ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate ar	d all attachments for (1) community	official (2) insurance agent/company	and (3) building owner
		2 onicial, (2) insulation agent/company	, and (5) building owner.

				()	ly official, (2		· · ·	
SECTION A – PROPERTY INFORMATION						RANCE COMPANY USE		
A1. Building Owner's Name Policy Number: CHRISTOPHER & ASHLEIGH LORENZ Policy Number:					Jer:			
A2. Building Stree Box No. 818 BRENTWOOD	,	cluding Apt., Unit, Sui	te, and/o	r Bldg. No.) o	r P.O. Rout	e and	Company N	AIC Number:
City	Brave			State			ZIP Code	
VENICE				Florida			34292	
A3. Property Desc METES AND BOU		nd Block Numbers, Ta 732003240	ax Parcel	Number, Le	gal Descript	ion, etc.)		
A4. Building Use (e.g., Resider	ntial, Non-Residential,	Addition	, Accessory,	etc.) RES	SIDENTIAL		
A5. Latitude/Longi	tude: Lat. 2	7.114699	Long. (-)82.346240	Hor	izontal Datu	m: 🗌 NAD 1	927 🛛 NAD 1983
A6. Attach at least	2 photograp	hs of the building if th	e Certific	ate is being ι	sed to obta	in flood insu	rance.	
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 enclosur	e(s) within 1	.0 foot abov	e adjacent gra	ade N/A
c) Total net ar	ea of flood o	penings in A8.b		N/A sq ir	I			
d) Engineered	l flood openir	ngs? 🗌 Yes 🖂 I	No					
A9. For a building v	vith an attacł	ned garage:						
a) Square foot	age of attach	ned garage		N/A sq ff				
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A								
,		penings in A9.b	C C	N/A sq		-		
,			No					
d) Engineered flood openings? 🗌 Yes 🔀 No								
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
		Community Number		B2. County				B3. State
SARASOTA COUN	ITY, FLORIL	DA 125144		SARASOTA	N .			Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	В9.	Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
12115C0351	F	11-04-2016	11-04-2		AE	7		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:								
☐ FIS Profile								
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					

ELEVATION CERTIFICATE			OMB No. 1660-0008 Expiration Date: November 30, 2022			
IMPORTANT: In these spaces, copy the	FOR INSU	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., U 818 BRENTWOOD DRIVE			Policy Nu			
CityStateZIP CodeVENICEFlorida34292				Company NAIC Number		
SECTION C	- BUILDING ELEVATION INF	ORMATION (SURVEY	REQUIRED)			
 C1. Building elevations are based on: *A new Elevation Certificate will be C2. Elevations – Zones A1–A30, AE, A Complete Items C2.a–h below acc Benchmark Utilized: NGS DATAPO Indicate elevation datum used for t □ NGVD 1929 × NAVD Datum used for building elevations 	Construction Drawings* required when construction of th AH, A (with BFE), VE, V1–V30, V ording to the building diagram sp <u>DINT 175 83 A24 RM1</u> Vertical he elevations in items a) through 1988 Other/Source:	⊠ Building Under Const ne building is complete. 7 (with BFE), AR, AR/A, A becified in Item A7. In Pue I Datum: <u>NAVD 1988</u> n h) below.	R/AE, AR/A1	Finished Construction		
a) Top of bottom floor (including b	asement, crawlspace, or enclosu	ure floor)	9.5 ×	feet 🗌 meters		
b) Top of the next higher floor			N/A ×	feet 🗌 meters		
c) Bottom of the lowest horizontal	structural member (V Zones only	y)	N/A 🛛	feet meters		
d) Attached garage (top of slab)			N/A ×	feet 🗌 meters		
e) Lowest elevation of machinery (Describe type of equipment an	or equipment servicing the buildi d location in Comments)	ing	<u>N/A</u> ×] feet 🗌 meters		
f) Lowest adjacent (finished) grad	le next to building (LAG)		6.4 ×	feet 🗌 meters		
g) Highest adjacent (finished) grad	de next to building (HAG)		6.9 ×	feet inters		
 h) Lowest adjacent grade at lowes structural support 	st elevation of deck or stairs, inclu	uding	6.4 ×] feet 🗌 meters		
SECTION E) – SURVEYOR, ENGINEER, (OR ARCHITECT CERTI	FICATION			
This certification is to be signed and se I certify that the information on this Cert statement may be punishable by fine of Were latitude and longitude in Section	tificate represents my best efforts r imprisonment under 18 U.S. Co	s to interpret the data ava ode, Section 1001.	ilable. I undei	tify elevation information. <i>rstand that any false</i> eck here if attachments.		
Certifier's Name	License Num	iber				
JAMES B. AMBERGER	LS6333			NES B. AMBER CHI		
PRESIDENT			IIII	LICEN COP		
Company Name JIM AMBERGER LAND SURVEYING L	LC			STATE OF FLORIDA		
Address 1055 S. TAMIAMI TRAIL, SUITE 110-B			10101055	STATE OF		
City SARASOTA	State Florida	ZIP Code 34236				
Signature	Date 06-12-2023	Telephone (941) 955-6333	Ext.			
Copy all pages of this Elevation Certificat	e and all attachments for (1) comr	munity official, (2) insuranc	e agent/comp	any, and (3) building owner.		
Comments (including type of equipment C2e: NOT YET INSTALLED.	t and location, per C2(e), if applic	cable)				

OMB No.	1660-0	0008		
Expiration	Date:	November	30,	2022

ELEVATION CERTIFICATE			Expiration Date: November 30, 2022
IMPORTANT: In these spaces, copy the correspo	onding information	on from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, 818 BRENTWOOD DRIVE	and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
City VENICE	State Florida	ZIP Code 34292	Company NAIC Number
		FORMATION (SURVEY NO DNE A (WITHOUT BFE)	T REQUIRED)
For Zones AO and A (without BFE), complete Items complete Sections A, B,and C. For Items E1–E4, us enter meters.	se natural grade, it	f available. Check the measu	rement used. In Puerto Rico only,
 E1. Provide elevation information for the following a the highest adjacent grade (HAG) and the lower a) Top of bottom floor (including basement, 			her the elevation is above or below
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet met	ers above or below the HAG.
crawlspace, or enclosure) is E2. For Building Diagrams 6–9 with permanent floo	od openings provid	feet met	
the next higher floor (elevation C2.b in the diagrams) of the building is		[] feet [] met	
E3. Attached garage (top of slab) is		feet 🗌 met	ers above or below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is	t	feet met	ers above or below the HAG.
E5. Zone AO only: If no flood depth number is avai floodplain management ordinance? Yes			accordance with the community's t certify this information in Section G.
SECTION F – PROPERTY C	WNER (OR OW	NER'S REPRESENTATIVE)	CERTIFICATION
The property owner or owner's authorized represen community-issued BFE) or Zone AO must sign here	tative who comple . The statements	etes Sections A, B, and E for 2 in Sections A, B, and E are c	Zone A (without a FEMA-issued or orrect to the best of my knowledge.
Property Owner or Owner's Authorized Representat	tive's Name		
Address		City	State ZIP Code
Signature		Date	Felephone
Comments			
			Check here if attachments.

OMB No.			
Expiration	Date:	November	30

ELEVATION CERTIFICATE	Expiration Date: November 30, 2022					
IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, St 818 BRENTWOOD DRIVE	Io. Policy Number:					
City VENICE	State Florida	ZIP Code 34292	Company NAIC Number			
SECTIO	ON G – COMMUNIT	Y INFORMATION (OPTIO	NAL)			
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.						
			ned and sealed by a licensed surveyor, cate the source and date of the elevation			
G2. A community official completed Secti or Zone AO.	on E for a building lo	ocated in Zone A (without a	FEMA-issued or community-issued BFE)			
G3. The following information (Items G4–	G10) is provided for	⁻ community floodplain mar	agement purposes.			
G4. Permit Number	G5. Date Permit Is	ssued	G6. Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for:] New Construction	Substantial Improveme	ent			
G8. Elevation of as-built lowest floor (including of the building:	j basement)	[] feet 🗌 meters Datum			
G9. BFE or (in Zone AO) depth of flooding at t	the building site:	[feet meters Datum			
G10. Community's design flood elevation:	_] feet [] meters Datum			
Local Official's Name		Title				
Community Name		Telephone				
Signature		Date				
Comments (including type of equipment and loc	cation, per C2(e), if a	applicable)				
			Check here if attachments.			

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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

IMPORTANT: In these spaces, copy the co	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 818 BRENTWOOD DRIVE			Policy Number:
City	State	ZIP Code	Company NAIC Number
VENICE	Florida	34292	

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 Caption FRONT VIEW Clear Photo One



Photo Two Caption REAR VIEW

Clear Photo Two

FEMA Form 086-0-33 (12/19)

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. 818 BRENTWOOD DRIVE	Policy Number:
CityStateZIP CodeVENICEFlorida34292	Company NAIC Number
If submitting more photographs than will fit on the preceding page, affix the additional photograp with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Le photographs must show the foundation with representative examples of the flood openings or vents,	eft Side View." When applicable,
Photo Three	
Photo Three	
Photo Three Caption	Clear Photo Three
Photo Four	
Photo Four Photo Four	Clear Photo Four

BUILDING PHOTOGRAPHS

Continuation Page

ELEVATION CERTIFICATE

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