U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION					FOR INSURANCE COMPANY USE			
A1. Building Owner's Name SIESTA DEVELOPMENT GROUP, LLC					Policy Number:			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 909 CASEY COVE DRIVE					Company NAIC Number:			
City State				ZIP Code				
NOKOMIS	Florida		34275					
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 4, CASEY COVE								
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL								
A5. Latitude/Longitude: Lat. 27DEG08'11.52"N Long. 82DEG28'22.13"W Horizontal Datum: NAD 1927 X NAD 1983								
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.								
A7. Building Diagram Number6_								
A8. For a building with a crawlsp	pace or enclosure(s):							
a) Square footage of crawlspace or enclosure(s) 659.2 sq ft								
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade								
c) Total net area of flood openings in A8.b 0 sq in								
d) Engineered flood openings? Yes No								
A9. For a building with an attached garage:								
a) Square footage of attached garage sq ft								
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade C) Total net area of flood openings in A9 b								
c) Total net area of flood openings in A9.b sq in								
d) Engineered flood openings?								
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Community Name & Co		B2. County Name			B3. State			
SARASOTA COUNTY, FLORIDA	SARASOTA			Florida				
B4. Map/Panel B5. Suffix Number	Date	FIRM Panel Effective/	B8. Flood Zone(s)	(Zo	se Flood Elevation(s) ne AO, use Base			
12115C0238F F	1	Revised Date 04/2016	AE	Flood Depth) 10.0				
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:								
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🔲 Yes 🗵 No								
Designation Date: CBRS DPA								
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ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE							
Building Street Address (including Apt., Unit, Suite, and/or 909 CASEY COVE DRIVE	Policy Number:							
City State	State ZIP Code			Company NAIC Number				
NOKOMIS Flori	da 3427	5						
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)								
C1. Building elevations are based on: Construction Drawings* Building Under Construction*								
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: GPS FLORIDA DOT NETWORK Vertical Datum: NAVD 1988								
Indicate elevation datum used for the elevations in items a) through h) below.								
☐ NGVD 1929 区 NAVD 1988 ☐ Other/Source:								
Datum used for building elevations must be the same	e as that used for the BF	FE.		Check the measurement used.				
a) Top of bottom floor (including basement, crawlspa	ace, or enclosure floor)			X feet				
b) Top of the next higher floor		<u>15</u> .	<u>75 </u>	X feet meters				
c) Bottom of the lowest horizontal structural member	r (V Zones only)			🔀 feet 🔲 meters				
d) Attached garage (top of slab)				X feet meters				
e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Com	icing the building ments)	<u>13</u> .	40	🔀 feet 🔲 meters				
f) Lowest adjacent (finished) grade next to building	(LAG)	<u>2</u> .	9	🕱 feet 🔲 meters				
g) Highest adjacent (finished) grade next to building	(HAG)	4.	8	X feet				
h) Lowest adjacent grade at lowest elevation of decistructural support	k or stairs, including	4·	2	X feet				
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.								
Were latitude and longitude in Section A provided by a lic			No	○ Check here if attachments.				
Certifier's Name RODNEY W. MCKINZIE	License Number FL#4780			and the second second				
	ن برن پن کار							
Title OWNER								
Company Name	Place							
RODNEY W. MCKINZIE	Seat = Here							
Address 4411 BEE RIDGE ROAD #471								
City SARASOTA	State Florida	ZIP Code 34233						
Signature Def w. Melin	Date 11/10/2018	Telephone (941) 228-47	780					
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.								
Comments (including type of equipment and location, per C2(e), if applicable) ITEM IN C2 E REFERS TO AC UNIT, ATTACHMENTS INCLUDE PHOTOGRAPHS OF BUILDING ONLY.								









FRONT

REAR