3-07213

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

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

OFFICE COPY

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

		RTY OWNER INFORMA		For Insurance Company Use:	
BUILDING OWNER'S NAME DOMENT SVCS.	Policy Number				
BUILDING STREET ADDRESS (Including Apt., Unit, Su 703 CHANNEL ACRES ROAD	Company NAIC Number				
CITY NOKOMIS		STATE FL	ZIP C 3427	CODE	
PROPERTY DESCRIPTION (Lot and Block Numbers, 7	Tax Parcel Number, L		5427	5	
DOLPHIN SHORES					
BUILDING USE (e.g., Residential, Non-residential, Addi RESIDENTIAL	ition, Accessory, etc.	Use a Comments area, if r	necessary.)		
LATITUDE/LONGITUDE (OPTIONAL) (##° - ## - ##.##" or ##.####")	HORIZONTAL DAT NAD 1927 NA		OURCE: GPS (T		
SECTION B	- FLOOD INSURAN	ICE RATE MAP (FIRM) II	NFORMATION		
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER	B2. COUNTY	YNAME		B3. STATE	
SARASOTA COUNTY 125144	SARASOT	TA		FLORIDA	
	INDEX DATE EF	B7. FIRM PANEL FECTIVE/REVISED DATE 5/1/84	B8. FLOOD ZONE(S	B9. BASE FLOOD ELEVATION(S (Zone AO, use depth of flooding)	
311. Indicate the elevation datum used for the BFE in B9: 🛛 I	nmunity Determined NGVD 1929	Other (Description NAVD 1988	ibe): Other (Describe):		
312. Is the building located in a Coastal Barrier Resources Sys				o Designation Date	
		ON INFORMATION (SUF			
C1. Building elevations are based on: Construction Drawin	ngs* 🔲 Building		Finished Construction	l.	
*A new Elevation Certificate will be required when constructed. Building Diagram Number 1 (Select the building diagram naccurately represents the building, provide a sketch or photos. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1	most similar to the buildin otograph.)	complete. Ing for which this certificate is	being completed - see	pages 6 and 7. If no diagram	
C2. Building Diagram Number 1 (Select the building diagram in accurately represents the building, provide a sketch or phoco. C3. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1. Complete Items C3a-i below according to the building dia Section B, convert the datum to that used for the BFE. She Section D or Section G, as appropriate, to document the datum NGVD 1929 Conversion/Comments NONE	most similar to the building otograph.) 1-V30, V (with BFE), AR in ingram specified in Item now field measurements datum conversion.	omplete. ing for which this certificate is R, AR/A, AR/AE, AR/A1-A30, C2. State the datum used. If and datum conversion calcu	being completed - see AR/AH, AR/AO the datum is different fr lation. Use the space p	rom the datum used for the BFE in provided or the Comments area of	
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	copy the corresponding information from		A	F	or Insurance Company Use:
703 CHANNEL ACRES ROAD	Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AN	ID BOX NO.	1000年11日	F	Policy Number
CITY NOKOMIS	ST FI	TATE L	ZIP CI 3427		Company NAIC Number
SE	CTION D - SURVEYOR, ENGINEER, OR	ARCHITE			
	icate for (1) community official, (2) insurance age		The second secon	100	
COMMENTS	THE RESERVE OF THE PERSON OF T	1 11	12	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
PROJECT NO. 02-03-58, THE AC	PAD IS AT 11.07'. THERE ARE NO APP	'ARENT FL	OW THROUGHS		
			1000		
					Check here if attachments
SECTION E - BUILDING	G ELEVATION INFORMATION (SURVEY	NOT REC	(UIRED) FOR ZONE A	O AND ZONE A	(WITHOUT BFE)
For Zone AO and Zone A (without BFE), Section C must be completed.	complete Items E1 through E4. If the Elevation	Certificate is	intended for use as suppo	rting information fo	ra LOMA or LOMR-F,
	the building diagram most similar to the building	for which this	contificate is being comple	tod soo noons 6	and 7. If no diagram are untally
represents the building, provide a sk	etch or photograph.)	O WINGI UIS	cerunicate is being comple	eu - see pages o	and 7. If no diagram accurately
E2. The top of the bottom floor (including	basement or enclosure) of the building isft	.(m)in.(cn	n) above or below	(check one) the hi	ghest adjacent grade. (Use
natural grade, if available).					
53. For Building Diagrams 6-8 with open grade. Complete items C3.h and C3	ings (see page 7), the next higher floor or elevat	ed floor (elev	ration b) of the building is	_ft.(m)in.(cm)	above the highest adjacent
	and/or equipment servicing the building isft	(m) in (cr	n) 🗆 above or 🗆 below	(chack one) the h	abort adiacont arado. (Lleo
natural grade, if available).					
5. For Zone AO only: If no flood depth	number is available, is the top of the bottom floor	r elevated in	accordance with the comm	nunity's floodplain r	nanagement ordinance?
☐ Yes ☐ No ☐ Unknown. 7	The local official must certify this information in S	ection G.			
	CTION F - PROPERTY OWNER (OR OW				
issued BFF) or Zone AO must sign her	zed representative who completes Sections A, B re. The statements in Sections A, B, C, and E al	, C (Items C	3.h and C3.i only), and E fo	r Zone A (without	a FEMA-issued or community-
	S AUTHORIZED REPRESENTATIVE'S NAME		the best of my knowledge.		
	ONOTION WEED THE TREATMENT TO THE STATE OF T				
ADDRESS		CITY		STATE	ZIP CODE
SIGNATURE		DATE		TELEPHO	NE
COMMENTS				-	
	SECTION G - COMMUNITY	/ INFORM	ATION (OPTIONAL)		Check here if attachment
The local official who is authorized by law	w or ordinance to administer the community's flo			malata Castiana A	D.C.(
Certificate. Complete the applicable item	n(s) and sign below.	Jupaninark	agement ordinance can co	mpiete Sections A	, B, C (or E), and G or this Eleva
The information in Section C wa	as taken from other documentation that has been	signed and	embossed by a licensed s	urveyor, engineer,	or architect who is authorized b
or local law to certify elevation in	nformation. (Indicate the source and date of the	elevation da	ta in the Comments area b	elow.)	
G3. The following information (Items	Section E for a building located in Zone A (witho G4-G9) is provided for community floodplain ma	ut a FEMA-k	ssued or community-issued	d BFE) or Zone AC).
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	a layerie it p	A. Sir	ATT OF CO.	IOTIO COLUMNIA INC.
O. I LIVINI HOWBER	GO. DATE PERMIT ISSUED		G6. DATE CERTIFIC	ATE OF COMPLIAN	ICE/OCCUPANCY ISSUED
37. This permit has been issued for:	New Construction Substantial Improvement	ent			
G8. Elevation of as-built lowest floor (inc	duding basement) of the building is:			ft.(m)	Datum:
G9. BFE or (in Zone AO) depth of flooding	ng at the building site is:			_ft.(m)	Datum:
LOCAL OFFICIAL'S NAME	X		TITLE		AND THE RESERVE OF THE PARTY OF
COMMUNITY NAME	*	153/	TELEPHONE		
SIGNATURE	JUN 2004	03	DATE		ar effect to the control of
COMMENTS	Received	(T)			
	Construction &	78			A Jan Sur Ca
1	Property Stds Dept.	07			
(4)	E/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2	111			Check here if attachmen
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