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 INSURANCE COMPANY				ANCE COMPANY USE	
A1. Building Owner's Name Policy Number:				oer:	
	Randall R. Reinke Under Construction Fema FN 05060606				
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number:				AIC Number:	
653 Avenida De Mayo	이 보고 마음에 가게 되었다. 그는				
City		State		ZIP Code	
Sarasota Florida 34242					
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 11 & E 30 Ft Lot 10, Block 10, Sarasota Beach PB 1 PG'S 76-81					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential					
A5. Latitude/Longitude: Lat.	27°16'34.50"N Lo	ong. 82°33'26.39"W	/ Horizontal	Datum: NAD 1	927 × NAD 1983
A6. Attach at least 2 photogra	phs of the building if the C	Certificate is being	used to obtain flood	l insurance.	
A7. Building Diagram Number	6				
A8. For a building with a craw	space or enclosure(s):				
 a) Square footage of crav 	vispace or enclosure(s)		500.00 sq ft		
b) Number of permanent t	lood openings in the crawl	Ispace or enclosur	e(s) within 1.0 foot	above adjacent gra	de 5
c) Total net area of flood	ppenings in A8.b	640.00 sq ir	1		
d) Engineered flood open	ings? Tyes X No				
A9. For a building with an attac					
		666.00 sa f			
a) Square footage of attac					
b) Number of permanent t				acent grade 4	
c) Total net area of flood of	ppenings in A9.b	512.00 so	in		
d) Engineered flood openings? ☐ Yes ☒ No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number B2. County Name B3. State				B3. State	
Sarasota County #125144			Sarasota		Florida
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	37. FIRM Panel Effective/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
12115C 0143 F	11-04-2016 1	Revised Date 1-04-2016	AE	9	
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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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. City State ZIP Code Sarasota SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: Construction Drawings* X Building Under Construction* Finished Construction				
Sarasota Florida 34242 SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	Policy Number:			
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.	n			
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–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: SARASOTA COUNTY BM #81 Vertical Datum: NAVD 1988 CONVERTED				
Indicate elevation datum used for the elevations in items a) through h) below.				
☐ NGVD 1929 区 NAVD 1988 ☐ Other/Source:	_			
Check the measurement used	ı.			
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)				
b) Top of the next higher floor				
c) Bottom of the lowest horizontal structural member (V Zones only)N/A ⊠ feet ☐ meters				
d) Attached garage (top of slab)5.0 × feet				
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) N/A feet meters				
f) Lowest adjacent (finished) grade next to building (LAG) 4.6 X feet meters				
g) Highest adjacent (finished) grade next to building (HAG) 4.8 X feet meters				
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support N/A ⋈ 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 informatio 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.	n.			
Were latitude and longitude in Section A provided by a licensed land surveyor? ☐ Yes ☐ No ☐ Check here if attachments				
Certifier's Name License Number Kenneth R. Palmer PSM 4661				
Kenneth R. Palmer PSM 4661				
	-			
Kenneth R. Palmer PSM 4661 Title Project Manager Company Name	111111			
Kenneth R. Palmer PSM 4661 Title Project Manager Company Name Red Stake Surveyors, Inc.	111111111			
Kenneth R. Palmer PSM 4661 Title Project Manager Company Name	THERMAN			
Kenneth R. Palmer PSM 4661 Title Project Manager Company Name Red Stake Surveyors, Inc. Address	MALITHUM,			
Kenneth R. Palmer PSM 4661 Title Project Manager Company Name Red Stake Surveyors, Inc. Address 6389 Tower Lane, Level II City State ZIP Code	MARTINIA			
Kenneth R. Palmer Title Project Manager Company Name Red Stake Surveyors, Inc. Address 6389 Tower Lane, Level II City Sarasota Signature Date PSM 4661 Itle Project Manager Date PSM 4661 Itle Project Manager Date PSM 4661 Itle Project Manager Date PSM 4661 Itle Project Manager Date Date PSM 4661 Itle Project Manager Date Date PSM 4661 Itle Project Manager Date Date	ner.			
Kenneth R. Palmer PSM 4661 Title Project Manager Company Name Red Stake Surveyors, Inc. Address 6389 Tower Lane, Level II City Sarasota Signature Date 1 27 21 Telephone (941) 923-9997 Ext.	ner.			
Kenneth R. Palmer Title Project Manager Company Name Red Stake Surveyors, Inc. Address 6389 Tower Lane, Level II City Sarasota Signature Date 1 27 2	ner.			

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/o 653 Avenida De Mayo	or Bldg. No.) or P.O. Rou	te and Box No.	Policy Number:		
	ate ZIP orida 3424	Code 12	Company NAIC Number		
SECTION E – BUILDING ELE FOR ZONE	VATION INFORMATIO AO AND ZONE A (WIT		REQUIRED)		
For Zones AO and A (without BFE), complete Items E1–complete Sections A, B,and C. For Items E1–E4, use nate enter meters.	tural grade, if available. (Check the measure	ment used. In Puerto Rico only,		
 E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawlspace, or enclosure) is 					
b) Top of bottom floor (including basement, crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is		feet meter			
E2. For Building Diagrams 6–9 with permanent flood operation the next higher floor (elevation C2.b in the diagrams) of the building is	enings provided in Section	n A Items 8 and/or			
E3. Attached garage (top of slab) is		☐ feet ☐ meter	s above or below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is		☐ feet ☐ meter			
E5. 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 OWN	ER (OR OWNER'S REP	RESENTATIVE) CE	RTIFICATION		
The property owner or owner's authorized representative who completes Sections A, B, 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, and E are correct to the best of my knowledge.					
Property Owner or Owner's Authorized Representative's	Name				
Address	City	Sta	ate ZIP Code		
Signature	Date	Te	lephone		
Comments					
			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 653 Avenida De Mayo	Suite, and/or Bldg. No.) or P.O	. Route and Box No.	Policy Number:
City Sarasota	State Florida	ZIP Code 34242	Company NAIC Number
SECTION	ON G - COMMUNITY INFOR	MATION (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.			
G1. 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 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-	-G10) is provided for commu	nity floodplain managem	ent purposes.
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	New Construction Subs	stantial Improvement	
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 buildir g site:	feet	meters Datum
G10. Community's design flood elevation:			meters Datum
Local Official's Name	Title		
Community Name	Tele	ephone	
Signature	Date	е	
Comments (including type of equipment and lo	cation, per C2(e), if applicable	9)	
	*		
			Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 653 Avenida De Mayo			. Policy Number:
City	State	ZIP Code	Company NAIC Number
Sarasota	Florida	34242	

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 FRONT PHOTO TAKEN ON JANUARY 20, 2021

Clear Photo One



Photo Two

Photo Two Caption REAR PHOTO TAKEN ON JANUARY 20, 2021

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 653 Avenida De Mayo			Policy Number:
City Sarasota	State Florida	ZIP Code 34242	Company NAIC Number

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 Caption ADDITIONAL REAR PHOTO TAKEN ON JANUARY 20, 2021

Clear Photo Three



Photo Four

Photo Four Caption VENT PHOTO TAKEN ON JANUARY 20, 2021

Clear Photo Four Form Page 6 of 6