BUP2004-25142 U4 086904 BC

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

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

ELEVATION CERTIFICATE Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: BUILDING OWNER'S NAME Policy Number LANGEDYK ENTERPRISES, INC. BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 5016 CALLE MINORGA STATE ZIP CODE CITY SARASOTA FL PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOTS 26, 27, 28, 29, 30, & 31, BLOCK 3, MIRA MAR BEACH EXTENSION BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) NON-RESIDENTIAL LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): USGS Quad Map Other: _ □ NAD 1927 ☒ NAD 1983 (##° - ##' - ##.##" or ##.####") SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B2. COUNTY NAME** B3. STATE B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER SARASOTA SARASOTA COUNTY 125144 B4. MAP AND PANEL **B7. FIRM PANEL** B9. BASE FLOOD ELEVATION(S) **B6. FIRM INDEX DATE** EFFECTIVE/REVISED DATE B8. FLOOD ZONE(S) (Zone AO, use depth of flooding) NUMBER **B5. SUFFIX** AF 1251440143 E 09/03/92 09/03/92 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. Other (Describe): X FIRM Community Determined B11. Indicate the elevation datum used for the BFE in B9: X NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe): B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) □ Finished Construction 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. Cz. Building Diagram Number (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 C3.-a-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. Datum NGVD Conversion/Comments_ Bevation reference mark use 8/ Does the elevation reference mark used appear on the FIRM? Yes No 16/30/2006 o a) Top of bottom floor (including basement or enclosure) 7. Oft.(m) Seal 10 . Oft.(m) o b) Top of next higher floor Embossed : N/Aft.(m) o c) Bottom of lowest horizontal structural member (V zones only) 6 . 5 ft.(m) o d) Attached garage (top of slab) o e) Lowest elevation of machinery and/or equipment 10 . Oft(m) A/C UNITS servicing the building (Describe in a Comments area) 4 .5 ft.(m) o f) Lowest adjacent (finished) grade (LAG) 6 . 3 ft.(m) o g) Highest adjacent (finished) grade (HAG) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 8 o i) Total area of all permanent openings (flood vents) in C3.h ____sq. in. (sq. cm) 1, 024 59. /NCHES 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 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. LICENSE NUMBER 4519 CERTIFIER'S NAME ROBERT G. BRUCE COMPANY NAME RED STAKE SURVEYORS INC. TLE OWNER ZIP CODE CITY STATE **ADDRESS** 34241 SARASOTA FL 7123 PROCTOR ROAD DATE TELEPHONE SIGNATURE

941-923-9997

06/30/2006

IMPORTANT: In these spaces, copy the corresponding information from Section			2	For	Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bidg. No.) OR P.O. ROU 5016 CALLE MINORGA		ND BOX NO.		Poli	cy Number
CITY	S	TATE	ZIP CODE	Con	npany NAIC Number
SARASOTA	F		G VVI		- And the little
SECTIO	ON D - SURVEYOR, ENGINEER, OF	R ARCHITECT (CERTIFICATION (CONTINU	UED)	
Copy both sides of this Elevation Certificate f	or (1) community official, (2) insurance ag	ent/company, and	(3) building owner.		
COMMENTS					
SECTION B FLOOD INSURANCE RATE M FILE # 01020321	AP (FIRM) INFORMATION TO BE VERI	FIED AT LOCAL I	F.E.M.A. CONTROL OFFICE		*
FILE # 01020021					
					Check here if attachments
SECTION E - BUILDING EL	EVATION INFORMATION (SURVE	Y NOT REQUIR	RED) FOR ZONE AO AND 2	ONE A M	VITHOUT REE)
or Zone AO and Zone A (without BFE), comp	plete Items E1 through E4. If the Elevation	Certificate is inter	nded for use as supporting infor	mation for a	IOMA or I OMR.E
section C must be completed.					
 Building Diagram Number _(Select the bu 	ilding diagram most similar to the building	for which this cert	ificate is being completed - see	pages 6 an	d 7. If no diagram accurately
represents the building, provide a sketch of		• • • • • •			
The top of the bottom floor (including base natural grade, if available).	ment or enclosure) or the building is	rt.(m)in.(cm) [_	above or below (check o	ne) the high	est adjacent grade. (Use
3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or eleva	ted floor (elevation	b) of the building is ft.(m)	in.(cm) ah	ove the highest artisment
grade. Complete items C3.h and C3.i on	front of form.				
4. The top of the platform of machinery and/o	r equipment servicing the building is	ft.(m) _in.(cm) [above or below (check o	ne) the high	est adjacent grade. (Use
natural grade, if available).	or in musikable, in the top of the bettern fle	er alau ata dia ausa	4		
5. For Zone AO only: If no flood depth numb Yes No Unknown. The lo	er is available, is the top of the bottom tio: cal official must certify this information in S	or elevated in acco Section G	rdance with the community's tic	odplain mar	nagement ordinance?
	ON F - PROPERTY OWNER (OR OV		ESENTATIVE) CERTIFICA	TION	
The property owner or owner's authorized re					FMA-issued or community.
issued BFE) or Zone AO must sign here. Th	ne statements in Sections A, B, C, and E &	are correct to the b	est of my knowledge.	(maiodi a r	and the second continuity
PROPERTY OWNER'S OR OWNER'S AU	THORIZED REPRESENTATIVE'S NAME	E			
ADDRESS		CITY			70.000
ADDICAS		uii	51	TATE	ZIP CODE
SIGNATURE		DATE	TE	LEPHONE	
COMMENTS					
					Check here if attachments
	SECTION G - COMMUNIT				
The local official who is authorized by law or or	rdinance to administer the community's flo	oodplain managem	nent ordinance can complete Se	ections A, B,	C (or E), and G of this Elevation
Certificate. Complete the applicable item(s) ar 61. [] The information in Section C was take		n einnad and amb	necod by a linanced currence of	poincer or a	ambitant who is authorized by
or local law to certify elevation inform	ation. (Indicate the source and date of the	elevation data in	the Comments area below.)	AIGH IOOL, UL C	architect willo is authorized by
52. A community official completed Section	on E for a building located in Zone A (with	out a FEMA-issued	d or community-issued BFE) or	Zone AO.	
33. The following information (Items G4-G	的 is provided for community floodplain m	nanagement purpo	1985.		
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		G6. DATE CERTIFICATE OF C	OMPLIANCE	OCCUPANCY ISSUED
77 This security of the second	Out to Class to				
G7. This permit has been issued for: 🔲 New G8. Elevation of as-built lowest floor (Including		nent		0(-)	Data
39. BFE or (in Zone AO) depth of flooding at t				2.58% (3.00°) (4.16°)	Datum: Datum:
LOCAL OFFICIAL'S NAME	,	711		_ 10(11)	- Country
COMMUNITY NAME			LECUONE		
			LEPHONE		
SIGNATURE		LIA	ATE .		
COMMENTS					
		-			
					Check here if attachments
EMA Form 81-31, January 2003	AND THE RESIDENCE OF THE PARTY			Da	eplaces all previous editio

Replaces all previous editions