FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

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

05-408683

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		SECTION A	- PROPERTY OWNER INF	ORMATIO	N	For Insurance Company Use:
BUILDING OWNER'S NAM	Policy Number					
Westfield Homes of S						
BUILDING STREET ADDR 160 Clear Lake Drive	Company NAIC Number					
CITY			STATE		ZIP C	ODE
Englewood			FI		3422	
PROPERTY DESCRIPTIO Lot 28, Block E, Stillwater -	ON (Lot and Block Unit 2	Numbers, Tax Parcel	Number, Legal Description, e	tc.)		
BUILDING USE (e.g., Resi	idential, Non-resid	dential, Addition, Acces	sory, etc. Use a Comments a	area, if nece	essary.)	
Residential						
LATITUDE/LONGITUDE (C (##° - ##' - ##.##" or ##.#			ONTAL DATUM: 7 NAD 1983	SOUP	RCE: GPS (T)	ype): Quad Map
	S	ECTION B - FLOOD	INSURANCE RATE MAP (F	IRM) INFO	RMATION	
B1. NFIP COMMUNITY NAME &	COMMUNITY NUM	BER	B2. COUNTY NAME			B3. STATE
SARASOTA COUNTY 125144			Sarasota			Florida
B4. MAP AND PANEL			B7. FIRM PANEL			D0 D405 51 00D 51 51 44 71011/01
NUMBER 125144 0454	B5. SUFFIX D	B6. FIRM INDEX DATE 07-31-71	EFFECTIVE/REVISED DA 05-01-84	ATE E	B8. FLOOD ZONE(S) A12	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 12.0
310. Indicate the source of the E	Base Flood Flevati	on (BEE) data or base flo	and depth entered in R9		Vii	
	FIRM	Community Dete		(Describe):		
311. Indicate the elevation datur				1988	Other (Describe):	
			area or Otherwise Protected An	ea (OPA)?		Designation Date
			LEVATION INFORMATION			Designation Date
1. Building elevations are base						
			Building Under Construction*	M FILE	shed Construction	
*A pay Floyation Cartificate						
*A new Elevation Certificate						
2. Building Diagram Number 1	1 (Select the buildin	ig diagram most similar to	uilding is complete. o the building for which this certifi	cate is being	completed - see pa	ages 6 and 7. If no diagram
 Building Diagram Number 1 accurately represents the bit 	(Select the buildin building, provide a s	g diagram most similar to ketch or photograph.)	the building for which this certifi			ages 6 and 7. If no diagram
 Building Diagram Number 1 accurately represents the bit 	(Select the buildin building, provide a s	g diagram most similar to ketch or photograph.)				ages 6 and 7. If no diagram
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IMPORTANT: In these spaces, c	For Insurance Company Use:			
BUILDING STREET ADDRESS (Including A 160Clear Lake Drive	Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND B	OX NO.		Policy Number
CITY Englewood	STATE FI	:	ZIP CODE 34223	Company NAIC Number
	CTION D - SURVEYOR, ENGINEER, OR AR	CHITECT C	ERTIFICATION (CONTINU	ED)
Copy both sides of this Elevation Certific	icate for (1) community official, (2) insurance agent/o	company, and (3) building owner.	
COMMENTS				
			7.)	4
			1	
				Check here if attachments
	G ELEVATION INFORMATION (SURVEY N			
3. Professional Control of the Contr	complete Items E1 through E4. If the Elevation Cer	rtificate is intend	ded for use as supporting inform	nation for a LOMA or LOMR-F,
Section C must be completed.	the building diagram most similar to the building for v	which this certif	icate is being completed – see r	pages 6 and 7. If no diagram accurately
represents the building, provide a sk			3	,
	basement or enclosure) of the building isft.(m))in.(cm)	above or Delow (check on	e) the highest adjacent grade. (Use
natural grade, if available).	7.0. 11.1.0.0	Para (alaustian	h) of the huilding is ft (m)	in (cm) above the highest adjacent
E3. For Building Diagrams 6-8 with open grade. Complete items C3.h and C3	ings (see page 7), the next higher floor or elevated f	loor (elevation i	b) of the building isft.(m) _	_in.(orn) above the highest adjacent
E4. The top of the platform of machinery	and/or equipment servicing the building isft.(m))in.(cm) 🔲	above or Delow (check on	e) the highest adjacent grade. (Use
natural grade, if available).				
	number is available, is the top of the bottom floor ele		dance with the community's floo	odplain management ordinance?
	The local official must certify this information in Section F - PROPERTY OWNER (OR OWNE		SENTATIVE) CERTIFICAT	ION
The state of the s	zed representative who completes Sections A, B, C			
	re. The statements in Sections A, B, C, and E are of			,
	'S AUTHORIZED REPRESENTATIVE'S NAME			
ADDRESS		CITY	ST	ATE ZIP CODE
[2]		1000100	£ 5.1	
SIGNATURE		DATE	IE	LEPHONE
COMMENTS				
				Charleborn & attachments
	SECTION G - COMMUNITY IN	FORMATIO	N (OPTIONAL)	Check here if attachments
The local official who is authorized by lav	w or ordinance to administer the community's floodp			ctions A, B, C (or E), and G of this Elevati
Certificate. Complete the applicable iten	m(s) and sign below.			
G1. The information in Section C wa	as taken from other documentation that has been sig	ned and embo	ssed by a licensed surveyor, er	igineer, or architect who is authorized by
or local law to certify elevation i	information. (Indicate the source and date of the ele Section E for a building located in Zone A (without a	vation data in the	ne Comments area below.) or community-issued BFF) or 7	Zone AO.
	s G4-G9) is provided for community floodplain mana			
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED			DMPLIANCE/OCCUPANCY ISSUED
G7. This permit has been issued for C	New Construction Substantial Improvement		U	
G8. Elevation of as-built lowest floor (inc			ft.(m)	Datum:
G9. BFE or (in Zone AO) depth of floodi			ft.(m)	Datum:
LOCAL OFFICIAL'S NAME		TITI	LE	
COMMUNITY NAME		TEL	EPHONE	
SIGNATURE		DA	TE	
COMMENTS				
i				# 8 PER
•				☐ Check here if attachments