07-713890

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency
National Flood Insurance Program
Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION	For Insurance Company Use:				
A1. Building Owner's Name Michael Nicholson	Policy Number				
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5262 Avenida Del Mare	Company NAIC Number				
City State Sarasota FL	ZIP Code				
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 8 BLock 30 Sarasota Beach					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential					
	atum: NAD 1927 X 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					
A8. For a building with a crawl space or enclosure(s), provide: a) Square footage of crawl space or enclosure(s) b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b A9. For a building with an attached garage, provide: a) Square footage of attached garage of attached garage walls within 1.0 foot above adjacent grade b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade c) Total net area of flood openings in A9.b					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	V				
B1. NFIP Community Name & Community Number Sarasota County 125144 B2. County Name Sarasota	B3. State FL				
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date Date 09/03/92 B7. FIRM Panel Effective/Revised Date 09/03/92 B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 10				
B11. Indicate elevation datum used for BFE in item 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)? Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIR 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.	☐ Yes ☒ No ED) Finished Construction				
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/AI below according to the building diagram specified in Item A7. Benchmark Utilized <u>C.C.C.L. MONUMENT A-28</u> Vertical Datum NGVD 1929	H, AR/AO. Complete Items C2.a-g				
Conversion/Comments Check the measurer	nent used.				
b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building A/C / A feet met (Describe type of equipment in Comments) f) Lowest adjacent (finished) grade (LAG)	ers (Puerto Rico only)				
g) Highest adjacent (finished) grade (HAG)	ers (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 elevati 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.	- Rolling 2008				
Certifier's Name ROBERT G. BRUCE License Number 4519	1 010 1 2000				
Title Company Name OWNER RED STAKE SURVEYORS, INC.	Will of				
Address City State ZIP Code 7123 PROCTOR RD. SARASOTA FL 34241	Dall 2 /2				
Signature Date Date Telephone (941) 923 - 9997	45 001				

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IMPORTANT: In these spaces,	For Insurance Company Use:				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5262 Avenida Del Mare		Policy Number			
City Sarasota	State ZIP FL	Code 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 Section B Flood insurance rate map (FIRM	f) information to be verified at local F.E.M.A. control office File # 04111053				
* FLOW T	ARU VENTS ARE COVERED WITH	4" SMART VENTS			
Signature Polet Signature	Date 02/20/2008	Check here if attachments			
SECTION E - BUILDING ELE	EVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZO				
 and C. For Items E1-E4, use natural E1. Provide elevation information for grade (HAG) and the lowest adjusted a) Top of bottom floor (including b) Top of bottom floor (including b) Top of bottom floor (including E2. For Building Diagrams 6-8 with (elevation C2.b in the diagrams E3. Attached garage (top of slab) is E4. Top of platform of machinery ar E5. Zone AO only: If no flood depth 	basement, crawl space, or enclosure) is feet m basement, crawl space, or enclosure) is feet m permanent flood openings provided in Section A Items 8 and/or 9 (see) of the building is feet meters above or below the HAC	enter meters. evation is above or below the highest adjacent eters above or below the HAG. eters above or below the LAG. page 8 of Instructions), the next higher floor below the HAG. 3. eters above or below the HAG. ce with the community's floodplain management			
SECTION	N F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE	- CERTIFICATION			
	ized representative who completes Sections A, B, and E for Zone A (with				
or Zone AO must sign here. The state	ements in Sections A, B, and E are correct to the best of my knowledge.	Blode a F Elwin-issued of Continuinty-issued BFE)			
Property Owner's or Owner's Authoriz	red Representative's Name				
Iress	City	State ZIP Code			
Signature	Date	Telephone			
Comments					
		Полити			
	SECTION G - COMMUNITY INFORMATION (OPTIONA	Check here if attachments			
and G of this Elevation Certificate. Con G1. The information in Section C is authorized by law to certify G2. A community official complete	aw or ordinance to administer the community's floodplain management of inplete the applicable item(s) and sign below. Check the measurement is was taken from other documentation that has been signed and sealed be elevation information. (Indicate the source and date of the elevation date and Section E for a building located in Zone A (without a FEMA-issued or ms G4G9.) is provided for community floodplain management purpose	used in Items G8, and G9. by a licensed surveyor, engineer, or architect who ta in the Comments area below.) community-issued BFE) or Zone AO.			
G4. Permit Number		te Of Compliance/Occupancy Issued			
G8. Elevation of as-built lowest floor (in G9. BFE or (in Zone AO) depth of flood	ing at the building site:	meters (PR) Datum			
Local Official's Name	Title				
Community Name	Telephone				
Signature	Date				
Comments					
		Check here if attachments			

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. 5262 Avenida Del Mare			For Insurance Company Use: Policy Number
City Sarasota	State FL	ZIP Code	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.



Rear View 2/19/2008

Front View 2-19-2008

