FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires July 31, 2002

Important: Read the instructions on pages 1 - 7.							
SECTION A - PROPERTY OWNER INFORMATION					For Insurance Company Use:		
BUILDING OWNER'S NAME JAMES & DEBRA Mck		Policy Number					
BUILDING STREET ADDRE	Company NAIC Number						
CITY STATE ZIP CODE LONGBOAT KEY FL							
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 85, SLEEPY LAGOON PARK, NO. 2							
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL							
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: ☐ GPS (Type): (##° - ##' - ##.##" or ##.#####°) ☐ NAD 1927 ☑ NAD 1983 ☐ USGS Quad Map ☐ Other:							
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP COMMUNITY NAM TOWN OF LONGBOAT KEY			32. COUNTY NAME MANATEE		33. STATE FLORIDA		
B4. MAP AND PANEL NUMBER 125126 0005	B5. SUFFIX	B6. FIRM INDEX DATE 05/18/92	B7. FIRM PANEL EFFECTIVE/REVISED DATE 05/18/92	B8. FLOOD ZONE(S) A13	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 11		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.							
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe):							
					,		
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date							
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)							
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.							
C2. Building Diagram Number (Select the building diagram most similar to the building for which this certificate is being completed - see							
pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) C3. 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 C3a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from							
the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion							
calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.							
Datum NGVD Conversion/Comments NA							
Flevation reference mark used CCL Does the elevation reference mark used annear on the FIRM? Yes Milo							
o a) Top of bottom floor (including basement or enclosure)							
o b) Top of next higher floor 14. 5 ft.(m) First Living 0 0							
o c) Bottom of lowest horizontal structural member (V zones only)							
o a) Top of bottom floor (including basement or enclosure) o b) Top of next higher floor o c) Bottom of lowest horizontal structural member (V zones only) o d) Attached garage (top of slab) o e) Lowest elevation of machinery and/or equipment servicing the building o f) Lowest adjacent grade (LAG) o g) Highest adjacent grade (HAG) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 9							
o e) Lowest elevation of machinery and/or equipment							
servicing the building II. If ft. (m) Provided the service of th							
o f) Lowest adjacent grade (LAG) o g) Highest adjacent grade (HAG)							
o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 9							
o i) Total area of all permanent openings (flood vents) in C3hsq. in. (sq. cm) 1,728 Sq. IN.							
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.							
I certify that the information in Sections A, B, and C 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.							
I understand that any fals CERTIFIER'S NAME ROBE	se statement n RT G. BRUCE	nay be punishable l	LICI	ENSE NUMBER 451	9		
TLE OWNER			COMPANY NAME RED				
ADDRESS)	2.1	CITY SARASOTA	STATE FL	ZIP CODE 34241		
7123 PROCTOR ROAD SIGNATURE	VOIT Z	Drive	DATE 03/03/2003	TELEPHO 941-923-9	NE		
FEMA Form 81-31, AUG 9	99	SEE REVE	RSE SIDE FOR CONTINUAT	ION REPL	ACES ALL PREVIOUS EDITIONS		

IMPORTANT: In these s	For Insurance Company Use:						
723 MARBURY LANE	UILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 23 MARBURY LANE						
CITY LONGBOAT KEY	STATE FL	ZIP CODE	Company NAIC Number				
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)							
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.							
COMMENTS SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION TO BE VERIFIED AT LOCAL F.E.M.A. CONTROL OFFICE.							
OFOTION F. BUILDING	NO EL EVATION INFORMATION (OUR VEVA COLOR	OUIDED) FOR TOUE 40.	Check here if attachments				
	NG ELEVATION INFORMATION (SURVEY NOT RE						
	(without BFE), complete Items E1 through E4. If the ILL LOMR-F, Section C must be completed.	Elevation Certificate is inten	ueu ior use as supporting				
	E1. Building Diagram Number _(Select the building diagram most similar to the building for which this certificate is being completed – see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)						
E2. The top of the bottom floor (including basement or enclosure) of the building is ft.(m)in.(cm) _ above or _ below (check one) the highest adjacent grade.							
the nighest adjacent grade. E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is							
ft.(m)in.(cm) above the highest adjacent grade.							
E4. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.							
	nt ordinance?						
	rner's authorized representative who completes Section						
	or Zone AO must sign here.						
PROPERTY OWNER'S OR	OWNER'S AUTHORIZED REPRESENTATIVE'S NAME						
ORESS	CITY	STATE	ZIP CODE				
SIGNATURE	DATE	TELEPH	ONE				
COMMENTS							
			☐ Check here if attachments				
	SECTION G - COMMUNITY INFORM	IATION (OPTIONAL)	- Check here it attachments				
The local official who is aut	thorized by law or ordinance to administer the commu		nt ordinance can complete				
Sections A, B, C (or E), and	d G of this Elevation Certificate. Complete the applic	able item(s) and sign below.					
31. The information in S	Section C was taken from other documentation that h	as been signed and emboss	sed by a licensed surveyor,				
	ect who is authorized by state or local law to certify eller to Comments area below.)	evation information. (Indica	te the source and date of the				
	al completed Section E for a building located in Zone	A (without a FEMA-issued o	r community-issued BFE) or				
Zone AO.							
33. The following inform	nation (Items G4-G9) is provided for community flood						
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF ISSUED	F COMPLIANCE/OCCUPANCY				
37. This permit has been is	ssued for: New Construction Substantial Imp		_				
38. Elevation of as-built lov	west floor (including basement) of the building is:	ft.(m)	Datum:				
	lepth of flooding at the building site is:	ft.(m)	Datum:				
LOCAL OFFICIAL'S NAME	TIT						
COMMUNITY NAME		EPHONE					
SIGNATURE	DA	IE .					
COMMENTS							
\mathcal{L}			Check here if attachments				
FEMA Form 81-31 AUG 9	19	RFPI	ACES ALL PREVIOUS EDITIONS				