OMB No. 1660-0008 FI EVATION CERTIFICATE U.S. DEPARTMENT OF HOMELAND SECURITY Expires February 28, 2009 Federal Emergency Management Agency Important: Read the instructions on pages 1-8.5-4375 National Flood Insurance Program SECTION A - PROPERTY INFORMATION For Insurance Company Use: Policy Number Building Owner's Name JOEL A & TACY L. STREINZ Company NAIC Number A2. Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. 416 ANCHORAGE DRIVE ZIP Code State CITY 34275 **Nokomis** FL A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 1, Enchanted Island Sub., P.B. 18, Pg. 31, P.I.D.#0173-07-0024 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Let. 27°06'45.9" Long. 82°27'20.6" Horizontal Datum: NAD 1927 NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 7 A9. For a building with an attached garage, provide: A8. For a building with a crawl space or enclosure(s), provide: a) Square footage of crawl space or enclosure(s) 2527 a) Square footage of attached garage_ If pe b) No. of permanent flood openings in the attached garage b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade 42 walls within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b 5376 sq In c) Total net area of flood openings in A9.b sa in SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B2.** County Name B1. NFIP Community Name & Community Number **B3. State** SARASOTA FL **NOKOMIS, 125144** B8. Flood B9. Base Flood Elevation(s) (Zone B4. Map/Panel Number 85 Suffix B6. FIRM Index **B7. FIRM Panel** AO, use base flood depth) Effective/Revised Date Zone(9) Date 125144-0327 E 9/3/1992 7/31/1970 / 9/3/1992 AF 12 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. ☑ FIRM Community Determined Other (Describe) B11. Indicate elevation datum used for BFE in Item B9: ☑ NGVD 1829 ☐ NAVD 1988 Other (Describe) ☐ No is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? CBRS OPA Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) Finished Construction C1. Building elevations are based on: Construction Drawings* Building Under 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 Items C2.e-g below according to the building diagram specified in Item A7. Benchmark Utilized #405C PUBLISHED ELEV 10.40' Vertical Datum N.G.V.D 1929 Check the measurement used. Conversion/Comments a) Top of bottom floor (including basement, crawl space, or enclosure floor) maters (Puerto Rico only) feet 7.2 X b) Top of the next higher floor feet meters (Puerto Rico only) 17.5 c) Bottom of the lowest norizontal structural member (V Zones only) feet meters (Puerto Rico only) HA d) Attached garage (top of slab) meters (Puerto Rico only) Ø 7.2 faat meters (Puerto Rico only) e) Lowest elevation of machinery or equipment servicing the building 12.0 X feet (Describe type of equipment in Comments) meters (Puerto Rico only) f) Lowest adjacent (finished) grade (LAG) feet 5.1 X g) Highest edlacent (finished) grade (HAG) meters (Puerto Rico only) 6.4 feet 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. Y Check here if comments are provided on back of form.

License Number Certifler's Name bn F. Eckert #6085 Company Name ROJECT SURVEYOR GEORGE F. YOUNG, INC ZIP Code State Address City 1899 PORTER I SARASOTA 34240 Signature Date Telephone 06/19/07 941,378.8440



2-4	*			
PORTANT: In these spaces, or	opy the corresponding Information	n from Section A.		For Insurance Company Use:
Building Street Address (Including Apt.,	Unit, Suite, and/or Bidg. No.) or P.O. Ro	ute and Box No.		Policy Number
Ity	State	34275	ZIP Code	Company NAIC Number
OKOMIS	D - SURVEYOR, ENGINEER, OR A		1	NTINUED)
	cate for (1) community official, (2) Insurar		100	
	cate for (1) community official, (2) lifetial	ico agoniccompany; =	114 (0) 001101113 -11	
Comments C2 a). The Enclosed area is garage spe	100.			
22 a). Elevation is for the elevated woo	d air conditioner compressor platforms.			
The contract of		Date 06/19/07		
Signature John / Este		vi teo fote vicine conferenciale		Check here if attachmen
SECTION E - BUILDING ELEV	ATION INFORMATION (SURVEY N	NOT REQUIRED) F	OR ZONE AO	AND ZONE A (WITHOUT BFE)
end C. For items E1-E4, use natural § E1. Provide elevation information for grade (HAG) and the lowest adjace a) Top of bottom floor (including to b) Top of platform of machinery and E5. Zone AO only: If no flood depth rordinance?	basement, crawl space, or enclosure) is passement, crawl space, or enclosure) is passement flood openings provided in Second fithe building is feet make the feet make the fitted in the second floor equipment servicing the building is number is available, is the top of the bottom Unknown. The local official must called the fitted in the fit	feet om floor elevated in acertify this importation in particular and in acertify the information in	meters meters meters meters see page 8 of below the H meters a accordance with the	above or below the highest adjacent above or below the HAG. above or below the LAG. instructions), the next higher floor AG. IAG. above or below the HAG. a community's floodplain management
	F - PROPERTY OWNER (OR OWN red representative who completes Section			
perty Owner's or Owner's Authorize		tity	State	ZIP Code
Bignature	D	ate	Teleph	ohe
Comments				
				Check here if attachm
	CONTRACTOR OF THE PARTY IN THE	NEODWATION /OF	TIONAL	Chax hala ii auguni
a local afficial who is suth advant by in-	SECTION G - COMMUNITY I	NY foodplain manage	ement ordinance	can complete Sections A. B. C (or E)
id G of this Elevation Certificate. Com	plets the applicable item(s) and sign belo	w. Check the measur	at al beau fnemer	eme G8, and G9.
1. The information in Section C w	was taken from other documentation that elevation information. (Indicate the source	has been signed and : and date of the elev	sealed by a licent	sed surveyor, engineer, or archited w Comments ares below.)
2. A community official complete	d Section E for a building located in Zone	A (without a FEMA-is	nummos to beusa	ity-issued BFE) or Zone AO.
3. The following information (Item	ns G4G9.) is provided for community flo	odpialn management	purposes.	
G4. Permit Number	G5. Date Permit Issued	G6. Date 0	Certificate Of Con	npllence/Occupancy Issued
7. This permit has been issued for.	New Construction Substantial I	Improvement		
8. Elevation of as-built lowest floor (inc			feet _ meters	(PR) Datum
9. BFE or (in Zone AO) depth of flooding	ng at the building elte:		feet meter	s (PR) Datum
Local Official's Name		Title		
Community Name		Telephone		
Signature		Date		
5				The second secon
mments	1			900

Building Photographs

See Instructions for Item A8.

Building Street Address (including Apt., Unit, Sulte, and/or Bldg. No.) or P.O. Route and Box No.

416 ANCHORAGE DRIVE

City

State

ZIP Code

NOKOMIS

FL

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



