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

Copy all pages of this Elevation Certificate ar	d all attachments for (1) community	official (2) insurance agent/company	and (3) building owner
		2 onicial, (2) insulation agent/company	, and (5) building owner.

				( )				
SECTION A – PROPERTY INFORMATION					RANCE COMPANY USE			
A1. Building Owner's Name Policy Number: KELLY & STEPHANIE STUTZMAN						ber.		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 471 CONRAD ROAD					IAIC Number:			
City				State			ZIP Code	
VENICE				Florida			34293	
		nd Block Numbers, Ta NICE UNIT 17, TAX			jal Des	scription, etc.)		
A4. Building Use (	e.g., Resider	tial, Non-Residential,	Addition	, Accessory,	etc.)	RESIDENTIAL	-	
A5. Latitude/Longi	tude: Lat. 2	7.05105°	Long8	32.41485°		Horizontal Dat	um: 🗌 NAD 1	1927 🗙 NAD 1983
A6. Attach at leas	2 photograp	hs of the building if th	e Certific	ate is being ι	ised to	obtain flood ins	urance.	
A7. Building Diagr	am Number	1B						
A8. For a building	with a crawls	pace or enclosure(s):						
a) Square for	tage of crawl	space or enclosure(s)	)		N/A	sq ft		
b) Number of	permanent flo	ood openings in the cr	awlspace	e or enclosur	e(s) wit	hin 1.0 foot abo	ve adjacent gra	ade N/A
c) Total net ar	ea of flood o	penings in A8.b		N/A sq ir	ı			
d) Engineered	l flood openir	ngs? 🗌 Yes 🗵 I	No					
A9. For a building	with an attach	ied garage:						
a) Square foo	age of attach	ied garage		579 sq ff	:			
b) Number of	permanent flo	ood openings in the at	tached g	arage within	1.0 foo <sup>-</sup>	t above adjacer	it grade N/A	
,		benings in A9.b	C	N/A sq		-	·	
d) Engineered			No	·				
		J						
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
		Community Number		B2. County				B3. State
SARASOTA COUI	NTY - 125144			SARASOTA	4			Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. F Zone		. Base Flood E (Zone AO, us	Elevation(s) e Base Flood Depth)
12115C-0341	F	11-04-2016	11-04-2		AE	10	,	
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:								

ELEVATION CERTIFICATE			OMB No. 1660-0008 Expiration Date: November 30, 2022	
IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., U 471 CONRAD ROAD	nit, Suite, and/or Bldg. No.) or P.O. Ro	ute and Box No.	Policy Number:	
City VENICE		293	Company NAIC Number	
SECTION C -	- BUILDING ELEVATION INFORMA	TION (SURVEY R	EQUIRED)	
C2. Elevations – Zones A1–A30, AE, Ał Complete Items C2.a–h below acco Benchmark Utilized: <u>NGS BM D-72</u>	required when construction of the build H, A (with BFE), VE, V1–V30, V (with B ording to the building diagram specified <u>7 EL: 12.33'</u> Vertical Datum he elevations in items a) through h) bel	BFE), AR, AR/A, AF l in Item A7. In Puer n: NAVD1988		
	must be the same as that used for the	BFE.		
<ul><li>b) Top of the next higher floor</li><li>c) Bottom of the lowest horizontal s</li></ul>	asement, crawlspace, or enclosure floo structural member (V Zones only)	r)	Check the measurement used.         11.1       ⊠ feet       meters         N/A       ⊠ feet       meters         N/A       ⊠ feet       meters         8.3       ⊠ feet       meters	
d) Attached garage (top of slab)			8.3 X feet meters	
e) Lowest elevation of machinery o (Describe type of equipment and	d location in Comments)		N/A ⊠ feet ☐ meters	
f) Lowest adjacent (finished) grade	e next to building (LAG)		$7.9$ $\times$ feet $\Box$ meters	
g) Highest adjacent (finished) grade	e next to building (HAG)		8.0 × feet meters	
<ul> <li>h) Lowest adjacent grade at lowest structural support</li> </ul>	t elevation of deck or stairs, including		N/A 🛛 feet 🗌 meters	
SECTION D	- SURVEYOR, ENGINEER, OR AR		FICATION	
This certification is to be signed and sea I certify that the information on this Certi statement may be punishable by fine or Were latitude and longitude in Section A	ficate represents my best efforts to inte imprisonment under 18 U.S. Code, Se	erpret the data avail ction 1001.	y law to certify elevation information. able. I understand that any false	
Certifier's Name	License Number			
B. GREGORY RIETH	5228			
Title PSM/CFM Company Name BENNETT-PANFIL, INC.			Ext.	
Address				
742 SHAMROCK BLVD			CORIDE IN SUCIE	
City VENICE	State Florida	ZIP Code 34293		
Signature	Date 11-16-2022	Telephone (941) 497-1290	Ext.	
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 FILE #22-02-05. THE SUBJECT STRUC AT THIS TIME. SECTION A5 WAS DER	TURE IS UNDER CONSTRUCTION,			
DATE OF FIELD SURVEY: 11/11/2022				

OMB No.	1660-0008
Expiratior	Date: November 30, 2022

ELEVATION CERTIFICATE			Expiration Date: November 30, 2022
IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, 471 CONRAD ROAD	and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
City VENICE	State Florida	ZIP Code 34293	Company NAIC Number
		FORMATION (SURVEY NO DNE A (WITHOUT BFE)	TREQUIRED)
For Zones AO and A (without BFE), complete Items complete Sections A, B,and C. For Items E1–E4, us enter meters.	s E1–E5. If the Ce se natural grade, i	rtificate is intended to suppor f available. Check the measu	t a LOMA or LOMR-F request, irement used. In Puerto Rico only,
<ul><li>E1. Provide elevation information for the following a the highest adjacent grade (HAG) and the lower a) Top of bottom floor (including basement,</li></ul>			her the elevation is above or below
crawlspace, or enclosure) is		feet 🗌 me	ters above or below the HAG.
<ul> <li>b) Top of bottom floor (including basement, crawlspace, or enclosure) is</li> </ul>		feet 🗌 me	ters 🗌 above or 🗌 below the LAG.
E2. For Building Diagrams 6–9 with permanent floo	od openings provid	led in Section A Items 8 and	/or 9 (see pages 1–2 of Instructions),
the next higher floor (elevation C2.b in the diagrams) of the building is		feet me	ters 🗌 above or 🗌 below the HAG.
E3. Attached garage (top of slab) is		feet 🗌 me	ters above or below the HAG.
E4. Top of platform of machinery and/or equipmen servicing the building is	t	feet me	ters 🗌 above or 🗌 below the HAG.
E5. Zone AO only: If no flood depth number is avail floodplain management ordinance?			accordance with the community's st certify this information in Section G.
SECTION F – PROPERTY (	OWNER (OR OWI	NER'S REPRESENTATIVE)	CERTIFICATION
The property owner or owner's authorized represen community-issued BFE) or Zone AO must sign here	ntative who comple e. The statements	etes Sections A, B, and E for in Sections A, B, and E are o	Zone A (without a FEMA-issued or correct to the best of my knowledge.
Property Owner or Owner's Authorized Representa	tive's Name		
Address		City	State ZIP Code
Signature		Date	Telephone
Comments			
			Check here if attachments.

OMB No. 1660-0008 Expiration Date: November 30, 2022

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. 471 CONRAD ROAD			Policy Number:		
City VENICE	State Florida	ZIP Code 34293		Company NAIC Number	
		TY INFORMATION (OPTIC			
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	Certificate. Comple				
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)	en from other docu ed by law to certify	mentation that has been si elevation information. (Ind	igned ar licate the	nd sealed by a licensed surveyor, e source and date of the elevation	
G2. A community official completed Section or Zone AO.	ion E for a building	located in Zone A (without	a FEMA	A-issued or community-issued BFE)	
G3. The following information (Items G4–	-G10) is provided fo	or community floodplain ma	anageme	ent purposes.	
G4. Permit Number	G5. Date Permit	Issued		Date Certificate of Compliance/Occupancy Issued	
G7. This permit has been issued for:	] New Constructior	n 🗌 Substantial Improvem	nent		
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:	_		feet	meters Datum	
Local Official's Name		Title			
Community Name		Telephone			
Signature		Date			
Comments (including type of equipment and loo	cation, per C2(e), if	applicable)			
				Check here if attachments.	

## **ELEVATION CERTIFICATE**

## **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2022

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. 471 CONRAD ROAD			Policy Number:
City	State	ZIP Code	Company NAIC Number
VENICE	Florida	34293	

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.



## Photo One Caption

Clear Photo One



Photo Two Caption

FEMA Form 086-0-33 (12/19)

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. 471 CONRAD ROAD	Policy Number:
CityStateZIP CodeVENICEFlorida34293	Company NAIC Number
If submitting more photographs than will fit on the preceding page, affix the additional photogra with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "L photographs must show the foundation with representative examples of the flood openings or vents	eft Side View." When applicable,
Photo Three	
Photo Three	
Photo Three Caption	Clear Photo Three
Photo Four	
Photo Four	
Photo Four Caption	Clear Photo Four

**BUILDING PHOTOGRAPHS** 

Continuation Page

**ELEVATION CERTIFICATE** 

OMB No. 1660-0008 Expiration Date: November 30, 2022