS			
PROJECT #0310301 FLOW THROUGHS IN GARAGE AREAS.			
FLOW TRINOUGHS IN GARAGE ANEAS.			
OWEST EQUIPMENT IS AC-CABANA FINISHED FLOOR=13.9			Check here if attachment
SECTION E - BUILDING ELEVATION INFORMATION (SUR			
or Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevati ection C must be completed.	on Certificate is intended for i	use as supporting informatio	n for a LOMA or LOMH-F,
saion o mast be completed. 1. Building Diagram Number _(Select the building diagram most similar to the buildir	ng for which this certificate is	being completed - see page	s 6 and 7. If no diagram accurately
represents the building, provide a sketch or photograph.)			
, , , , , , , , , , , , , , , , , , , ,	ft.(m)in.(cm) [_] abov	e or below (check one)	the highest adjacent grade. (Use
natural grade, if available). 3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elev	vated floor (elevation b) of the	e building is ft.(m) in.(c	cm) above the highest adjacent
grade. Complete items C3.h and C3.i on front of form.		W/1-14 (14) (14)	
4. The top of the platform of machinery and/or equipment servicing the building is	ft.(m)in.(cm) abov	re or Delow (check one)	the highest adjacent grade. (Use
natural grade, if available). 5. For Zone AO only: If no flood depth number is available, is the top of the bottom flo	oor elevated in accordance v	with the community's floodola	in management ordinance?
Yes No Unknown. The local official must certify this information in		mara ic continuinty o noccepio	armanagorio il ordina ico:
SECTION F - PROPERTY OWNER (OR	OWNER'S REPRESEN	TATIVE) CERTIFICATIO	N
The property owner or owner's authorized representative who completes Sections A			out a FEMA-issued or community-
ssued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E		y knowledge. 	
PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NA	ME		
DDRESS	CITY	STA	TE ZIP CODE
SIGNATURE	DATE	TELI	EPHONE
COMMENTS			
			Па н. ж
SECTION C. COMMUN	NITY INFORMATION (OI	DTIONAL \	Check here if attachment
ne local official who is authorized by law or ordinance to administer the community's f			A B C (or E) and G of this Flowation
ertificate. Complete the applicable item(s) and sign below.	iooopairmanagement ordii	iance can complete sections	5 A, D, O (OI L), and G OI this Elevation
1. The information in Section C was taken from other documentation that has be			er, or architect who is authorized by sta
or local law to certify elevation information. (Indicate the source and date of the			
 A community official completed Section E for a building located in Zone A (with The following information (Items G4-G9) is provided for community floodplain. 		munity-issued BFE) or Zone	AO.
G4. PERMIT NUMBER G5. DATE PERMIT ISSUED	•	DATE CERTIFICATE OF COL	IPLIANCE/OCCUPANCY ISSUED
34. PENIVIII NOIVIDEN GS. DATE PENIVIII ISSUED	G0.	DATE CENTIFICATE OF CON	IPLIANCE/OCCUPANCY ISSUED
7. This permit has been issued for: New Construction Substantial Improve	ement		
8. Elevation of as-built lowest floor (including basement) of the building is:		ft.(m)	Datum:
BFE or (in Zone AO) depth of flooding at the building site is:		ft.(m)	Datum:
LOCAL OFFICIAL'S NAME	TITLE	KI	HVED
COMMUNITY NAME	TELEPHO	ONE	Frank H W Delman Eller
SIGNATURE	DATE	1.72	- F 000F
OMMENTS		Art State	UL 5 2005
		1 2	
		PLANNING,	ZONING & BUILDING
		PLANNING,	ZONING & BUILDING