

05-412823

L/C 93-08-31 FINAL

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

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

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

SECTION A - PROPERTY OWNER INFORMATION

For Insurance Company Use:
 Policy Number _____
 Company NAIC Number _____

BUILDING OWNER'S NAME
PETER R. & CONSTANCE DUMAS

BUILDING STREET ADDRESS (Including Apt, Unit, Suite, and/or Bldg No.) OR P.O. ROUTE AND BOX NO.
1013 BAYSHORE ROAD

CITY STATE ZIP CODE
NOKOMIS FL. 34275

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
A PART OF SECTION 35-38-1B / TAX PARCEL # 016B-01-0006

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)
RESIDENTIAL

LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): USGS Quad Map Other: _____
 (# - ## - ###### or ##.#####)

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME B3. STATE
SARASOTA COUNTY 125144 SARASOTA FLORIDA

| | | | | | |
|--|------------------------|--------------------------------------|--|------------------------------------|--|
| B4. MAP AND PANEL NUMBER 125144 0239 | B5. SUFFIX D | B6. FIRM INDEX DATE 5-1-84 | B7. FIRM PANEL EFFECTIVE/REVISED DATE 9-3-92 | B8. FLOOD ZONE(S) "A-12" | B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) +11.00 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 Building Under Construction Finished Construction
 *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 A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, ARIA, ARI/AE, ARIA1-A30, ARIA/H, ARIA/O
 Complete Items C3-a-h 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) **12.9 ft**
- b) Top of next higher floor **N/A ft**
- c) Bottom of lowest horizontal structural member (V zones only) **FM ft**
- d) Attached garage (top of slab) **11.3 ft**
- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) **12.9 ft**
- f) Lowest adjacent (finished) grade (LAG) **7.0 ft ±**
- g) Highest adjacent (finished) grade (HAG) **11.0 ft ±**
- 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. IN. ±**

State of Florida
 P.S.M. #2909

 DATE SIGNED: 11/28/06

License Number, Embossed Seal, Signature, and Date

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 LICENSE NUMBER
DAVID E. LEMONDE # 2909

TITLE COMPANY NAME
PROFESSIONAL SURVEYOR & MAPPER LEMONDE & G. SURVEYORS LLC

ADDRESS CITY STATE ZIP CODE
4821 Bonita Road VENICE FL. 34293

SIGNATURE DATE TELEPHONE
[Signature] 11/28/06 (941) 493-8000