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. Bullding Owner's Name ELIJAH & JENNIFER PORTER	Policy Number:			
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg Box No. 130 CLEAR LAKE DRIVE 	Company NAIC Number:			
		IP Code 4223		
A3. Property Description (Lot and Block Numbers, Tax Parcel Num LOT 15, BLOCK E, STILLWATER UNIT #1, TAX ID #0856130029	per, Legal Description, etc.)			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Acce	ssory, etc.) RESIDENTIAL	4 20		
A5. Latitude/Longitude: Lat. 26.94624° Long82.335	96° Horizontal Datum:	☐ NAD 1927 🔀 NAD 1983		
A6. Attach at least 2 photographs of the building if the Certificate is				
A7. Building Diagram Number 1A		y (x)		
A8. For a building with a crawlspace or enclosure(s):				
a) Square footage of crawlspace or enclosure(s)	sq ft			
b) Number of permanent flood openings in the crawlspace or e		adiacent grade 0		
c) Total net area of flood openings in A8.b 0 sq in		- Jacobit grado		
d) Engineered flood openings? Yes X No				
A9. For a building with an attached garage:				
a) Square footage of attached garage 738 sq ft	as a second			
b) Number of permanent flood openings in the attached garage	within 1.0 foot above adjacent gr	ade 0		
c) Total net area of flood openings in A9.b 0 sq ir	12			
d) Engineered flood openings? Yes X No				
3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,				
SECTION B - FLOOD INSURANCE	RATE MAP (FIRM) INFORMAT	ION		
	County Name ASOTA	B3. State Florida		
B4. Map/Panel B5. Suffix B6. FIRM Index Date Effective Revised	e/ i Date	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)		
12115C-0454 F 11/04/2016 11/04/2016	AE	11'		
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 X NAVD 1988	er/Source:		
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Tyes X No				
Designation Date: CBRS CPA				

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 130 CLEAR LAKE DRIVE			Policy Number:	
		P Code 1223	Company NAIC Number	
SECTION C - BUILDING E	LEVATION INFORM	ATION (SURVEY R	EQUIRED)	
_		uilding Under Constru	uction* X Finished Construction	
*A new Elevation Certificate will be required when		•		
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE Complete Items C2.a–h below according to the but Benchmark Utilized: PLAT BM#856 EL:7.47'	ilding diagram specifie	BFE), AR, AR/A, AR d in Item A7. In Puerl m: NGVD 1929	/AE, AR/A1-A30, AR/AH, AR/AO. to Rico only, enter meters.	
Indicate elevation datum used for the elevations in	items a) through h) be	low.		
☐ NGVD 1929 ☐ NAVD 1988 ☐ Other				
Datum used for building elevations must be the sa	me as that used for the	BFE.	Check the measurement used.	
a) Top of bottom floor (including basement, crawls	space, or enclosure flo	or)11. <u>7</u>		
b) Top of the next higher floor		N/A	X feet meters	
c) Bottom of the lowest horizontal structural memi	per (V Zones only)	N/A	X feet meters	
d) Attached garage (top of slab)		11, 2	X feet meters	
e) Lowest elevation of machinery or equipment se (Describe type of equipment and location in Co	ervicing the building mments)	11, 2	X feet meters	
f) Lowest adjacent (finished) grade next to buildir	ng (LAG)	11, 1	X feet meters	
g) Highest adjacent (finished) grade next to buildi	ng (HAG)	11.3	X feet meters	
 h) Lowest adjacent grade at lowest elevation of de structural support 	eck or stairs, including	<u>N/A</u>	x feet meters	
SECTION D - SURVEYOR	R, ENGINEER, OR A	RCHITECT CERTIF	ICATION	
This certification is to be signed and sealed by a land s I certify that the information on this Certificate represen statement may be punishable by fine or imprisonment to	ts mv best efforts to in:	terpret the data availa	/ law to certify elevation information. able. I understand that any false	
Were latitude and longitude in Section A provided by a			☐ Check here if attachments.	
Certifier's Name	License Number			
B. GREGORY RIETH	5228	<u> </u>	T	
Title PSM/CFM				
Company Name STRAYER SURVEYING & MAPPING, INC.			Plage 19 Seal Mere 19 19 19 19 19 19 19 19 19 19 19 19 19	
Address 742 SHAMROCK BLVD			Marie V	
City VENICE	State Florida	ZIP Code 34293	The si	
Signature	Date 11/18/2016	Telephone (941) 497-1290		
Copy all pages of this Elevation Certificate and all attachn	nents for (1) community	official, (2) insurance	agent/company, and (3) building owner.	
Comments (including type of equipment and location, p FILE #15-03-104. THE OUTSIDE A/C UNIT ON THE R WAS DERIVED FROM A HAND HELD G.P.S. UNIT (G VALID ONLY WITH RAISED SEAL & SIGNATURE.	IGHT SIDE OF THE H	OME WAS USED FO	OR SECTION C2e. SECTION A5 ELEVATION 12.3'. CERTIFICATE	

ELEVATION CERTIFICATE

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	onding information	n from Section A.		FOR INSURANCE COMPANY US	SE.
Building Street Address (including Apt., Unit, Suite, 130 CLEAR LAKE DRIVE			No.	Policy Number:	
City	State	ZIP Code		Company NAIC Number	="
ENGLEWOOD	Florida	34223			
SECTION E - BUILDING FOR Z	ELEVATION INFO	ORMATION (SURVE NE A (WITHOUT BF	Y NOT I E)	REQUIRED)	
For Zones AO and A (without BFE), complete Item complete Sections A, B,and C. For Items E1–E4, u enter meters.	ise natural grade, if	available. Check the m	neasurem	nent used. In Puerto Rico only,	
E1. Provide elevation information for the following the highest adjacent grade (HAG) and the low	and check the appress adjacent grade (opriate boxes to show (LAG).	whether	the elevation is above or below	
a) Top of bottom floor (including basement, crawlspace, or enclosure) is Top of bottom floor (including basement)		feet [] meters	above or below the HAG	3.
 Top of bottom floor (including basement, crawlspace, or enclosure) is 			meters	above or below the LAG	3 .
E2. For Building Diagrams 6–9 with permanent flo the next higher floor (elevation C2.b in	od openings provide	ed in Section A Items 8	3 and/or 9	(see pages 1–2 of Instructions),	
the diagrams) of the building is		feet	meters	above or below the HAG	€.
E3. Attached garage (top of slab) is		feet [meters	above or below the HAG	€.
E4. Top of platform of machinery and/or equipmer servicing the building is	nt		meters	above or below the HAG	3.
E5. Zone AO only: If no flood depth number is ava floodplain management ordinance? Yes	illable, is the top of t	he bottom floor elevate nown. The local officia	ed in acc al must c	ordance with the community's ertify this information in Section G.	
SECTION F - PROPERTY	OWNER (OR OWN	ER'S REPRESENTAT	IVE) CE	RTIFICATION	0
The property owner or owner's authorized represer community-issued BFE) or Zone AO must sign her	ntative who complete e. The statements in	es Sections A, B, and	E for Zon	ne A (without a FEMA-issued or	14
			are come	oct to the best of my knowledge.	
Property Owner or Owner's Authorized Representa			die com	oct to the best of my knowledge.	
Property Owner or Owner's Authorized Representation Address		City	Sta		
Property Owner or Owner's Authorized Representa			Sta		
Property Owner or Owner's Authorized Representation Address		City	Sta	te ZIP Code	
Property Owner or Owner's Authorized Representation Address Signature		City	Sta	te ZIP Code	
Property Owner or Owner's Authorized Representation Address Signature		City	Sta	te ZIP Code	
Property Owner or Owner's Authorized Representation Address Signature		City	Sta	te ZIP Code	
Property Owner or Owner's Authorized Representation Address Signature		City	Sta	te ZIP Code	
Property Owner or Owner's Authorized Representation Address Signature		City	Sta	te ZIP Code	
Property Owner or Owner's Authorized Representation Address Signature		City	Sta	te ZIP Code	
Property Owner or Owner's Authorized Representation Address Signature		City	Sta	te ZIP Code	
Property Owner or Owner's Authorized Representation Address Signature		City	Sta	te ZIP Code	
Property Owner or Owner's Authorized Representation Address Signature		City	Sta	te ZIP Code	
Property Owner or Owner's Authorized Representation Address Signature		City	Sta	te ZIP Code	

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corn	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, S 130 CLEAR LAKE DRIVE	Policy Number:		
City ENGLEWOOD	State Florida	ZIP Code 34223	Company NAIC Number
SECTION	ON G - COMMUNITY INFOR	MATION (OPTIONAL)	
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	n Certificate. Complete the ap nter meters.	pplicable item(s) and sign	below. Check the measurement
G1. The information in Section C was takengineer, or architect who is authorized data in the Comments area below.) G2. A community official completed Section	ed by law to certify elevation	information. (Indicate the	e source and date of the elevation
G2. A community orticial completed Section or Zone AO.	ion E for a building located in	Zone A (without a Feiving	A-Issued or community-Issued BrE)
G3. The following information (Items G4-	-G10) is provided for commu	nity floodplain manageme	ent purposes.
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued
15-144495	3 × 5 8		compliance/occupancy leaded
G7. This permit has been issued for:	New Construction ☐ Subs	stantial Improvement	1
G8. Elevation of as-built lowest floor (including of the building:	g basement)	[] feet	meters Datum
G9. BFE or (in Zone AO) depth of flooding at	the building site:	feet	meters Datum
G10. Community's design flood elevation:		4.6	meters Datum
Local Official's Name	Title	•	
Community Name	Tele	ephone	
Signature	Dat	е	
Comments (including type of equipment and loc	cation, per C2(e), if applicabl	e)	
			4 5
			a
			= 1
			Check here if attachments.

BUILDING PHOTOGRAPHS

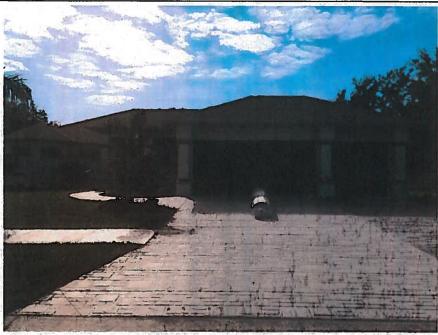
ELEVATION CERTIFICATE

See Instructions for Item A6.

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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE Policy Number:	
Building Street Address (including A 130 CLEAR LAKE DRIVE				
City	State	ZIP Code	Company NAIC Number	
ENGLEWOOD	Florida	34223		

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



FRONT VIEW 11/18/16

Photo One Caption



REAR LEFT 11/18/16

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, o	FOR INSURANCE COMPANY USE Policy Number:				
Building Street Address (including 130 CLEAR LAKE DRIVE					
City	State	ZIP Code	Company NAIC Number		
ENGLEWOOD	Florida	34223			

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



REAR RIGHT 11/18/16

Photo One Caption