# BP2001-

CITY

## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

#### **ELEVATION CERTIFICATE**

Florida

Impo	rtant: Read th	e instruction	ons on	pages '	1 -7.
	A - PROPER				

BUILDING OWNER'S NAME James R. Lane

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

616 Blackburn Boulevard

North Port

STATE

ZIP CODE

34287

O.M.B. NO. 3065-0077 Expires July 31, 2002

For Insurance Company Use:

Company NAIC Number

Policy Number

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

# Lot 580, Harbor Cove Mobile Home Park, Sarasota County, Florida

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.

#### Residential (Mobile Home)

LATITUDE/LONGITUDE (OPTIONAL) 

HORIZONTAL DATUM: ☐ NAD 1983

SOURCE: GPS (Type):

☐ USGS Quad Map ☐ Other:

# SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1.NFIP COMMUNITY NAME & COMMUNITY NUMBER Sarasota County 125144		B2. COUNTY NAME Sarasota		B3. STATE FL	
B4. MAP AND PANEL NUMBER	B5. SUFFIX	B6. FIRM INDEX DATE	B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)
125144-0375	D	09-03-92	05-01-84	A 8	8 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 Resource System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ■ No

Designation Date:

C2.

### 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.

Building Diagram Number 5 (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, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO

Complete Items C3a-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.

8.5

6.0

Datum NGVD-29 Conversion/Comments

Elevation reference mark used Havoline 2 Does the elevation reference mark used appear on the FIRM? ■ Yes □ No

□ a) Top of bottom floor (including basement or enclosure) ☐ b) Top of next higher floor

9.3 N/A

☐ c) Bottom of lowest horizontal structural member (V zones only) N/A N/A

□ d) Attached garage (top of slab) □ e) Lowest elevation of machinery and/or equipment servicing the building.

☐ f) Lowest adjacent grade (LAG) g) Highest adjacent grade (HAG)

☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade

□ i) Total area of all permanent openings (flood vents) in C3h

6.4 ft. 6 1728 sa. in.

ft.

ft.

ff

ft.

r, Embossed and Date Number, Signature, License ! Seal, Sig

## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect 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

Alan K. Fish

LICENSE NUMBER

3941

TITLE Professional Surveyor and Mapper

COMPANY NAME

Van Buskirk/Fish & Associates, Inc.

ZIP CODE 34287

12450 Tamiami Trail, Unit D SIGNATURE

North Port 2-10-01

STATE Florida TELEPHONE

(941) 426-0681

FEMA Form 81-31, AUG 99

SEE REVERSE SIDE FOR CONTINUATION

REPLACES ALL PREVIOUS EDITIONS

MPOR	TANT: In these spaces, copy the	corresponding information from S	ection A.	For Ins	urance Company Use:
	STREET ADDRESS (Wolvaling Apt., Unit, Suite, and/or bi Blackburn Boulevard	idg, No.) OR P.O ROLITE AND BOX NO.		Pracy)san	
v t	North Port	STATE FL ZIP CODE	34287	Concow)	Av turber to the state of the state of
	SECTION	- SURVEYOR, ENGINEER, OR AR	CHITECT CERTI	FICATION	
py b	oth sides of this Elevation Certifical	te for (1) community official, (2) Insur	ance agent/compa	any, and (3) b	uilding owner.
MENT	5				
				7.0	heck here if attachments
Zon		mplete Items E1 through E4. If the E			
	Building Diagram Number_ completed - see pages 6 and 7. If The top of the bottom floor (includi (check one) the highest adjacent g For Building Diagrams 6-8 with open ft In, above the hig For Zone AO only: If no flood dept	(Select the building diagram most si no diagram accurately represents th ng basement or enclosure) of the bui	e building, provide Iding isft. floor or elevated f e bottom floor ele	e a sketch or in. I	photograph.) above or below b) of the building is  rdance with the community's
		PERTY OWNER (OR OWNER'S RE			
proper		ioles Sections A, II, and E for Zone A (without a FEMA-issue			
OPERT	Y OWNERS OR OWNERS AUTHORIZED REPRESENT	TATIVE'S NAME			
ORESS		ату	STATE	2)	P 0006
SNATU	RE .	DATE	TELEPHONE		>, 0.59
MMEN					
20.00				C	Check here if attachments
	SI	ECTION G - COMMUNITY INFORMA	TION (OPTIONA	L)	
he lo Sectio 31. $\square$ 32. $\square$	ns A, B, C (or E), and G of this Elev The information in Section C wa engineer, or architect who is aut elevation data in the Comments A community official completed S	or ordinance to administer the communition Certificate. Complete the applies taken from other documentation the horized by state or local law to certify area below.)  Section E for a building located in Zor G4 - G9) is provided for community to	cable item(s) and at has been signe elevation informa- ne A (without a FE	sign below, and and embos ation. (Indicat EMA-issued o	sed by a licensed surveyor, te the source and date of the r community-issued BFE) or
A PERM	IT MANGER	GS. DATE PERMIT USED	G	DATE CERTIFICATI	E OF COMPLIANCE/OCCUPANCY ISSUED
7.	This permit has been issued for:	□ New Construction □ Sub	stantial Improven	nent	
8.		(including basement) of the building		ft.	Datum:
9.	BFE or (Zone AO) depth of flood	ling at the building site is:		ft.	Datum:
CAL 0	FFICIAL'S NAME	TITLE			
OWMUN	ITY NAME	TELEPH	ONE		
CNATL	RE	DATE			
OMNE	ris .		-	S	
					☐ Check here if attachments
ENA	Form 81-31 - 61/C 00		RED		REVIOUS EDITIONS
CIVIA	Form 81-31, AUG 99		NEF	CHOCO MEET	THE POST CONTROL OF THE POST O