FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

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

ELEVATION CERTIFICATE

		Important:	. Read the mod	ucuons on pages 1				
		SECTION	A - PROPERT	YOWNER INFORMA	TION		For Insurance Company Use:	
BUILDING OWNER'S NAME MICHAEL A. BASNIGHT							Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 461 BAYSHORE ROAD							Company NAIC Number	
CITY NOKOMIS				STATE ZIP CO FL 34275				
PROPERTY DESCRIPTION APN# 0169-01-0024, MET	TES & BOUNDS							
BUILDING USE (e.g., Res RESIDENTIAL	idential, Non-reside	ential, Addition, Ac	ccessory, etc. Us	e a Comments area, if r	necessary.)		All Town	
LATITUDE/LONGITUDE ((##° - ##' - ##.##" or ##.			1927 NAD		OURCE: GPS	S (Type):_ SS Quad I	Map Other:	
	SE	ECTION B - FLOO	OD INSURANC	E RATE MAP (FIRM) I	NFORMATION			
B1. NFIP COMMUNITY NAME 8 SARASOTA-125144	& COMMUNITY NUME	BER	B2. COUNTY N SARASOTA		Harrison of	B3. ST FLO		
B4. MAP AND PANEL NUMBER 125144-0239	B5. SUFFIX D	B6. FIRM INDEX D/ 09/03/92	ATE EFFE	B7. FIRM PANEL CTIVE/REVISED DATE 05/01/84	B8. FLOOD ZON A12		B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 111/12'	
10. Indicate the source of the FIS Profile 1 11. Indicate the elevation date 112. Is the building located in a	FIRM turn used for the BFE	☐ Community E in B9: ☐ NGVD 1	Determined 1929	Other (Desc	Other (Descri		signation Date	
	SEC	TION C - BUILDI	NG ELEVATION	NINFORMATION (SUF	RVEY REQUIRED	0)		
							The state of the s	
Building elevations are bas	sed on: Constru	ction Drawings*	☐ Building U	nder Construction*	Finished Constru	ction		
 Building elevations are bath A new Elevation Certification 					Finished Constru	iction		
*A new Elevation Certifica	ate will be required w	when construction of	the building is con	nplete.	a designation of		6 and 7. If no diagram	
*A new Elevation Certifica 22. Building Diagram Number	ate will be required w r_7_(Select the build	when construction of ling diagram most sin	the building is con milar to the buildin	nplete.	a designation of		6 and 7. If no diagram	
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BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.	IMPORTANT: In these spaces, copy the corresponding information from Section A.				
461 BAYSHORE ROAD		(3)	Policy Number		
CITY NOKOMIS STATE FL		ZIP CODE 34275	Company NAIC Number		
SECTION D - SURVEYOR, ENGINEER, OR ARCHITE	CT CERTIFIC		(D)		
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company	y, and (3) building	g owner.	THE MAN A LINE OF		
COMMENTS PROJECT NUMBER 00-08-55 THERE ARE 25 FLOWTHROUGHS THAT ARE 16 1/ BOTTOM ELEVATION OF THE FLOWTHROUGHS ARE 6.485 FT.	/2" x 8 1/2" TH/	AT EQUAL 3,506.25	SQUARE INCHES AND THE		
			Check here if attachments		
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REC	QUIRED) FOR	ZONE AO AND ZO	NE A (WITHOUT BFE)		
or Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is	s intended for us	e as supporting informa	ation for a LOMA or LOMR-F,		
ection C must be completed. 1. Building Diagram Number _(Select the building diagram most similar to the building for which thi represents the building, provide a sketch or photograph.) 2. The top of the bottom floor (including basement or enclosure) of the building isft.(m)in.(cr					
natural grade, if available).	, 🗀 aboto a		y are righted adjuster, ground, (600		
 For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (ele grade. Complete items C3.h and C3.i on front of form. The top of the platform of machinery and/or equipment servicing the building isft.(m)in.(c) natural grade, if available). For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in 	m) 🔲 above or	below (check one	e) the highest adjacent grade. (Use		
Yes No Unknown. The local official must certify this information in Section G.	9		Carried State (19)		
SECTION F - PROPERTY OWNER (OR OWNER'S R					
The property owner or owner's authorized representative who completes Sections A, B, C (Items C issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to	C3.h and C3.i ont	ly), and E for Zone A (w	vithout a FEMA-issued or community-		
PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME	ule best of fly k	diowieuge.			
		and the same of the			
ADDRESS CITY	1	STA	TE ZIP CODE		
SIGNATURE DATI	E	TEL	EPHONE		
COMMENTS					
	12 110		☐ Check here if attachment		
SECTION G - COMMUNITY INFORM	IATION (OPTK	ONAL)	Crick flore ii diddinioni		
The local official who is authorized by law or ordinance to administer the community's floodplain markertificate. Complate the applicable item(s) and sign below. 51. The information in Section C was taken from other documentation that has been signed and or local law to certify elevation information. (Indicate the source and date of the elevation displayed. A community official completed Section E for a building located in Zone A (without a FEMA- 53. The following information (Items G4-G9) is provided for community floodplain management	nagement ordina d embossed by a lata in the Comm issued or comm	ance can complete Sec a licensed surveyor, en nents area below.)	gineer, or architect who is authorized b		
G4. PERMIT NUMBER G5. DATE PERMIT ISSUED	G6. DAT	TE CERTIFICATE OF CO	MPLIANCE/OCCUPANCY ISSUED		
G7. This permit has been issued for: New Construction Substantial Improvement G8. Elevation of as-built lowest floor (including basement) of the building is: G9. BFE or (in Zone AO) depth of flooding at the building site is:		ft_(m)	Datum: Datum:		
LOCAL OFFICIAL'S NAME	TITLE				
COMMUNITY NAME	TELEPHONE	E			
SIGNATURE	DATE				
COMMENTS					
Vi			Check here if attachmer		