#### 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 INSUF	RANCE COMPANY USE
•	A1. Building Owner's Name ASIM ASIM CHAUHAN & ISA CHAUHAN						ber:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  1401 KENILWORTH STREET  Company NAIC Number:						AIC Number:	
City SARASOTA				State Florida		ZIP Code 34231	
		nd Block Numbers, Ta IGS - P.I.D. #0076140		Number, Leç	gal Description, etc	c.)	
A4. Building Use (	e.g., Residen	tial, Non-Residential,	Addition	, Accessory, e	etc.) RESIDEN	TIAL	
A5. Latitude/Longit	ude: Lat. <u>27</u>	7.292890°	Long8	32.539130°	Horizonta	Datum: NAD 1	927 × NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being u	sed to obtain floo	d insurance.	
A7. Building Diagra	ım Number	1B					
A8. For a building v	with a crawls	pace or enclosure(s):					
a) Square foot	age of crawl	space or enclosure(s)			N/A sq ft		
b) Number of p	ermanent flo	ood openings in the cra	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ade N/A
c) Total net are	ea of flood op	penings in A8.b		N/A sq in	I		
d) Engineered	flood openin	gs? Yes 🗵 N	No				
A9. For a building w	vith an attach	ed garage:					
a) Square footage of attached garage568.00 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	ea of flood op	enings in A9.b		N/A sq	in		
d) Engineered flood openings?   Yes   No							
	SF	CTION B - FLOOD	INSLIRA	NCE RATE	MAP (FIRM) INF	ORMATION	
R1 NFIP Communi			11001		. ,	OKWATION	B3. State
B1. NFIP Community Name & Community Number SARASOTA COUNTY - 125144  B2. County Name SARASOTA  B3. State Florida							
B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Zone(s) B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)							
12115C-0141 F 11-04-2016 Revised Date 11-04-2016 AE 12'							
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 DPA							

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Building Street Address (including Apt., Unit, Suite, and/or 1401 KENILWORTH STREET	Policy Number:					
City Stat SARASOTA Flor		ZIP Code 34231	Company NAIC Number			
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
C1. Building elevations are based on:						
<ul><li>f) Lowest adjacent (finished) grade next to building</li><li>g) Highest adjacent (finished) grade next to building</li></ul>	,		6.3 X feet meters			
h) Lowest adjacent grade at lowest elevation of dec structural support	k or stairs, includin	g 	N/A ⊠ 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	my best efforts to lider 18 U.S. Code,	nterpret the data availa Section 1001.	law to certify elevation information.  ble. I understand that any false  Check here if attachments.			
Certifier's Name B. GREGORY RIETH	License Number 5228					
Title PSM/CFM  Company Name BENNETT-PANFIL, INC.  Address 742 SHAMROCK BLVD  City VENICE	State Florida	ZIP Code 34293	NO. 5228  **********************************			
Signature	Date 01-12-2023	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 FILE #21-04-39. SUBJECT STRUCTURE IS UNDER COTHIS TIME. SECTION A5 WAS DERIVED FROM A HAN SHOWN IN SECTION "C" WERE CONVERTED FROM IN CONVERSION PROGRAM.  DATE OF FIELD SURVEY: 1/5/2023	NSTRUCTION. NO ID HELD G.P.S. UN	VENTS OR MACHINI IIT (GPSTEST APP - N	IO CONVERSION). ELEVATIONS			

# **ELEVATION CERTIFICATE**

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.					OR INSURANCE COMPANY USE		
	ding Street Address (including Apt., Unit, Suite 1 KENILWORTH STREET	, and/or Bldg. No.) or	P.O. Route and Box N	No. Po	olicy Number:		
City	RASOTA	State Florida	ZIP Code 34231	Co	ompany NAIC Number		
	SECTION E – BUILDING FOR Z		RMATION (SURVE) E A (WITHOUT BFE		QUIRED)		
com	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						
	<ul><li>the highest adjacent grade (HAG) and the low</li><li>a) Top of bottom floor (including basement, crawlspace, or enclosure) is</li><li>b) Top of bottom floor (including basement,</li></ul>	est adjacent grade (L	.AG). 	meters	above or below the HAG.		
E2.	crawlspace, or enclosure) is  For Building Diagrams 6–9 with permanent flothe next higher floor (elevation C2.b in the diagrams) of the building is	ood openings provided	feet   d in Section A Items 8	meters and/or 9 (s meters	□ above or □ below the LAG. see pages 1–2 of Instructions), □ above or □ below the HAG.		
E3.	Attached garage (top of slab) is		feet	meters	above or below the HAG.		
E4.	Top of platform of machinery and/or equipment servicing the building is	nt	[feet [	meters	above or below the HAG.		
E5.	E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?   Yes No Unknown. The local official must certify this information in Section G.						
	SECTION F - PROPERTY	OWNER (OR OWNE	R'S REPRESENTATI	IVE) CERT	IFICATION		
The	property owner or owner's authorized represe munity-issued BFE) or Zone AO must sign her	ntative who complete e. The statements in	s Sections A, B, and E Sections A, B, and E	E for Zone are correct	A (without a FEMA-issued or to the best of my knowledge.		
Pro	perty Owner or Owner's Authorized Representa	ative's Name					
Add	ress	(	City	State	ZIP Code		
Sigi	nature		Date	Teleph	none		
Con	nments						
					Check here if attachments.		

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MPORTANT: In these spaces, copy the corre	FOR INSURANCE COM	IPANY USE				
Building Street Address (including Apt., Unit, St 1401 KENILWORTH STREET	o. Policy Number:					
City SARASOTA	State Florida	ZIP Code 34231	Company NAIC Number			
SECTIO	N G – COMMUNI	TY INFORMATION (OPTIC	IAL)			
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	located in Zone A (without	FEMA-issued or community-iss	sued BFE)		
G3. The following information (Items G4–	G10) is provided fo	or community floodplain ma	agement purposes.			
G4. Permit Number	G5. Date Permit	Issued	G6. Date Certificate of Compliance/Occupancy Is	sued		
G7. This permit has been issued for:	New Construction	n   Substantial Improvem	nt			
G8. Elevation of as-built lowest floor (including of the building:	basement)		feet  meters Datum			
G9. BFE or (in Zone AO) depth of flooding at t	he 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 location, per C2(e), if applicable)						
			☐ Check here if a	ttachments.		

#### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

See Instructions for Item A6.

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City	State	ZIP Code	Company NAIC Number
SARASOTA	Florida	34231	

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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Building Street Address (including 1401 KENILWORTH STREET	Policy Number:		
City	State	ZIP Code	Company NAIC Number
SARASOTA	Florida	34231	

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