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

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28, 2009

Important: Read the instructions on pages 1-8. National Flood Insurance Program For Insurance Company Use: **SECTION A - PROPERTY INFORMATION Policy Number** A1. Building Owner's Name **Greg Chauncey** A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Company NAIC Number 700 Blackburn Blvd. ZIP Code 34287 NORTH PORT A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Unit 565, Harbor Cove Mobile Home Park, Sarasota County, Florida A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Mobile Home (Residential) □NAD 1927 図 NAD 1983 N.27°02'24.3" _ Long. _ W.82°16'39.3" Horizontal Datum: A5. Latitude/Longitude: Lat. __ A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 6 A8. For a building with a crawl space or enclosure(s), provide: A9. For a building with an attached garage, provide: a) Square footage of crawl space or enclosure(s) a) Square footage of attached garage sq ft 1618 No. of permanent flood openings in the attached garage b) No. of permanent flood openings in the crawl space or walls within 1.0 foot above adjacent grade enclosure(s) walls within 1.0 foot above adjacent grade 18 Total net area of flood openings in A9.b 2520 Total net area of flood openings in A8.b sa in SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B3. State **B1. NFIP Community Name & Community Number B2. County Name** FL Sarasota Sarasota County 125144 B9 Base Flood Elevation(s) (Zone B8. Flood **B6. FIRM Index B7. FIRM Panel** B4. Map/Panel Number B5. Suffix AO, use base flood depth) Effective/Revised Date Zone(s) Date 8 feet 125144-0375 D 9-3-92 5-1-84 **A8** B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. ☐Other (Describe) ☐Community Determined ☐FIS Profile ⊠FIRM **⊠NGVD** 1929 **□NAVD** 1988 Other (Describe) B11. Indicate elevation datum used for BFE in Item B9: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐Yes ⊠No □CBRS □OPA Designation Date_ SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) **⊠**Finished Construction ■Building Under Construction* C1. Building elevations are based on: □Construction Drawings* *A new Elevation Certificate will be required when construction of the building is complete. 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/AH, AR/AO. Complete Items C2.a-g below according to the building diagram specified in Item A7. N.G.V.D.-1929 Benchmark Utilized Havoline 2 Vertical Datum_ Conversion/Comments _ Check the measurement used. ⊠feet meters (Puerto Rico only) Top of bottom floor (including basement, crawl space, or enclosure floor) 06.6 a) ⊠feet meters (Puerto Rico only) 10.0 Top of the next higher floor b) meters (Puerto Rico only) Bottom of the lowest horizontal structural member (V Zones only) □feet c) meter (Puerto Rico only) ☐feet Attached garage (top of slab) d) ⊠feet meters (Puerto Rico only) 10.0 Lowest elevation of machinery or equipment servicing the building e) (Describe type of equipment in Comment ⊠feet meters (Puerto Rico only) Lowest adjacent (finished) grade (LAG) 05.7 f) 06.6 **⊠**feet meters (Puerto Rico only) Highest adjacent (finished) grade (HAG) 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 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. License Number Certifier's Name Alan K Fish 3941 Company Name 12-908 Van Buskirk/Fish & Associates, Inc Professional Surveyor & Mapper ZIP Code State Address North Port 34287 FL 12450 Tamiami Trail Telephone Date Signature 12/9/2008 941-426-0681

IMPORTANT: In these spaces, copy the corresponding information from Section A.		For Insurance Company Use:	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			Policy Number
700 Blackburn Blvd.		710.0.1	NAIO Number
City NORTH PORT	State FL	ZIP Code 34287	Company NAIC Number
SECTION D - S	SURVEYOR, ENGINEER, OR ARCHITECT CE	ERTIFICATION (CO	NTINUED)
Copy both sides of this Elevation Certificate	for (1) community official, (2) insurance agent/compa	any, and (3) building ov	vner.
Comments		<u>, , , , , , , , , , , , , , , , , , , </u>	
Lowest elevation of machinery is the A/C page	1.		
Signature	Date 12/9/2008	3	Check here if attachments
SECTION E - BUILDING EL EVATIO	ON INFORMATION (SURVEY NOT REQUIRE	D) FOR ZONE AO	
SECTION E - BOILDING ELEVATION	NA INT CHIRATION (CONVET NOT NEGOTILE	D) (OK LONE NO)	
and C. For Items E1-E4, use natural grade,	e Items E1-E5. If the Certificate is intended to supprif available. Check the measurement used. In Puer Illowing and check the appropriate boxes to show wh	rto Rico only, enter me	ters.
grade (HAG) and the lowest adjacent g a) Top of bottom floor (including basem	rade (LAG).		above or below the HAG.
b) Top of bottom floor (including basem	, o	· · · · · · · · · · · · · · · · · · ·	□ above or □ below the LAG.
E2. For Building Diagrams 6-8 with permar (elevation C2.b in the diagrams) of the	nent flood openings provided in Section A Items 8 and building is		nstructions), the next nigher noor below the HAG.
E3. Attached garage (top of slab) is	☐ feet ☐ meters ☐ above or	below the HAG.	
E4. Top of platform of machinery and/or eq	uipment servicing the building is er is available, is the top of the bottom floor elevated		above or Delow the HAG.
	 Unknown. The local official must certify this info 		Community's hoodplain management
	ROPERTY OWNER (OR OWNER'S REPRES		
The property owner or owner's authorized repor Zone AO must sign here. <i>The statements</i>	presentative who completes Sections A, B, and E for in Sections A, B, and E are correct to the best of my	Zone A (without a FEI knowledge.	MA-issued or community-issued BFE)
Property Owner's or Owner's Authorized Rep	resentative's Name		
Address	City	State	ZIP Code FL
Signature	Date	Telepho	ne
Comments			
			Check here if attachments
	SECTION G - COMMUNITY INFORMATION	(OPTIONAL)	Check here is attachments
he local official who is authorized by law or ord	dinance to administer the community's floodplain ma	nagement ordinance of	can complete Sections A, B, C (or E),
	ne applicable item(s) and sign below. Check the me		
is authorized by law to certify elevation	en from other documentation that has been signed a on information. (Indicate the source and date of the	elevation data in the C	omments area below.)
	on E for a building located in Zone A (without a FEM		y-issued BFE) or Zone AO.
	G9.) is provided for community floodplain managem Date Permit Issued G6. Da	ent purposes. ate Certificate Of Comr	oliance/Occupancy Issued
G4. Ferrille National	Date / Civille 100000		
7. This permit has been issued for: New	Construction Substantial Improvement	_	
8. Elevation of as-built lowest floor (including l		☐ feet ☐ meters (P	
9. BFE or (in Zone AO) depth of flooding at th	e building site:	l feet	PR) Datum
Local Official's Name	Title		
Community Name	Telephone		
Signature	Date		
Comments			
			Check here if attachments