#### 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 owner.

SECTION A – PROPERTY INFORMATION						FOR INSI	JRANCE COMPANY USE
A1. Building Owner's Name  RANDY HIGEL, LLC  Policy Number:						mber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  190 MANESS ROAD  Company NAIC Number:						NAIC Number:	
City VENICE				State Florida		ZIP Code 34293	
		nd Block Numbers, Ta E UNIT NO 16, P.I.D.			gal Description, e	tc.)	
A4. Building Use (	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL						
A5. Latitude/Longi	tude: Lat. 2	7.054430°	Long8	32.413200°	Horizonta	al Datum: 🔲 NAD	) 1927 × NAD 1983
A6. Attach at least	 2 photograp	hs of the building if the	e Certific	ate is being ι	 ised to obtain floo	od insurance.	
A7. Building Diagra	am Number	1B					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawl	space or enclosure(s)			N/A sq ft		
b) Number of	permanent flo	ood openings in the cr	awlspace	e or enclosure	 e(s) within 1.0 foo	t above adjacent ç	grade N/A
c) Total net ar	ea of flood o	penings in A8.b		N/A sq ir	1		
d) Engineered	I flood openir	ngs? Yes 🗵 Y	No				
A9. For a building \	A9. For a building with an attached garage:						
a) Square foot	a) Square footage of attached garage454.00 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 area of flood openings in A9.b  N/A sq in						
<u> </u>			Jo.				
d) Engineered flood openings?							
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Community Name & Community Number  SARASOTA COUNTY - 125144  B2. County Name  SARASOTA  B3. State  Florida					B3. State Florida		
ON THE STATE OF TH							
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood (Zone AO, t	Elevation(s) use Base Flood Depth)
12115C-341	F	11-04-2016	11-04-2		AE	10'	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:							
☐ FIS Profile 区 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			

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IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or 190 MANESS ROAD	Policy Number:				
City Stat VENICE Flor		Code 93	Company NAIC Number		
SECTION C – BUILDING ELI	EVATION INFORMA	TION (SURVEY RE	EQUIRED)		
<ul> <li>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.</li> <li>C2. 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 C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: SAR CO BM #458, ELEV = 13.48' Vertical Datum: N.G.V.D. 1929</li> </ul>					
Indicate elevation datum used for the elevations in it	 ems a) through h) belo	W.			
☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/S Datum used for building elevations must be the sam		BFE.	Check the measurement used.		
a) Top of bottom floor (including basement, crawlsp	ace, or enclosure floor	)	11.5 × feet meters		
b) Top of the next higher floor			N/A X feet meters		
c) Bottom of the lowest horizontal structural membe	er (V Zones only)		N/A X feet meters		
d) Attached garage (top of slab)			11.1 × feet meters		
e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Com	vicing the building ments)		N/A ⋉ feet ☐ meters		
f) Lowest adjacent (finished) grade next to building	(LAG)		10.5 × feet meters		
g) Highest adjacent (finished) grade next to building	ı (HAG)		10.6 × feet meters		
<ul> <li>h) Lowest adjacent grade at lowest elevation of dec structural support</li> </ul>	k or stairs, including		N/A ⊠ feet ☐ meters		
SECTION D – SURVEYOR,	ENGINEER, OR AR	CHITECT CERTIFI	CATION		
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 lic	censed land surveyor?	⊠Yes □ No	Check here if attachments.		
Certifier's Name B. GREGORY RIETH	License Number 5228				
Title PSM/CFM			HIM REGULATOR PARTIES		
Company Name BENNETT-PANFIL, INC.			NO. 5228  * REGORY A STATE OF STATE OF LAND		
Address 742 SHAMROCK BLVD			ORIDANIA MILITARIA DE LAND		
City VENICE	State Florida	ZIP Code 34293	The state of the s		
Signature	Date 08-15-2022	Telephone (941) 497-1290	Ext.		
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.					
Comments (including type of equipment and location, per C2(e), if applicable)  FILE #17-07-32. THE SUBJECT STRUCTURE IS UNDER CONSTRUCTION. NO VENTS OR MACHINERY HAVE BEEN INSTALLED  AT THIS TIME. SECTION A5 WAS DERIVED FROM A HAND HELD G.P.S. UNIT (GPSTEST APP - NO CONVERSION). ELEVATIONS  SHOWN IN SECTION "C" WERE CONVERTED FROM N.G.V.D. 1929 DATUM TO N.A.V.D. 1988 DATUM USING VERTCON  CONVERSION PROGRAM.					
DATE OF FIELD SURVEY: 7/22/2022					

## **ELEVATION CERTIFICATE**

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MPORTANT: In these spaces, copy the corresponding information from Section A.					FOR INSURAN	ICE COMPANY USE
	ding Street Address (including Apt., Unit, Suite, MANESS ROAD	and/or Bldg. No.) or	P.O. Route and Bo	ox No.	Policy Number:	
City VEN	NICE	State Florida	ZIP Code 34293		Company NAIC	Number
	SECTION E – BUILDING FOR ZO	ELEVATION INFO			REQUIRED)	
con	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 lower a) Top of bottom floor (including basement, crawlspace, or enclosure) is	est adjacent grade (L	AG).			
	b) Top of bottom floor (including basement, crawlspace, or enclosure) is		feet	meter	rs 🔲 above or	below the LAG.
E2.	For Building Diagrams 6–9 with permanent floot the next higher floor (elevation C2.b in the diagrams) of the building is	od openings provided	d in Section A Item		,	2 of Instructions),
E3.	Attached garage (top of slab) is		feet	meter	rs 🔲 above or	below the HAG.
E4.	Top of platform of machinery and/or equipment servicing the building is	t	feet	meter	rs 🔲 above or	below the HAG.
E5.	Zone AO only: If no flood depth number is avail floodplain management ordinance? Yes					e community's nation in Section G.
	SECTION F - PROPERTY (	OWNER (OR OWNE	R'S REPRESENT	ATIVE) CE	ERTIFICATION	
The	property owner or owner's authorized represen nmunity-issued BFE) or Zone AO must sign here	tative who complete e. The statements in	s Sections A, B, ar Sections A, B, and	nd E for Zo I E are cor	one A (without a lirect to the best o	FEMA-issued or of my knowledge.
Property Owner or Owner's Authorized Representative's Name						
Add	Iress		City	Sta	ate	ZIP Code
Sig	nature		Date	Те	lephone	
Cor	nments					
					☐ Check I	nere if attachments.

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City VENICE	State Florida	ZIP Code 34293	Company NAIC Number			
SECTIO	N G – COMMUNITY INI	FORMATION (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.						
	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation					
G2. A community official completed Section or Zone AO.	on E for a building locate	ed in Zone A (without a FE	MA-issued or community-issued BFE)			
G3. The following information (Items G4–	G10) is provided for com	nmunity floodplain manage	ement purposes.			
G4. Permit Number	G5. Date Permit Issue	d G6	Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for:	New Construction 🔲 🥄	Substantial Improvement				
G8. Elevation of as-built lowest floor (including of the building:	g basement)		eet 🗌 meters Datum			
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	fe	eet 🗌 meters Datum			
G10. Community's design flood elevation:		fe	eet 🗌 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.

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 190 MANESS ROAD			Policy Number:
City	State	ZIP Code	Company NAIC Number
VENICE	Florida	34293	

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



Photo Two

Photo Two Caption Clear Photo Two

#### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

Continuation Page

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		<u> </u>	
IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt 190 MANESS ROAD	o. Policy Number:		
City	State	ZIP Code	Company NAIC Number
VENICE	Florida	34293	

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 Three

Photo Three Caption Clear Photo Three



Photo Four

Photo Four Caption Clear Photo Four