FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

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

REPLACES ALL PREVIOUS EDITIONS

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: **BUILDING OWNER'S NAME** Policy Number \in RUPPERT WILLIAM BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number LIGHTHOUSE POINT DRIVE CITY STATE ZIP CODE FL. 34228 LONGBOAT KE' PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 15 LIGHT HOUSE POINT BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: | GPS (Type): (##° - ##' - ##.##" or ##.####°) NAD 1927 __| NAD 1983 USGS Quad Map I Other: SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME B3. STATE** TOWN OF LONGBOAT KEY 125126 SARASOTA FL. **B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX** B7. FIRM PANEL B8. FLOOD B9. BASE FLOOD ELEVATION(S) NUMBER EFFECTIVE/REVISED DATE DATE ZONE(S) (Zone AO, use depth of flooding) B 125126 0010 MAY 18, 1992 AUG. 15, 1983 A13 12' B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. I I FIRM | | FIS Profile 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 Designation Date: SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) 7. Building elevations are based on: | |Construction Drawings* I | Building Under 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 NG VD 1929 Conversion/Comments N/A Elevation reference mark used RM-8 Does the elevation reference mark used appear on the FIRM? a) Top of bottom floor (including basement or enclosure) 12 . 6 ft.(pm) □ b) Top of next higher floor . Oft.(pa) c) Bottom of lowest horizontal structural member (V zones only) N/A ft.(m) ☐ d) Attached garage (top of slab) 8 ft.(m) e) Lowest elevation of machinery and/or equipment Number, servicing the building 0 ft.(m) ☐ f) Lowest adjacent grade (LAG) 1 ft.(pa) ☐ g) Highest adjacent grade (HAG) 3 ft.(m) h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade i) Total area of all permanent openings (flood vents) in C3h 8 1, 195.2 sq. in. (sq. cm) 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. ERTIFIER'S NAME LICENSE NUMBER P. S. M. DEMNIS R. 4419 TITLE **COMPANY NAME** VICE PRESIDENT SURVEY BISHOP ASSOCIATES **ADDRESS** CITY STATE ZIP CODE SARASOTA SIGNATURE 34240 DATE **TELEPHONE** 5/16/00 (941) 371-6362 FEMA Form 81-31, AUG 99 SEE REVERSE SIDE FOR CONTINUATION

IMPORTANT: In these spaces, copy the corresponding information from S	action A	For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. RO		Policy Number
		and the second of the second o
CITY STATE	ZIP CODE	Company NAIC Number
SECTION D - SURVEYOR, ENGINEER, OR ARCHITEC	CT CERTIFICATION (CON	TINUED)
Copy both sides of this Elevation Certificate for (1) community official, (2) insurar	nce agent/company, and (3	3) building owner.
Top of A/C EQUIP. SLAB = 12.0'		THE STATE OF THE STATE OF
BOTTOM OF WATER HEATER = 12.5"		
DO HOM OF WATER MEATER - 1003		- 5 5 15 5 - 7
Q 12 3 44 5		
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQ	AUIDED) FOR ZONE AO A	Check here if attachment
or Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Electron for a LOMA or LOMR-F, Section C must be completed.	evalion Certificate is interic	ded for use as supporting
1. 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		•
2. The top of the bottom floor (including basement or enclosure) of the building is	s _ ft.(m) _ ir	n.(cm) above or below
(check one) the highest adjacent grade.	- alassata d flace (alassation)	h) of the building in
E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor o _ ft.(m) _ in.(cm) above the highest adjacent grade.	r elevated floor (elevation i	b) of the building is
E4. For Zone AO only: If no flood depth number is available, is the top of the bott	om floor elevated in accord	dance with the community's
		is information in Section G.
SECTION F - PROPERTY OWNER (OR OWNER'S RE		
The property owner or owner's authorized representative who completes Section	is A, B, and E for Zone A (without a FEMA-issued or
community-issued BFE) or Zone AO must sign here.		
PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME	5	
ADDRESS CITY	STATE	ZIP CODE
SIGNATURE DATE	TELEPH	HONE
COMMENTS		
		[Check here if attachment
SECTION G - COMMUNITY INFORMA	TION (OPTIONAL)	
he local official who is authorized by law or ordinance to administer the communi	ity's floodplain managemen	nt ordinance can complete
Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicab	ole item(s) and sign below.	
61. The information in Section C was taken from other documentation that ha engineer, or architect who is authorized by state or local law to certify ele	is been signed and embos	sed by a licensed surveyor,
engineer, or architect who is authorized by state or local law to certify ele- elevation data in the Comments area below.)	valion information. (indica	ate the source and date of the
62. A community official completed Section E for a building located in Zone A	(without a FEMA-issued	or community-issued BFE) or
Zone AO.		
G3. The following information (Items G4-G9) is provided for community flood		
G4. FEININ HOMBEN	G6. DATE CERTIFICATE OF ISSUED	F COMPLIANCE/OCCUPANCY
67. This permit has been issued for: New Construction Substantial 68. Elevation of as-built lowest floor (including basement) of the building is:		ft.(m) Datum:
69. BFE or (in Zone AO) depth of flooding at the building site is:		ft.(m) Datum:
LOCAL OFFICIAL'S NAME TITLE	E	
TEL	PHONE	
COMMONITY NAME		
SIGNATURE DATE		3 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
COMMENTS		a 1
		Check here if attachmer
	REPL	ACES ALL PREVIOUS EDITION

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