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U.S. DEPARTMENT OF HOMELAND SECURITY

ELEVATION CERTIFICATE OMB No. 1660-0008 Expires February 28, 2009 L/C 06-04-25 Federal Emergency Management Agency Important: Read the instructions on pages 1-8. National Flood Insurance Program 5-436760 SECTION A - PROPERTY INFORMATION For Insurance Company Use: A1. Building Owner's Name JOSH PURDY Policy Number Company NAIC Number A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 251 ALLIGATOR DRIVE City VENICE State FL ZIP Code 34293 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOTS 4220 & 4221, SOUTH VENICE UNIT NO. 16 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Latitude/Longitude: Lat. N 27° 3.240 Long. W 82° 24.852 Long. W 82 Horizontal Datum: NAD 1927 XNAD 1983 Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A6. A7. Building Diagram Number 1 A8. For a building with a crawl space or enclosure(s), provide A9. For a building with an attached garage, provide: a) Square footage of crawl space or enclosure(s) a) Square footage of attached garage sq ft N/A sq ft b) No. of permanent flood openings in the crawl space or b) No. of permanent flood openings in the attached garage enclosure(s) walls within 1.0 foot above adjacent grade walls within 1.0 foot above adjacent grade N/A N/A c) Total net area of flood openings in A9.b N/A sq in c) Total net area of flood openings in A8.b N/A sq in SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B3. State **B2.** County Name B1. NFIP Community Name & Community Number SARASOTA **FLORIDA** SARASOTA COUNTY 125144 B9. Base Flood Elevation(s) (Zone B7. FIRM Panel B8. Flood Zone B6. FIRM Index B4. Map/Panel Number B5. Suffix AO, use base flood depth) Date Effective/Revised Date (s) AE E 09-03-92 + 11.00 FEET 125144 0341 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. FIS Profile X FIRM Community Determined Other (Describe) B11. Indicate elevation datum used for BFE in Item B9: X NGVD 1929 **NAVD 1988** Other (Describe) B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? X No **CBRS** OPA **Designation Date** SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) X Finished Construction **Building Under Construction*** Construction Drawings* C1. Building elevations are based on: *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 Items C2.a-g below according to the building diagram specified in Item A7. Benchmark Utilized ELEVATIONS BASED ON: SAR. CO. B.M. NO. 458, PUB. ELEV. = + 13.48' Vertical Datum N.G.V.D. Conversion/Comments Check the measurement used. meters (Puerto Rico only) Top of bottom floor (including basement, crawl space, or enclosure floor)_ 11.9 Top of the next higher floor N/A feet meters (Puerto Rico only) b)

Bottom of the lowest horizontal structural member (V Zones only) N/A feet meters (Puerto Rico only) C) 11.5 Xfeet meters (Puerto Rico only) Attached garage (top of slab) d) Xfeet meters (Puerto Rico only) Lowest elevation of machinery or equipment servicing the building 11.5 (Describe type of equipment in Comments)

meters (Puerto Rico only) f) Lowest adjacent (finished) grade (LAG) 10.9 Xfeet 11.5 Xfeet meters (Puerto Rico only) Highest adjacent (finished) grade (HAG)

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.

Check here if comments are provided on back of form.X

Certifier's Name DANIEL E. LEMONDE

License Number 2909

Title PROFESSIONAL SURVEYOR AND MAPPER

Company Name LEMONDE & CO. SURVEYING LLO

Address 4821 BONITA RD

City VENICE

ZIP Code 34293 State FL

Signature

Date 10-10-2007

Telephone (941) 493-8000

| MPORTANT: In these so | aces, copy the corresponding in | nformation from Section A. | Fo | r Insurance Company Use: |
|---|--|---|--|-------------------------------------|
| Building Street Address (includ | ing Apt., Unit, Suite, and/or Bldg. No.) | or P.O. Route and Box No. | | licy Number |
| 51 ALLIGATOR DRIVE | | | Co | mpany NAIC Number |
| ity VENICE State FL | | | | |
| SE | CTION D - SURVEYOR, ENGINE | ER, OR ARCHITECT CERTIFICA | TION (CONTIN | UED) |
| copy both sides of this Elevation | on Certificate for (1) community officia | II, (2) insurance agent/company, and (3 | building owner. | |
| Comments 1.) HOME BUILT | IN 2007 PER SAR. CO. TAX DEPT. | | | |
| | | | | |
| | | | | |
| | 1 | | | |
| Signature 10-9/1 | 5 | Date 10-10-2007 | | Check here if attachments |
| OFFICIAL F. PUM DING | C EL EVATION INCORMATION (S | SURVEY NOT REQUIRED) FOR 2 | ONE AO AND | |
| | | | | |
| For Zones AO and A (without I | BFE), complete Items E1-E5. If the C | Certificate is intended to support a LON | MA or LOMR-F red | uest, complete Sections A, B, |
| and C. For Items E1-E4, use | natural grade, if available. Check the | measurement used. In Puerto Rico o appropriate boxes to show whether the | elevation is above | e or below the highest adjacent |
| Provide elevation information. grade (HAG) and the low | est adjacent grade (LAG). | | | |
| a) Top of bottom floor (in | cluding basement, crawl space, or en | | eters above or b | |
| b) Top of bottom floor (in | cluding basement, crawl space, or en | vided in Section A Items 8 and/or 9 (se | eters above or been age 8 of Instru | actions), the next higher floor |
| E2. For Building Diagrams 6- (elevation C2 b in the dia | agrams) of the building is | feet meters above or below | the HAG. | ioliono), ale nem inglie |
| F3 Attached garage (top of s | slab) is . feet met | ters above or below the HAG. | | |
| E4. Top of platform of machi | nery and/or equipment servicing the b | ouilding is feet meter | s above or belo | w the HAG. |
| E5. Zone AO only: If no floo | d depth number is available, is the top | o of the bottom floor elevated in accord | dance with the cor | nmunity's noodplain managemen |
| ordinance? Yes N | o Unknown. The local official must | certify this information in Section 6. | | |
| SE | CTION F - PROPERTY OWNER | (OR OWNER'S REPRESENTATI | VE) CERTIFICA | ATION |
| The property owner or owner's | authorized representative who compl | letes Sections A, B, and E for Zone A | (without a FEMA- | |
| or Zone AO must sign here. T | he statements in Sections A, B, and I | E are correct to the best of my knowled | dge. | |
| | Authorized Representative's Name | | | |
| DANIEL E. LEMONDE Address 4821-BONITA RD | | City VENICE | State FL | ZIP Code 34293 |
| Address 4827 Don't A RD | 1 | | | |
| Signature / / / / | | Date 10-10-2007 | Telephone (| 941) 493-8000 |
| Comments | 0 | | | |
| | | | | |
| | | | | Check here if attachmen |
| | SECTION G - COM | IMUNITY INFORMATION (OPTIO | NAL) | complete Sections A. B. C. (or F.) |
| he local official who is authorized Confidence | ed by law or ordinance to administer | the community's floodplain management and sign below. Check the measurement | ent used in Items | G8. and G9. |
| | ation Course taken from other decume | entation that has been signed and seal | ed by a licensed s | surveyor, engineer, or architect wh |
| is authorized by law to | o certify elevation information. (Indica | ate the source and date of the elevation | n data in the Com | ments area below.) |
| 2. A community official of | completed Section E for a building loc | ated in Zone A (without a FEMA-issue | ed or community-is | ssued BFE) or Zone AO. |
| The following informa | tion (Items G4G9.) is provided for co | ommunity floodplain management purp | ooses. | |
| G4. Permit Number | G5. Date Permit Issued | G6. Date Certif | ficate Of Complian | nce/Occupancy Issued |
| | d for: New Construction | Substantial Improvement | | |
| 7. This permit has been issue | | | R) Datum | |
| | floor (including basement) of the building site: | feet meters (PF | A CONTRACTOR OF THE PARTY OF TH | |
| 9. BFE or (in Zone AO) depth | of flooding at the building site: | | ., | |
| Local Official's Name | | Title | | |
| | | Telephone | | |
| Community Name | | Date | | |
| Community Name Signature | | Date | | |
| F8800CFWF0000A (850000A | | Date | | |
| Signature | | Date | | |
| | | Date | | Check here if attachme |

Building Photographs See Instructions for Item A6.

For Insurance Company Use:

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 251 ALLIGATOR DRIVE

Policy Number

City VENICE

State FL

ZIP Code 34293

Company NAIC Number

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, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.



FRONT VIEW 10-9-2007



10-9-2007 **REAR VIEW**