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

ELEVATION CERTIFICATE

OMB No. 1660-0008 E 2009

COX	res	F	ebr	uary	28	
1	a	1	17			

National Flood Insurance Program	Important: Read	the instructions on p	ages 1-8.	1968
		- PROPERTY INFORM	IATION	For Insurance Company Use:
A1. Building Owner's Name HAROLD L. & JU	DY E. ASHBY			Policy Number
A2. Building Street Address (including Apt., U. 5536 CAPE AQUA DRIVE	lo.	Company NAIC Number		
City SARASOTA State FL ZIP Code342	242			
A3. Property Description (Lot and Block Numb LOT 48, SIESTA ISLES, UNIT 3	pers, Tax Parcel Number,	Legal Description, etc.)		
A4. Building Use (e.g., Residential, Non-Residential, No	g. W 82°33.260 ng if the Certificate is being soure(s), provide closure(s) the crawl space or one adjacent grade N/A N/A	A9. For a sq ft a) So walls sq in c) To	building with an attact quare footage of attact or of permanent flood within 1.0 foot above otal net area of flood of	hed garage, provide: thed garage 320 sq ft openings in the attached garage adjacent grade N/A openings in A9.b N/A sq in
SECTION	ON B - FLOOD INSUR	ANCE RATE MAP (FIR	M) INFORMATION	V
B1. NFIP Community Name & Community Nur SARASOTA COUNTY 125144	mber B2. Co	ounty Name SOTA		B3. State FLORIDA
B4. Map/Panel Number B5. Suffix 125144 0143 B	B6. FIRM Index Date 09-03-1992	B7. FIRM Panel Effective/Revised Date 09-03-1992	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 10
Designation Date SECTION		ATION INFORMATION	(SURVEY REQUIR	RED)
*A new Elevation Certificate will be require C2. Elevations – Zones A1-A30, AE, AH, A (w below according to the building diagram s	ith BFE), VE, V1-V30, V (pecified in Item A7.	e building is complete.		☑ Finished Construction H, AR/AO. Complete Items C2.a-g
Benchmark Utilized COUNTYVertical Date	ım <u>NGVD 1929</u>			
Conversion/Comments			Check the measure	ment used.
a) Top of bottom floor (including basement, or b) Top of the next higher floor c) Bottom of the lowest horizontal structed Attached garage (top of slab) e) Lowest elevation of machinery or equipment in Common for the common flowest adjacent (finished) grade (LA g) Highest adjacent (finished) grade (Hand)	N/A.	☐ feet		
CHARLES AND				
This certification is to be signed and sealed by information. I certify that the information on the I understand that any false statement may be	y a land surveyor, engine	my nest errorts to interpret	by law to certify elevathe data available.	tion
☐ Check here if comments are provided on				
Certifier's Name KENNETH R. PALMER	License Numbe	With the second	05.00 A (e/a)	
Title SURVEYOR	Company Name CY	RIX ENGINEERING, INC.		
Address 1144 TALLEVAST ROAD STE 111	City SARASOTA	State FL	ZIP Code 34243	
Signature	Bate 04-27-2006	Telephone 941-358-8812		

IMPORTANT: In these spaces, co	opy the corresponding information	from Section A.	Fo	Insurance Company Use:
Building Street Address (including Apt.,	The state of the s	licy Number		
5536 CAPE AQUA DRIVE City SARASOTA StateFLZIP Code 3424	Co	mpany NAIC Number		
SECTION	D - SURVEYOR, ENGINEER, OR A	RCHITECT CERTIFICATIO	N (CONTIN	UED)
	cate for (1) community official, (2) insuran			
	AS SARASOTA COUNTY BENCHMARK			
301-008				
		D-1- 04 07 0000		****
Signature Succession	alus	Date 04-27-2006		☐ Check here if attachments
SECTION E - BUILDING ELEV	ATION INFORMATION (SURVEY N	OT REQUIRED) FOR ZON	E AO AND	ZONE A (WITHOUT BFE)
and C. For Items E1-E4, use natural gr E1. Provide elevation information for grade (HAG) and the lowest adjace a) Top of bottom floor (including to b) Top of bottom floor (including to b) Top of bottom floor (including to b) Top of bottom floor (including to celevation C2.b in the diagrams) of E3. Attached garage (top of slab) is E4. Top of platform of machinery and E5. Zone AO only: If no flood depth rordinance? Yes No SECTION	passement, crawl space, or enclosure) is	nt used. In Puerto Rico only, exposes to show whether the elever the state of the s	enter meters. ation is above eters above et	or below the highest adjacent e or below the HAG. e or below the LAG. ctions), the next higher floor ctions below the HAG. munity's floodplain management
or Zone AO must sign here. The stater	ments in Sections A, B, and E are correct	to the best of my knowledge.		
Property Owner's or Owner's Authorize	d Representative's Name	*		
ddress	Ci	ty	State	ZIP Code
Signature	D:	ate	Telephone	
Comments			£	133
				Check here if attachmen
The least official who is authorized by lay	SECTION G - COMMUNITY II w or ordinance to administer the communi			complete Sections A. B. C. (or F)
and G of this Elevation Certificate. Com	plete the applicable item(s) and sign below	w. Check the measurement u	sed in Items G	i8. and G9.
G1. The information in Section C w is authorized by law to certify e	vas taken from other documentation that helevation information. (Indicate the source	nas been signed and sealed by e and date of the elevation dat	y a licensed su a in the Comm	rveyor, engineer, or architect who nents area below.)
The second secon	d Section E for a building located in Zone	The state of the s		ued BFE) or Zone AO.
	ns G4G9.) is provided for community flo			
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate	e Of Complian	ce/Occupancy (ssued
G7. This permit has been issued for:	☐ New Construction ☐ Substa	intial Improvement		
G8. Elevation of as-built lowest floor (inc		feet meters (PF	R) Datum'	
G9. BFE or (in Zone AO) depth of flooding	ng at the building site:	feet _ meters (PF	R) Datum	_
Local Official's Name		Title		
Community Name		Telephone		
Signature		Date		

Comments				
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		20	the second secon	☐ Check here if attachmen
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