

L/C 06-02-04

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

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

ELEVATION CERTIFICATE

1966

Important: Read the instructions on pages 1-7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:
BUILDING OWNER'S NAME GEORGE D. RANKIN III & VIRGINIA T. RANKIN		Policy Number
BUILDING STREET ADDRESS (including Apt. Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. # 211 BAKKA VISTA DR.		Company NAIC Number
CITY ENGLEWOOD	STATE FL.	ZIP CODE 34223
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 10A, Blk. A, & Lots 1 & 2, Blk. C, Brucewood Bayh / TAX PARCEL		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) # 0511 A2-0007		
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. FIRM COMMUNITY NAME & COMMUNITY NUMBER SARASOTA COUNTY 125144	B2. COUNTY NAME SARASOTA	B3. STATE FLORIDA
B4. MAP AND PANEL NUMBER 125144 0453	B5. SUFFIX "E"	B6. FIRM INDEX DATE 9/3/92
B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S) "AE"	B9. BASE FLOOD ELEVATION(S) (Zone AE, use depth of flooding) + 13.00 FEET

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 Existing Under Construction Field Measurements

... *A new Elevation Certificate will be required when construction of the building is complete.

C2. 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.)

C3. Elevations - Zones AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR1A, AR1AE, AR1A1-A30, AR1AH, AR1AD

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 Conversion/Comments: **SEE COMMENTS**

Elevation reference mark used: Does the elevation reference mark used appear on the FIRM? Yes No

- a) Top of bottom floor (including basement or enclosure) **6.21**
- b) Top of next higher floor **N/A**
- c) Bottom of lowest horizontal structural member (V zones only) **N/A**
- d) Attached garage (top of slab) **5.8**
- e) Lowest elevation of machinery and/or equipment **5.01**
- f) Lowest adjacent (finished) grade (LAG) **5.31 ±**
- g) Highest adjacent (finished) grade (HAG) **5.81 ±**
- h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade **N/A**
- i) Total area of all permanent openings (flood vents) in C3.h **N/A** **SQ. FT. ±**

License Number, Embossed Seal, Signature, and Date

STATE OF FLORIDA
P.S.M. #2909
DL [Signature]
DATE SIGNED: 2/13/06

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 DANIEL E. LEMONDE	LICENSE NUMBER # 2909
TITLE PROFESSIONAL SURVEYOR & MAPPER	COMPANY NAME LEMONDE & CO. SURVEYORS LLC
ADDRESS 4821 BONITA ROAD	CITY VENICE
SIGNATURE [Signature]	STATE FL.
	ZIP CODE 34293
	DATE 2/13/06
	TELEPHONE (941) 493-8000

IN THESE SPACES, copy the corresponding information from Section A.

BUILDING STREET ADDRESS (including Apt, Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 1.) # 211 BAHIA VISTA Dr.			For Insurance Company Use: Policy Number
CITY Englewood	STATE FL.	ZIP CODE 34263	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

1.) HOME BUILT IN: 1966 PER SUR. CO. TAX DEPT.

2.) ELEV. BASED ON: F.D.O.T. B.M. # 17-B-A-04
PUB. ELEV. = + 10.890 FEET.

Check here if attachments

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

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 I CRR-F

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. ___ in. 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. ___ in. 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. ___ in. 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 OR OWNER'S AUTHORIZED REPRESENTATIVE SIGNATURE

ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPHONE	
COMMENTS			

Check here if attachments

SECTION G - COMMUNITY INFORMATION (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.

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: ___ ft. ___ in. Datum: _____

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

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

Check here if attachments