THBUP 2002 -

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

| | N A - PROPERTY OWNER INFORM | Part of Marine Control of the Contro | For Insurance Company Use: |
|---|--|--|--|
| BUILDING OWNER'S NAME | | | Policy Number |
| WALTER & NEILENE SWIGER BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and | d/or Bldg. No.) OR P.O. ROUTE AND E | BOX NO. | Company NAIC Number |
| 4 BROOKSHIRE DRIVE | CTATE | 710.0 | 205 |
| NOKOMIS | STATE FL | ZIP C 3427 | |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Par | | 0421 | • |
| LOT 4 KINGS GATE RV RESORT | | | |
| BUILDING USE (e.g., Residential, Non-residential, Addition, Ac RESIDENTIAL | coessory, etc. Use a Comments area, if | necessary.) | |
| LATTTUDE/LONGITUDE (OPTIONAL) HOR | IZONTAL DATUM: | SOURCE: GPS (Ty | /pe):RTK |
| (##°-##'-####" or ##.####") \[NAD 1927 \[NAD 1 | 1983 USGS | Quad Map | |
| SECTION R. ELO | OD INSURANCE RATE MAP (FIRM) | INCODMATION | |
| | | | |
| B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER SARASOTA COUNTY, FLORIDA 125144 | B2. COUNTY NAME SARASOTA | | B3. STATE FLORIDA |
| | | | |
| B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX D/ NUMBER B5. SUFFIX B6. FIRM INDEX D/ MAY 1, 1984 | | B8. FLOOD ZONE(S) | B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) |
| 125144 0245 D | MAY 1, 1984 | A12 | 11.0' |
| 10. Indicate the source of the Base Flood Elevation (BFE) data or base | | | |
| ☐ FIS Profile ☐ FIRM ☐ Community [| the state of the s | | |
| 11. Indicate the elevation datum used for the BFE in B9: NGVD 19 | | | |
| 2. Is the building located in a Coastal Barrier Resources System (CBF | | | Designation Date |
| | NG ELEVATION INFORMATION (SU | The same of the sa | |
| Dividing algorithms are based as Construction Devices | | | |
| | | Finished Construction | |
| *A new Elevation Certificate will be required when construction of the | e building is complete. | | |
| *A new Elevation Certificate will be required when construction of the 2. Building Diagram Number <u>5</u> (Select the building diagram most s | e building is complete. similar to the building for which this certificate | | pages 6 and 7. If no diagram |
| *A new Elevation Certificate will be required when construction of the 2. Building Diagram Number <u>5</u> (Select the building diagram most s accurately represents the building, provide a sketch or photograph.) | e building is complete. similar to the building for which this certificate | e is being completed - see p | pages 6 and 7. If no diagram |
| *A new Elevation Certificate will be required when construction of the Building Diagram Number 5 (Select the building diagram most s accurately represents the building, provide a sketch or photograph.) Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (w | e building is complete. similar to the building for which this certificate with BFE), AR, AR/A, AR/AE, AR/A1-A30, A | e is being completed - see p | • |
| *A new Elevation Certificate will be required when construction of the Building Diagram Number <u>5</u> (Select the building diagram most s accurately represents the building, provide a sketch or photograph.) B. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), V1-V30, | e building is complete. similar to the building for which this certificate with BFE), AR, AR/A, AR/AE, AR/A1-A30, A scified in Item C2. State the datum used. If th | e is being completed - see p R/AH, AR/AO ne daturn is different from th | e datum used for the BFE in |
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