### 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.

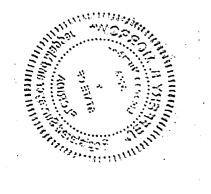
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION					FOR INSU	RANCE COMPANY USE		
A1. Building Owner's Name					Policy Nun	nber:		
SD Fruitville Comm								
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: 3017 Clementine Court						NAIC Number:		
City		State ZIP Code					<del></del>	
Sarasota				Florida			34232	
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Parcel ID-0215030001 & 0215030002							
A4. Building Use (	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Non-Residential/Clubhouse							
A5. Latitude/Longi	tude: Lat. 2	7°20'26.0	Long. 8	2°26'35.0		Horizontal Da	atum: 🔲 NAD	1927 × NAD 1983
A6. Attach at leas	t 2 photograp	hs of the building if th	e Certific	cate is being	used to	obtain flood in	surance.	
A7. Building Diagn	am Number	1A						
A8. For a building	with a crawls	space or enclosure(s):	:					
a) Square foo	tage of craw	lspace or enclosure(s)	)		N/A	sq ft		
b) Number of	permanent fle	ood openings in the cr	rawispac	e or enclosur	e(s) witl	hin 1.0 foot ab	ove adjacent gr	ade N/A
c) Total net ar	ea of flood o	penings in A8.b		N/A sq ir	n			
d) Engineered	I flood openia	ngs? 🗌 Yes 🗵 N	No					
A9. For a building v	vith an attacl	ned garage:						
a) Square foot	a) Square footage of attached garage N/A sq ft							
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A								
c) Total net are	c) Total net area of flood openings in A9.b N/A sq in							
d) Engineered flood openings?   Yes   No								
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Community Name & Community Number				B2. County Name				B3. State
Sarasota County 1	25144			Sarasota				Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/ Revised Date  B8. Flood Zone(s)			. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)		
12115C 0154	F	11-04-2016	11-04-2		Α	2	1.4	
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 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	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/o 3017 Clementine Court	Policy Number:				
City Sta Sarasota Flo		Code 232	Company NAIC Number		
SECTION C – BUILDING EL	EVATION INFORMA	TION (SURVEY RI	EQUIRED)		
C1. Building elevations are based on: Construction  *A new Elevation Certificate will be required when concentrations.  C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), Complete Items C2.a–h below according to the build Benchmark Utilized: R 641 2006  Indicate elevation datum used for the elevations in image in the properties of t	on Drawings* Bustonstruction of the build VE, V1–V30, V (with Eding diagram specified Vertical Datum tems a) through h) below Source: eas that used for the place, or enclosure floor	ilding Under Constru ding is complete. BFE), AR, AR/A, AR/ I in Item A7. In Puert I: NAVD 1988 ow.	Check the measurement used.  23.1		
c) Bottom of the lowest horizontal structural member d) Attached garage (top of slab)	er (V Zones only)		N/A feet meters  N/A feet meters  meters		
e) Lowest elevation of machinery or equipment ser (Describe type of equipment and location in Comf)  f) Lowest adjacent (finished) grade next to building  g) Highest adjacent (finished) grade next to building  h) Lowest adjacent grade at lowest elevation of decent structural support	nments) g (LAG) g (HAG)		22.7         ⋉ feet          meters           22.8         ⋉ feet          meters           23.0         ⋉ feet          meters           22.9         ⋉ feet          meters		
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION					
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 un Were latitude and longitude in Section A provided by a lice	rveyor, engineer, or ard s my best efforts to inte ander 18 U.S. Code, Sed	chitect authorized by rpret the data availa- ction 1001.	law to certify elevation information.		
Certifier's Name JEFF B MORROW  Title PARTNER  Company Name POINT BREAK SURVEYING  Address 8111 BLAIKIE CT  City SARASOTA	License Number PSM 6296 State Louisiana	ZIP Code 34240	Plage Seal Seal Here		
Signature	Date 8/25/2	Telephone (941) 378-4797	Ext.		
Copy all pages of this Elevation Certificate and all attachme	ents for (1) community o	fficial, (2) insurance a	gent/company, and (3) building owner.		
Comments (including type of equipment and location, per LOWEST EQUIPTMENT SERVICING THE BUILDING AI MULCH BEDDING AROUND WESTERN A/C PADS. STA	RE THE A/C UNITS AL				



#### **BUILDING PHOTOGRAPHS**

## **ELEVATION CERTIFICATE**

See Instructions for Item A6.

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

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Ap	Policy Number:		
3017 Clementine Court			
City	State	ZIP Code	Company NAIC Number
Sarasota	Florida	34232	

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 SOUTHERN AND WESTERN SIDES

Clear Photo One



Photo Two

Photo Two Caption NORTHERN AND WESTERN SIDES

Clear Photo Two

# **BUILDING PHOTOGRAPHS**

## **ELEVATION CERTIFICATE**

Continuation Page

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

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Ap 3017 Clementine Court	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Sarasota	Florida	34232	

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 NORTHERN AND EASTERN SIDES

Clear Photo Three

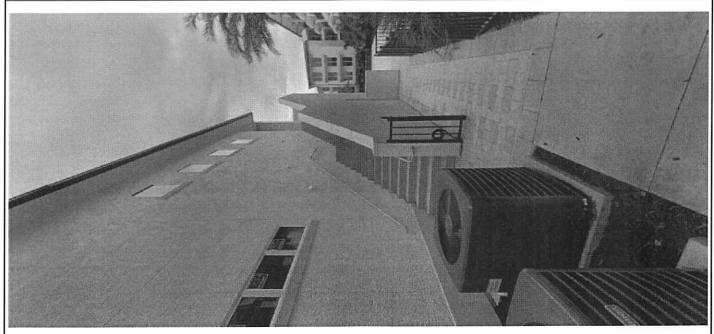


Photo Four

Photo Four Caption STAIR WELL AND LAG ON EAST SIDE

Clear Photo Four