## 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	FOR INSURANCE COMPANY USE	
A1. Building Owner's Name Greene Tussey					Policy Numl	ber:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. #6900 LONGBOAT DR. S.					Company N	AIC Number:		
City LONGBOAT KEY		State Florida			ZIP Code 34228			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 8 BLOCK 11, LONGBOAT KEY								
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL								
A5. Latitude/Longitude: Lat	27.434896	Long	32.682580	Но	rizontal D	atum: NAD 1	927 X NAD 1983	
A6. Attach at least 2 photograp	ohs of the building if the	e Certific	ate is being u	sed to obta	ain flood ir	nsurance.		
A7. Building Diagram Number	1A							
A8. For a building with a crawls	space or enclosure(s):							
a) Square footage of craw	Ispace or enclosure(s)			N/A sq	ft			
b) Number of permanent fl	ood openings in the cr	awlspac	e or enclosur	e(s) within	1.0 foot at	oove adjacent gra	ade N/A	
c) Total net area of flood o	penings in A8.b		N/A sq ir	i				
d) Engineered flood openi	ngs? Yes X	lo						
A9. For a building with an attact	ned garage:							
a) Square footage of attact	ned garage		N/A sq ft					
					ove adjace	ent grade N/A		
c) Total net area of flood o	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A  c) Total net area of flood openings in A9.b  N/A sq in							
	d) Engineered flood openings?  Yes  No							
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Community Name & Community Number LONGBOAT KEY-125126			B2. County Name MANATEE				B3. State Florida	
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	Effe	RM Panel ective/	B8. Flood Zone(s)	B	39. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)	
12115C-0291 E	11-04-2016	11-04-2	vised Date 2016	AE	9	FEET		
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:	Designation Date: CBRS OPA RECEIVED					EIVED		
ja Ju						DEC	0.4. 2017	

## **ELEVATION CERTIFICATE**

IMPORTANT: In these spaces, copy the corresponding information from Section A.					FOR INSURANCE COMPANY USE		
					Policy Number:		
DNGBOAT KEY State ZIP Code State 34228			Company NAIC Number				
SECTION C - BUILDING EL	EVATION INFORMAT	ION (SURVEY R	EQUIRE	ED)			
C1. Building elevations are based on:							
<ul> <li>h) Lowest adjacent grade at lowest elevation of dec structural support</li> </ul>	k or stairs, including		N/A	X feet	meters		
SECTION D - SURVEYOR,	ENGINEER, OR ARC	HITECT CERTIF	CATIO	N			
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 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.  Were latitude and longitude in Section A provided by a licensed land surveyor?   Yes  No  Check here if attachments.							
Certifier's Name LELAND E. BEDWELL  Title REGISTERED SURVEYOR  Company Name LELAND E. BEDWELL SURVEYING, INC.	License Number PSM 5884			4	E NUMBER OF STAND STANDS OF STANDS O		
Address 3423 55TH DRIVE EAST  City BRADENTON	State Florida	ZIP Code 34203			PERSONAL AND STANP AND STA		
Signature  Copy all pages of this Elevation Certificate and all attachments	Date 11-22-2017 nts for (1) community off	Telephone (941) 753-9994	Ext. NA agent/co				
Comments (including type of equipment and location, per LATITUDE LONGITUDE TO BE PROVIDED GOOGLE E BEING A/C, SEE ATTACHED.		HINERY/ EQUIPM	ENT SE	RVICING	THE BUILDING		

### **ELEVATION CERTIFICATE**

IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Suite, and #6900 LONGBOAT DR. S.	Policy Number:						
1 0,	State Florida	ZIP 342	Code 28	Company NAIC Number			
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)							
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.							
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).							
a) Top of bottom floor (including basement, crawlspace, or enclosure) is	-	N/A	☐ feet ☐ meter	rs above or below the HAG.			
b) Top of bottom floor (including basement, crawlspace, or enclosure) is		N/A	feet meter	rs above or below the LAG.			
E2. For Building Diagrams 6–9 with permanent flood o the next higher floor (elevation C2.b in	penings provided i		on A Items 8 and/or	9 (see pages 1–2 of Instructions),			
the diagrams) of the building is		N/A N/A	feet meter				
E3. Attached garage (top of slab) is  E4. Top of platform of machinery and/or equipment	-		feet meter	rs above or below the HAG.			
servicing the building is		N/A	☐ feet ☐ meter				
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	e, is the top of the l	n. The	local official must	cordance with the community's certify this information in Section G.			
SECTION F - PROPERTY OWN	NER (OR OWNER	S REP	RESENTATIVE) CE	ERTIFICATION			
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.							
Property Owner or Owner's Authorized Representative' N/A	s Name						
Address N/A	Cit N/	ī.	St	ate ZIP Code N/A			
Signature	Da	te	Te	lephone			
Comments							
,							
				Check here if attachments.			

#### **ELEVATION CERTIFICATE**

IMPORTANT: In these spaces, copy the corresponding information from Section A.	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No #6900 LONGBOAT DR. S.	. Policy Number:					
City State ZIP Code LONGBOAT KEY Florida 34228	Company NAIC Number					
SECTION G - COMMUNITY INFORMATION (OPTIONAL)						
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.)						
G2. A community official completed Section E for a building located in Zone A (without a F or Zone AO.						
G3. The following information (Items G4–G10) is provided for community floodplain management.	gement purposes.					
G4. Permit Number G5. Date Permit Issued G	66. Date Certificate of Compliance/Occupancy Issued					
G7. This permit has been issued for: New Construction Substantial Improvement	t					
G8. Elevation of as-built lowest floor (including basement) of the building:	feet meters Datum					
G9. BFE or (in Zone AO) depth of flooding at 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 location, per C2(e), if applicable)						
	Check here if attachments.					

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

See Instructions for Item A6.

OMB No. 1660-0008

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City LONGBOAT KEY	State Florida	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.





Photo One

Photo One Caption

Clear Photo One

FEMA Form 086-0-33 (7/15)

Photo Two Caption

Replaces all previous editions.

Clear Photo Two
Form Page 5 of 6

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

Continuation Page

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt #6900 LONGBOAT DR. S.	Policy Number:		
City LONGBOAT KEY	State Florida	ZIP Code 34228	Company NAIC Number
If submitting more photographs that with: date taken; "Front View" and photographs must show the foundation	d "Rear View"; and, if required	d, "Right Side View" and	raphs below. Identify all photographs "Left Side View." When applicable, ats, as indicated in Section A8.
	Pholo Ti	hree	
Photo Three Caption			Clear Photo Three
			*
	Photo I	_	
	FIIOLO	Four	
	Photo Fo	ur	
Photo Four Caption			Clear Photo Four