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 INSUI	RANCE COMPANY USE
A1. Building Owner's Name ADAMS HOMES OF NORTHWEST FLORIDA, INC						ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 471 AZALEA ROAD						Company N	NAIC Number:
,						ZIP Code 34293	
		nd Block Numbers, Ta ENICE NO. 17 - P.I.D.			gal Description, et	c.)	
A4. Building Use (e.g., Resider	itial, Non-Residential,	Addition	, Accessory,	etc.) RESIDEN	ITIAL	
A5. Latitude/Longit	tude: Lat. 2	7.050390°	Long8	32.414460°	Horizonta	ıl 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	d 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 p	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foo	t above adjacent gr	ade N/A
c) Total net are	ea of flood o	penings in A8.b		N/A sqir	1		
d) Engineered							
A9. For a building v							
a) Square foot	a) Square footage of attached garage402.00 sq ft						
						acent grade N/A	
	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						
, ·			lo.				
d) Engineered flood openings?							
	SE	CTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM) INF	ORMATION	
B1. NFIP Community Name & Community Number B2. County Name B3. State							
SARASOTA COUNTY - 125144 SARASOTA Florida							
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	Elevation(s) se Base Flood Depth)
12115C-0341	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 ☑ 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 I 471 AZALEA ROAD	Policy Number:				
City State VENICE Floric		Code 93	Company NAIC Number		
SECTION C – BUILDING ELE	VATION INFORMA	TION (SURVEY RE	EQUIRED)		
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on:					
h) Lowest adjacent grade at lowest elevation of deck structural support			N/A X feet meters		
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION 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 licensed land surveyor? Yes No Check here if attachments.					
Certifier's Name B. GREGORY RIETH Title PSM/CFM Company Name BENNETT-PANFIL, INC. Address 742 SHAMROCK BLVD City VENICE	License Number 5228 State Florida	ZIP Code 34293	NO. 5228 **REGORY ATTERIAL ***********************************		
Signature	Date 08-04-2022	Telephone (941) 497-1290	Ext.		
Copy all pages of this Elevation Certificate and all attachmen	nts for (1) community o	fficial, (2) insurance a	agent/company, and (3) building owner.		
Comments (including type of equipment and location, per C2(e), if applicable) FILE #20-03-31. THERE ARE NO VENTS OR MACHINERY 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.					R INSURANCE COMPANY USE		
	ilding Street Address (including Apt., Unit, Suite, a 1 AZALEA ROAD	No. Pol	licy Number:				
City VEI	y NICE	State Florida	ZIP Code 34293	Col	mpany NAIC Number		
	SECTION E – BUILDING FOR ZO		RMATION (SURVE		QUIRED)		
con ent	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 a the highest adjacent grade (HAG) and the lowe a) Top of bottom floor (including basement,		ÄG).	_			
	crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is			_ meters _ meters	□ above or □ below the HAG. □ above or □ below the LAG.		
E2.	For Building Diagrams 6–9 with permanent floor the next higher floor (elevation C2.b in the diagrams) of the building is	d openings provide	d in Section A Items 8	3 and/or 9 (s ☐ meters	ee 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		feet	meters	☐ above or ☐ below the HAG.		
E5.	. Zone AO only: If no flood depth number is avail floodplain management ordinance?				ance with the community's fy this information in Section G.		
	SECTION F - PROPERTY O	WNER (OR OWNE	R'S REPRESENTAT	IVE) CERTI	FICATION		
The	e property owner or owner's authorized represent nmunity-issued BFE) or Zone AO must sign here	ative who complete . The statements in	es Sections A, B, and I Sections A, B, and E	E for Zone <i>A</i> are correct	A (without a FEMA-issued or to the best of my knowledge.		
Pro	pperty Owner or Owner's Authorized Representati	ive's Name					
Add	dress		City	State	ZIP Code		
Sig	gnature		Date	Teleph	one		
Cor	mments						
					Check here if attachments.		

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE							
Building Street Address (including Apt., Unit, S 471 AZALEA ROAD	Policy Number:							
City VENICE	State Florida	ZIP Code 34293		Company NAIC Number				
SECTION	SECTION G – COMMUNITY INFORMATION (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.								
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 (withou	ut a FEM <i>A</i>	A-issued or community-issued BFE)				
G3. The following information (Items G4-	-G10) is provided fo	or community floodplain n	nanageme	ent purposes.				
G4. Permit Number	G5. Date Permit	Issued		Pate Certificate of compliance/Occupancy Issued				
G7. This permit has been issued for:	New Constructio	n 🗌 Substantial Improve	ment					
G8. Elevation of as-built lowest floor (includin of the building:	g basement)		feet	meters Datum				
G9. BFE or (in Zone AO) depth of flooding at	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 lo	cation, per C2(e), it	f applicable)						
				Check here if attachments.				

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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IMPORTANT: In these spaces,	FOR INSURANCE COMPANY USE		
Building Street Address (includin 471 AZALEA 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 to	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., 471 AZALEA ROAD	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