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 INSURANCE COMPANY US			
A1. Building Owner's Name NICHOLAS BRIGGS Policy Number:				
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number 515 REID STREET (DETACHED GARAGE)				
City State SARASOTA Florida	ZIP Code 34242			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) WEST 94 FT OF LOT 14 BLK A REPLAT OF PORTION OF OCEAN BEACH SUBDIVISION				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) NON-RESIDE	NTIAL			
A5. Latitude/Longitude: Lat. 27d17'12.53"N Long. 82d33'36.69"W Horizontal Dat	um: NAD 1927 NAD 1983			
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood ins	urance.			
A7. Building Diagram Number1B				
A8. For a building with a crawlspace or enclosure(s):				
a) Square footage of crawlspace or enclosure(s) o sq ft				
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot abo	ove adjacent grade0			
c) Total net area of flood openings in A8.b0 sq in				
d) Engineered flood openings?				
A9. For a building with an attached garage:				
a) Square footage of attached garage 466 sq ft				
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacer	nt grade 3			
c) Total net area of flood openings in A9.b 600 sq in				
d) Engineered flood openings? Yes No				
d) Engineered nood openings:				
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFOR	MATION			
B1. NFIP Community Name & Community Number SARASOTA COUNTY, FLORIDA 125144 B2. County Name SARASOTA	B3. State Florida			
B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/	(Zone AO, use Base			
12115C0141 F 11/04/2016 Revised Date 11/04/2016 AE	Flood Depth) 10			
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 X NAVD 1988 C 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 DPA				

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

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. 515 REID STREET (DETACHED GARAGE)			Policy Number:	
City SARASOTA	State ZIP Florida 342	Code 42	Company NAIC Number	
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)				
*A new Elev C2. Elevations – Complete Ite Benchmark Indicate elev	ation Certificate will be required when construction of the buildity-Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with Bems C2.a–h below according to the building diagram specified Utilized: COUNTY BENCHMARK 79-C Vertical Datum: Vation datum used for the elevations in items a) through h) belo	FE), AR, AR/A, AR in Item A7. In Puer NGVD 1929		
	GVD 1929 X NAVD 1988 Other/Source: for building elevations must be the same as that used for the E	BFE.		
b) Top of the c) Bottom of Attached e) Lowest e (Describe	ottom floor (including basement, crawlspace, or enclosure floor ne next higher floor of the lowest horizontal structural member (V Zones only) of garage (top of slab) selevation of machinery or equipment servicing the building etype of equipment and location in Comments) adjacent (finished) grade next to building (LAG)	10. 0 4. 1 N/A. N/A. N/A. 10. 0		
100	adjacent (finished) grade next to building (HAG)	3.5	X feet meters	
h) Lowest a	adjacent grade at lowest elevation of deck or stairs, including I support	<u>N/A</u> .	X feet meters	
	SECTION D – SURVEYOR, ENGINEER, OR ARC	CHITECT CERTIF	CATION	
I certify that the i stateme <mark>nt may b</mark>	is to be signed and sealed by a land surveyor, engineer, or arc information on this Certificate represents my best efforts to intere it punishable by fine or imprisonment under 18 U.S. Code, Sec it longitude in Section A provided by a licensed land surveyor? License Number	rpret the data availation 1001.	y law to certify elevation information. able. I understand that any false Check here if attachments.	
JAMES B. AMBE Title PRESIDENT			12/3/2018	
Address	I TRAIL, SUITE 110-B State Florida	ZIP Code 34236	Place Sealn Here	
Signature	Date	Telephone	D101 ag.	
	12/3/2018	(941) 955-6333	0 30467	
	this Elevation Certificate and all attachments for (1) community of	fficial, (2) insurance	agent/company, and (3) building owner.	
C2: ELEVATION A9(c): THESE VE	ding type of equipment and location, per C2(e), if applicable) S CONVERTED USING CORPSCON6 SOFTWARE. ENTS ARE RATED TO PROVIDE SUFFICIENT HYDROSTATI AL PANEL LOCATED INSIDE OF BLDG ON THE SOUTHEAS		R 200 SQUARE FEET EACH.	

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

MPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY US				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 515 REID STREET (DETACHED GARAGE)				Policy Number:
City	State	ZIP Code		Company NAIC Number
SARASOTA	Florida	34242		
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 			meters	s above or below the HAG.
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 			meters	s 🔲 above or 🔲 below the LAG.
E2. For Building Diagrams 6–9 with permanent flood	openinas provider	d in Section A Items	: 8 and/or	9 (see names 1_2 of Instructions)
the next higher floor (elevation C2.b in	openings provided	_		
the diagrams) of the building is Attached garage (top of slab) is		_	☐ meters	<u> </u>
E3. Attached garage (top of slab) is E4. Top of platform of machinery and/or equipment	·	reet	meter	s above or below the HAG.
servicing the building is		_	meter:	
E5. Zone AO only: If no flood depth number is availal floodplain management ordinance? Yes				
SECTION F - PROPERTY OV	VNER (OR OWNE	R'S REPRESENTA	ATIVE) CE	RTIFICATION
The property owner or owner's authorized representation community-issued BFE) or Zone AO must sign here.	tive who complete The statements in	es Sections A, B, an Sections A, B, and	d E for Zo E are corr	ne A (without a FEMA-issued or rect to the best of my knowledge.
Property Owner or Owner's Authorized Representative	e's Name			
Address		City	Sta	
Signature		Date	Te	ephone
Comments				
				-

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, St 515 REID STREET (DETACHED GARAGE)	Policy Number:		
City SARASOTA	State Florida	ZIP Code 34242	Company NAIC Number
SECTION	ON G - COMMUNITY INFOR	MATION (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 Sect or Zone AO.	ion E for a building located in	Zone A (without a FEM	A-issued or community-issued BFE)
G3. The following information (Items G4-	-G10) is provided for commu		
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	New Construction Subs	stantial Improvement	
G8. Elevation of as-built lowest floor (including of the building:	g basement)		meters Datum
G9. BFE or (in Zone AO) depth of flooding at	the building site:		meters Datum
G10. Community's design flood elevation:		feet	meters Datum
Local Official's Name	Title		
Community Name	Tel	ephone	
Signature	Dat	е	
Comments (including type of equipment and lo	cation, per C2(e), if applicabl	e)	
			Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 515 REID STREET (DETACHED GARAGE)			FOR INSURANCE COMPANY USE
			Policy Number:
City	State	ZIP Code	Company NAIC Number
SARASOTA	Florida	34242	

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.

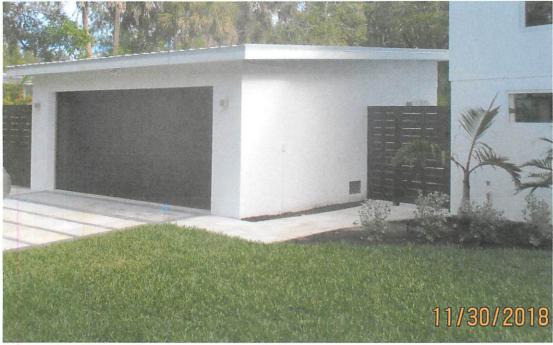


Photo One

Photo One Caption FRONT VIEW



Photo Two

Photo Two Caption REAR VIEW

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

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. 515 REID STREET (DETACHED GARAGE)			Policy Number:
City	State	ZIP Code	Company NAIC Number
SARASOTA	Florida	34242	

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.



Photo One

Photo One Caption TYPICAL FLOW-THRU VENT

Photo Two

Photo Two

Photo Two Caption

