U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: July 31, 2015 National Flood Insurance Program Important: Read the instructions on pages 1-9. 195610 FOR INSURANCE COMPANY USE SECTION A - PROPERTY INFORMATION A1. Building Owner's Name JONATHAN MINTON Policy Number: A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Company NAIC Number: 3586 BLECHNUM FERN LANE City SARASOTA State FL ZIP Code 34235 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL Horizontal Datum: ☐ NAD 1927 🔀 NAD 1983 A5. Latitude/Longitude: Lat. 27°21'52.78"N Long. 82°29'56.18"W A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 1A A8. For a building with a crawlspace or enclosure(s): A9. For a building with an attached garage: a) Square footage of crawlspace or enclosure(s) N/A sq ft a) Square footage of attached garage 400 sq ft b) Number of permanent flood openings in the crawlspace b) Number of permanent flood openings in the attached garage or enclosure(s) within 1.0 foot above adjacent grade within 1.0 foot above adjacent grade 0 Total net area of flood openings in A8.b Total net area of flood openings in A9.b sq in 0 sq in d) Engineered flood openings? ☐ Yes **⋈** No d) Engineered flood openings? ☐ Yes **⊠** No SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name B3. State SARASOTA Florida 125144 SARASOTA COUNTY B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel B8. Flood B9. Base Flood Elevation(s) (Zone 1251440151 5/1/1994 Effective/Revised Date AO, use base flood depth) Zone(s) 5/1/1984 X/A B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. ☐ FIS Profile **⊠** FIRM ☐ Community Determined ☐ Other/Source: _ B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 ☐ NAVD 1988 ☐ Other/Source: Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ⊠ No Designation Date: _ ☐ CBRS ☐ OPA SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: ☐ Construction Drawings* ■ Building Under Construction* *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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: N/A Vertical Datum: N/A Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929
NAVD 1988
Other/Source: ___ Datum used for building elevations must be the same as that used for the BFE. Check the measurement used. a) Top of bottom floor (including basement, crawlspace, or enclosure floor) N/A. ☑ feet ☐ meters b) Top of the next higher floor N/A. ☑ feet ☐ meters c) Bottom of the lowest horizontal structural member (V Zones only) N/A. ☑ feet ☐ meters d) Attached garage (top of slab) N/A. feet ☐ meters e) Lowest elevation of machinery or equipment servicing the building <u>N/A</u>. ∫ feet □ meters (Describe type of equipment and location in Comments) ☐ meters f) Lowest adjacent (finished) grade next to building (LAG) N/A. g) Highest adjacent (finished) grade next to building (HAG) ☑ feet □ meters N/A. h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support N/A ☑ feet ☐ meters 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. Were latitude and longitude in Section A provided by a No. 2583 Check here if attachments. licensed land surveyor? ✓ Yes Certifier's Name Clyde O. McNeal License Number 2883 Digitally signed by Clyde O. McNeal Clyde

Signature <

Title Registered Professional Surveyor

Address 6250 N Military Trail #102

State FL

ZIP Code 33407

Telephone (561)640-4800

Company Name TARGET SURVEYING, LLC

City West Palm Beach

Date 10/16/2013

O. McNeal, C =

ELEVATION CERTIFICATE, pa	ge 2				
(195610) IMPORTANT: In these	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., 3586 BLECHNUM FERN LANE	Policy Number:				
City SARASOTA	State F	FL ZIP Code 34235	Company NAIC Number:		
SECTION	D – SURVEYOR, ENGINEER, OR	ARCHITECT CERTIFICATION	N (CONTINUED)		
Copy both sides of this Elevation Certification	icate for (1) community official, (2) insura	ance agent/company, and (3) build	ding owner.		
Comments GARAGE SQUARE FOOT C2-E ARE ELEVATIONS OF A/C SLAF		Γ100 SQUARE FEET. ACCESS U	JNAVAILABLE. ELEVATIONS IN SECTION		
Signature /	p)	Date 10/16/2013			
SECTION E - BUILDING ELEV	VATION INFORMATION (SURVEY	NOT REQUIRED) FOR ZONE	E AO AND ZONE A (WITHOUT BFE)		
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters. E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawlspace, or enclosure) is 1.2					
SECTION	F – PROPERTY OWNER (OR OW	NER'S REPRESENTATIVE) (CERTIFICATION		
or Zone AO must sign here. The staten	nents in Sections A, B, and E are corrected Representative's Name Clyde O. McN	t to the best of my knowledge. Neal	state FL ZIP Code 33407		
Signature		Date 10/16/2013 T	Telephone (561)640-4800		
Comments		Sate 10/10/2013 1	Check here if attachment		
	SECTION G - COMMUNITY	INFORMATION (OPTIONAL)	D 2		
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. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.) A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO. The following information (Items G4–G10) is provided for community floodplain management purposes.					
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate C	of Compliance/Occupancy Issued		
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (in G9. BFE or (in Zone AO) depth of flood G10. Community's design flood elevation	cluding basement) of the building: ling at the building site:	antial Improvement feet meters feet meters feet meters	Datum		
Local Official's Name		Title			
Community Name Telephone					
Signature		Date			
Comments					

Check here if attachments.

ELEVATION CERTIFICATE, page 3

Building Photographs

See Instructions for Item A6.

(195610) IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or E 3586 BLECHNUM FERN LANE	Policy Number:		
City SARASOTA	State FL	ZIP Code 34235	Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

PICTURES TO FOLLOW				
	V			

FEMA Form 086-0-33 (7/12)

ELEVATION CERTIFICATE, page 4

Building Photographs Continuation Page

(195610) 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. 3586 BLECHNUM FERN LANE	Policy Number:
City SARASOTA State FL ZIP Code 34235	Company NAIC Number:
If submitting more photographs than will fit on the preceding page, affix the additional photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left photographs must show the foundation with representative examples of the flood openings or vents, as	Side View." When applicable,