17-233L10FI-FF086033\_0-0291E\_6925 LONGBOAT\_DR\_11Feb2020 U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2022

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 wher.

	SEC	TION A - PROPERTY	/ INFOR	MATION			FOR INSUR	RANCE COMPANY USE
A1. Building Owner's Name SAND & SNOW INVESTMENTS LLC					Policy Num	ber:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. #6925 LONGBOAT DR. S.					Company N	AIC Number:		
City LONGBOAT K	City State LONGBOAT KEY Florida					ZIP Code 34228		
		ind Block Numbers, Ta ACH PI#77828.0020/		l Number, Le	gal Descrip	otion, etc.)		
A4. Building Use (	e.g., Resider	ntial, Non-Residential,	Addition	, Accessory,	etc.) RE	SIDENTS	S	
A5. Latitude/Longi	tude: Lat. 2	7.4350579	Long8	32.683425	Н	orizontal D	atum: NAD 1	927 X NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being u	sed to obt	ain flood in	nsurance.	
A7. Building Diagra	am Number	7						
A8. For a building	with a crawls	space or enclosure(s):						
a) Square foo	tage of craw	Ispace or enclosure(s)			1056.00 so	q ft		
b) Number of	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within	1.0 foot at	bove adjacent gra	de 6
c) Total net ar	ea of flood o	penings in A8.b		306.00 sq in	ı			
d) Engineered	l flood openir	ngs? 🗵 Yes 🗌 N	No					
A9. For a building v	vith an attach	ned garage:						
a) Square foot	a) Square footage of attached garageN/A sq ft							
b) Number of	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A							
c) Total net are	ea of flood o	penings in A9.b		N/A sq	in			
d) Engineered	flood openin	ngs? Yes 🗆	No.					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Commun		Community Number		B2. County				B3. State
LONGBOAT KEY-	125126			MANATEE				Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/	B8. Floor Zone(s)	d E	39. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
12081C 0291	E	03-17-2014	03-17-2	vised Date 2014	AE	g	FEET	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:  The 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								

# **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or #6925 LONGBOAT DR. S.	Policy Number:				
City Stat LONGBOAT KEY Flor		Code 28	Company NAIC Number		
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					
C1. Building elevations are based on: Construction  *A new Elevation Certificate will be required when concept to the service of the property	on Drawings*	ding Under Construing is complete. FE), AR, AR/A, AR/A In Item A7. In Puerto NAVD 88 w.	riction*		
<ul><li>g) Highest adjacent (finished) grade next to building</li><li>h) Lowest adjacent grade at lowest elevation of dec</li></ul>					
structural support			N/A   ✓ feet   ✓ meters		
SECTION D – SURVEYOR,  This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment unit Were latitude and longitude in Section A provided by a lice	rveyor, engineer, or arch s my best efforts to interp nder 18 U.S. Code, Sect	nitect authorized by pret the data availa- tion 1001.	law to certify elevation information.		
Certifier's Name LELAND E. BEDWELL  Title REGISTERED SURVEYOR  Company Name LELAND E. BEDWELL SURVEYING, INC.  Address 3423 55TH DRIVE EAST	License Number PSM 5884		This item has been electronically signed and sealed by LELAND E. BEDWELL using a Digital Signature and date Printed copies of this document are not considered signedand sealed and the entire copies of the signed and sealed and the least signed and sealed and the least signed by Leland e.  Digitally signed by Leland e.  Bedwell Date: 2020.07.13		
City BRADENTON	State Florida	ZIP Code 34203	Bedwell 16:32:45 -04'00' 05-13-2019		
Signature Digitally signed by Leland e. Bedwell Date: 2020.07.13 16:33:04-04'00'	Date 05-13-2019	Telephone (941) 753-9994	Ext. NA		
Copy all pages of this Elevation Certificate and all attachmen		icial, (2) insurance a	agent/company, and (3) building owner.		
Comments (including type of equipment and location, per LOWEST MACHINERY/ EQUIPMENT SERVICING THE CALCULATIONS **SEE ARCH PLANS FOR DETAILS AI REQUIREMENTS: MINIMUM OF 2 VENTS PER ENCLOFt.) V= HYDROSTATIC RELIEF OF VENT N= NUMBER REQURIE,] (6) VENTS PROVIDED. 1,200 Sq. Ft. OF RE	BUILDING BEING ELE ND LOCATIONS, HYDR SED AREA CALCULAT OF VENTS REQUIRED	ROSTATIC RELIEF FIONS: A / V = N, A D [1056 Sq. Ft. / 200	F: 200 Sq. Ft per Vent A= TOTAL ENCLOSED AREA (Sq. 0 Sq. Ft. = MIN. 6 VENTS		

# **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMP	ORTANT: In these spaces, copy the correspondi	ng information from Se	ection A.	FOR INSURANCE COMPANY USE		
	ding Street Address (including Apt., Unit, Suite, and 25 LONGBOAT DR. S.	/or Bldg. No.) or P.O. Ro	ute and Box No.	Policy Number:		
City Sta		State ZIP	Code	Company NAIC Number		
		lorida 342	228	360 336		
	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 Riccomply enter meters.						
E1.	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 ☐ mete	rs above or below the HAG.		
	<ul> <li>Top of bottom floor (including basement, crawlspace, or enclosure) is</li> </ul>	N/A	☐ feet ☐ mete	rs above or below the LAG.		
E2.	For Building Diagrams 6–9 with permanent flood of the next higher floor (elevation C2.b in	•	ion A Items 8 and/or	9 (see pages 1–2 of Instructions),		
	the diagrams) of the building is	N/A	feet mete	rs above or below the HAG.		
E3.	Attached garage (top of slab) is	N/A	☐ feet ☐ mete	rs above or below the HAG.		
E4.	Top of platform of machinery and/or equipment servicing the building is	N/A	☐ feet ☐ mete	rs above or below the HAG.		
E5.	Zone AO only: If no flood depth number is available floodplain management ordinance?			cordance with the community's certify this information in Section G.		
	SECTION F - PROPERTY OWN	IER (OR OWNER'S REP	RESENTATIVE) CI	ERTIFICATION		
The	property owner or owner's authorized representativ munity-issued BFE) or Zone AO must sign here. Th	e who completes Section e statements in Sections	ns A, B, and E for Zo S A, B, and E are cor	one A (without a FEMA-issued or rect to the best of my knowledge.		
Prop	perty Owner or Owner's Authorized Representative's	s Name				
Add	ress	City	St	ate ZIP Code		
Sigr	nature	Date	Te	elephone		
Con	nments					
				Check here if attachments.		

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corre	esponding informati	ion from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, St. #6925 LONGBOAT DR. S.	No. Policy Number:		
City	State	ZIP Code	Company NAIC Number
LONGBOAT KEY	Florida	34228	
SECTIO	N G - COMMUNITY	INFORMATION (OPTIO	NAL)
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete	r the community's floodpla the applicable item(s) a	ain management ordinance can complete nd sign below. Check the measurement
engineer, or architect who is authoriz data in the Comments area below.)	ed by law to certify el	levation information. (Indi	gned and sealed by a licensed surveyor, cate the source and date of the elevation
G2. A community official completed Section or Zone AO.	on E for a building loo	cated in Zone A (without a	a FEMA-issued or community-issued BFE)
G3. The following information (Items G4–	G10) is provided for o	community floodplain mai	nagement purposes.
G4. Permit Number	G5. Date Permit Iss	sued	G6. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	] New Construction [	Substantial Improvement	ent
G8. Elevation of as-built lowest floor (including of the building:	) 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 ap	oplicable)	
			SLDG PE
			Copy of Record
			acold
			Check here if attachments.

## **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., U #6925 LONGBOAT DR. S.	Policy Number:		
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.



FRONT / ADDRESS



SIDE / METER

Photo One Caption 05-13-2019

Clear Photo One



REAR



REAR

COPY OF RECORD

Photo Two

Photo One

Photo Two Caption 05-13-2019

Clear Photo Two

### **BUILDING PHOTOGRAPHS**

## **ELEVATION CERTIFICATE**

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the cor	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, \$ #6925 LONGBOAT DR. S.	Policy Number:		
City 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.





**SMART VENT** 

SIDE

Photo Three

Photo Three Caption 05-13-2019

Clear Photo Three

COPY OF RECORD

Photo Four

05-13-2019 Photo Four Caption

Clear Photo Four