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FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:
BUILDING OWNER'S NAME CHRIS TOMINELLI		Policy Number
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 46 SHORELAND DRIVE		Company NAIC Number
CITY OSPREY	STATE FLORIDA	ZIP CODE 34229
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 10, BLOCK "C", TOWNS-END SHORES SUBD.		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL		
LATITUDE/LONGITUDE (OPTIONAL) (##-##-#### or ##.####)		
HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983		SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. FIP COMMUNITY NAME & COMMUNITY NUMBER SALA. CO. FLA. 125144		B2. COUNTY NAME SARASOTA	B3. STATE FLORIDA
B4. MAP AND PANEL NUMBER 125144 0236	B5. SUFFIX D	B6. FIRM INDEX DATE 9/3/92	B7. FIRM PANEL EFFECTIVE/REVISED DATE 5/1/84
B8. FLOOD ZONE(S) A12		B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 11.0'	

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe): _____

B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe): _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date _____

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 7 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. 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 items C3-a-i below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum: ^{NGVD} 12.23 Conversion/Comments: _____

Elevation reference mark used: ^{SALCO} Does the elevation reference mark used appear on the FIRM? Yes No

- a) Top of bottom floor (including basement or enclosure) 9.4 ft(m) GARAGE
- b) Top of next higher floor 20.2 ft(m)
- c) Bottom of lowest horizontal structural member (rafters only) _____ ft(m)
- d) Attached garage (top of slab) 9.4 ft(m)
- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 11.8 ft(m)
- f) Lowest adjacent (finished) grade (LAG) 2.7 ft(m)
- g) Highest adjacent (finished) grade (HAG) 3.9 ft(m)
- h) No. of permanent openings (flood vents) within 1 ft. of above adjacent grade 22
- i) Total area of all permanent openings (flood vents) within 1 ft. of above adjacent grade 216 sq. ft. (sq. cm)

NOTICE BE RECORDED AT THE COUNTY CLERK'S OFFICE OF DEVELOPMENT

OFFICE

License Number, Embossed Seal, Signature, and Date

U.S. 4075 2/07/06

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 in Sections A, B, and C 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.

CERTIFIER'S NAME: THOMAS E. ROBINSON LICENSE NUMBER: U.S. 4075

TITLE: P.S.M. COMPANY NAME: ROBINSON LAND SURVEYING INC.

ADDRESS: 1960 MAIN STREET CITY: SARASOTA STATE: FLORIDA ZIP CODE: 34236

SIGNATURE: DATE: 2/07/06 TELEPHONE: (941) 954-4473

BUF 2002-04694

MR. AND MRS. CHRIS TOMINELLI



Dear John Skidmore,

We are writing in regards to obtaining permission to have our furniture delivered prior to our final inspection and CO. We are trying to have furniture in by Saturday the 4th preferably on the 3rd if this letter gets to you in time.

Our Address is 46 Shoreland Dr. in Osprey and our permit number is BUP2002 04694. You have always been very helpful and accommodating through this build and I would hope this will be alright.

Please call either my self or my wife in either event. We intend to call in for inspection either the 6th or the 7th of February and hope to be enjoying our new home by the weekend. Thanks for all the help.

Sincerely,

Chris and Terra Tominelli

Chris and Terra Tominelli



46 Shoreland Dr.
Osprey, Fla. 34239

Phone: 941-232-4337 Chris

941-650-4231 Terra

E-mail: babycbas@comcast.net

OFFICE COPY
Not To Be Removed
SARASOTA COUNTY CONSTRUCTION
AND PROPERTY STANDARDS DEPT.

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 46 SHORELAND DRIVE		For Insurance Company Use:
CITY OSPREY		Policy Number
STATE FLORIDA	ZIP CODE 34229	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

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

COMMENTS

AC UNIT (REV.) = 11.8'

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) Check here if attachments

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number __ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is __ ft.(m) __ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is __ ft.(m) __ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is __ ft.(m) __ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. For 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 OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPHONE	
COMMENTS			

SECTION G - COMMUNITY INFORMATION (OPTIONAL) Check here if attachments

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.

- G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is:

G9. BFE or (in Zone AO) depth of flooding at the building site is:

___ ft.(m)	Datum: ___
___ ft.(m)	Datum: ___

LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
SIGNATURE	DATE
COMMENTS	

Check here if attachments