

ELEVATION CERTIFICATE 11/12/10

OMB No. Expires N

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION			For Insurance Com
A1. Building Owner's Name			Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			Company NAIC Nu
<u># 25A 2ND STREET WEST</u> City <u>MOCONIS</u> State <u>FLORIDA</u> ZIP Code <u>32275</u>			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>LOT 25A, LAKE VILLAGES MOBILE HOME PARK</u>			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>			
A5. Latitude/Longitude: Lat. <u>27° 08.710 N</u> Long. <u>82° 27.608 W</u> Horizontal Datum: <input type="checkbox"/> NAD 1927			
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.			
A7. Building Diagram Number <u>8</u>			
A8. For a building with a crawspace or enclosure(s):		A9. For a building with an attached garage:	
a) Square footage of crawspace or enclosure(s)	<u>1303</u> sq ft	a) Square footage of attached garage	<u>0</u>
b) No. of permanent flood openings in the crawspace or enclosure(s) within 1.0 foot above adjacent grade	<u>5</u>	b) No. of permanent flood openings in the attach within 1.0 foot above adjacent grade	<u>0</u>
c) Total net area of flood openings in A8.b	<u>2100</u> sq in	c) Total net area of flood openings in A9.b	<u>0</u>
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <u>SARASOTA COUNTY 125144</u>		B2. County Name <u>SARASOTA</u>		B3. State <u>FLORIDA</u>	
B4. Map/Panel Number <u>125144 0239</u>	B5. Suffix <u>D</u>	B6. FIRM Index Date <u>9/3/92</u>	B7. FIRM Panel Effective/Revised Date <u>5/1/84</u>	B8. Flood Zone(s) <u>A12</u>	B9. Base Flood Ele AO, use base 1 <u>11 FEET</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction *A new Elevation Certificate will be required when construction of the building is complete.	
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 it below according to the building diagram specified in Item A7. Use the same datum as the BFE. Benchmark Utilized <u>SARASOTA COUNTY BM 101</u> Vertical Datum <u>NGVD 1929</u> Conversion/Comments _____	
Check the measurement used.	
a) Top of bottom floor (including basement, crawspace, or enclosure floor)	<u>12.4</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>N/A</u> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>N/A</u> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>12.5</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG)	<u>8.3</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG)	<u>9.9</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>9.9</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)

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.	
<input checked="" type="checkbox"/> Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Certifier's Name <u>NEWLIN HATTON</u>	License Number <u>PLS # 9109</u>
Title <u>PROFESSIONAL SURVEYOR/MAPPER</u>	Company Name <u>MEL HATTON PLS, INC</u>
Address <u>22183 US HWY 90, PAST CHARLOTTE, FLORIDA, 33952</u>	City <u>CHARLOTTE, FLORIDA</u> State <u>FLORIDA</u> ZIP Code <u>33952</u>
Signature <u>[Signature]</u>	Date <u>11/12/2010</u> Telephone <u>(239) 450-9949</u>

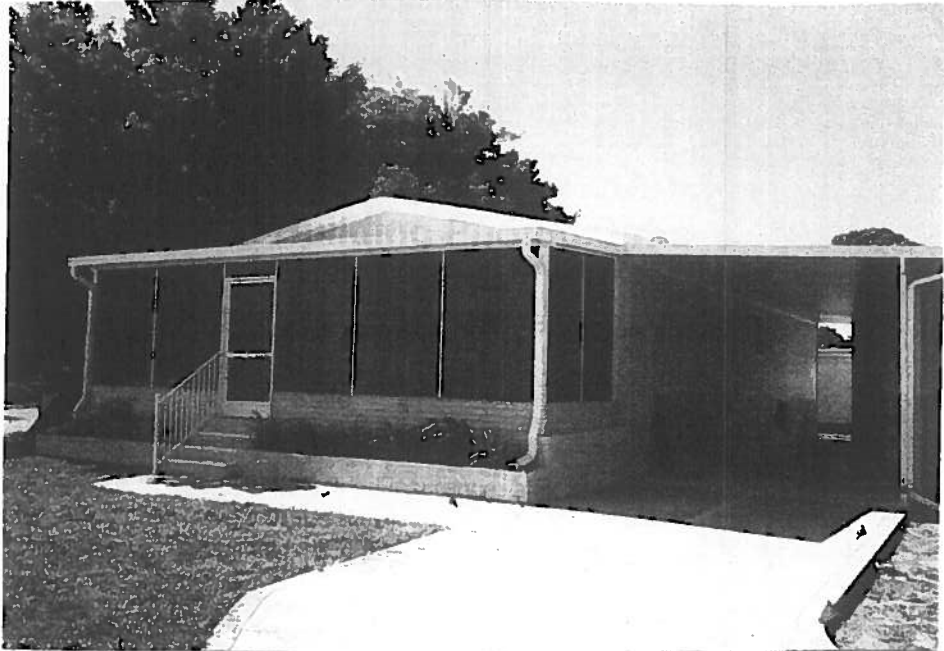
11/12
[Signature]
PLS #

Building Photographs

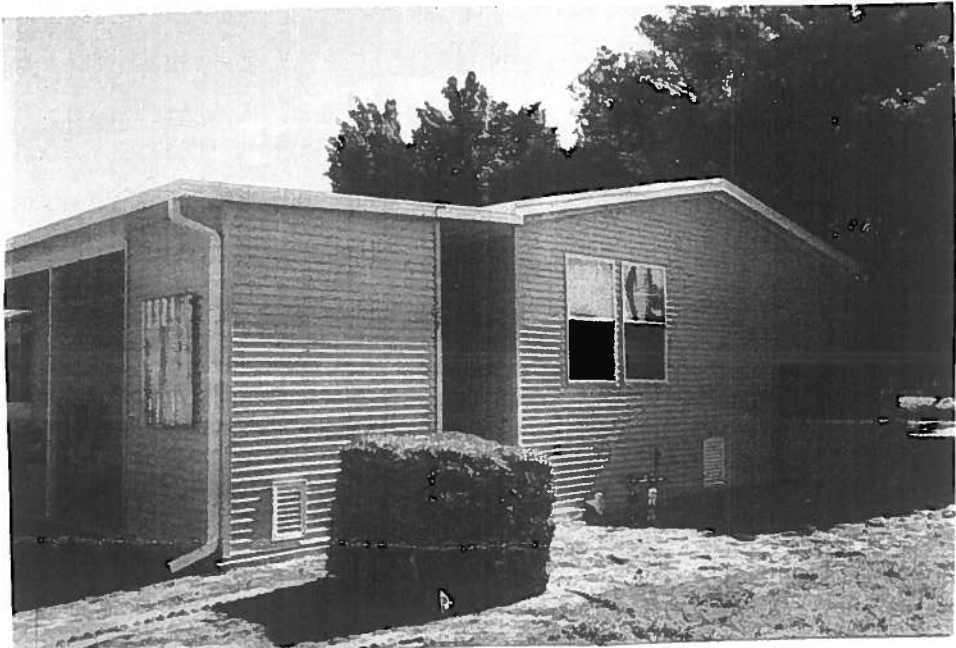
See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			For Insurance Co
# 254 2ND STREET WEST			Policy Number
City	State	ZIP Code	Company NAIC Num
NOKOMIS	FLORIDA	34275	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.



FRONT VIEW



REAR VIEW