U.S. DEPARTMENT OF HOMELAND SECURITY

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires July 31, 2015

Federal Emergency Management Agency

Important: Read the instructions on pages 1-9.

Natio	nal Flood Insurance Pro	gram	Important:	Read the in	structions on p	pages 1-9.	
			SECT	ION A - PROI	PERTY INFOR	MATION	For Insurance Company Use:
A1.	Building Owner's Name: Kimberly Brooker & Joyce Bailey				Policy Number		
A2.	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 81 Cornell Road				Company NAIC Number		
	City: Venice State: Florida ZIP Code 34293						
A3.	Property Description (I Lots 13768, 13769 &				escription, etc.) unty Parcel ID #0)470-12-00034 / 5	5 145 510 B1
A5. A6. A7.	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat. 27-01-51.4 Long82-23-56.8 Horizontal Datum: NAD 1927 NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 1B A8. For a building with a crawl space or enclosure(s), provide: a) Square footage of crawl space or enclosure(s) n/a sq ft b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade n/a sq in c) Total net area of flood openings? Yes No A9. For a building with an attached garage, provide: a) Square footage of attached garage 694 sq ft b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade 0 sq in d) Engineered flood openings? Yes No						
		SEC	TION B - FLOOD I	NSURANCE I	RATE MAP (FI	RM) INFORMATION	N
	NFIP Community Name Sarasota 125144	e & Community N	Number	B2. County Nar Sarasota	ne		B3. State Florida
B4	. Map/Panel Number 0344	B5. Suffix E	B6. FIRM Index Date 9/3/92	Effective	FIRM Panel e/Revised Date 9/3/92	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 17
B11.	Indicate the source of IFIS Profile Indicate elevation datules the building located Designation Date	⊠FIRM Im used for BFE in a Coastal Bar	Community Deter in Item B9: NO rier Resources Syste	mined GVD 1929 m (CBRS) area	☐Other (Describe	e)Other (Describe)) □Yes ⊠No
		SECTIO	N C - BUILDING E	LEVATION II	NFORMATION	(SURVEY REQUIR	(ED)
C2.	C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. 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 Sarasota Bounty BM #459-A Vertical Datum NGVD29 Indicate elevation datum used for the elevations in items a) through h) NGVD 1929 NAVD 1988 Other/Source: Datum used for building elevations must be the same as that used for the BFE.						
						Check the measure	ment used.
1	Do Top of the next high Bottom of the lowe by Attached garage (top) Lowest elevation of (Describe type of expression by Lowest adjacent (find) Highest adjacent (find)	her floor st horizontal stru op of slab) f machinery or e- quipment in Con nished) grade ne inished) grade ne	ment, crawl space, or ctural member (V Zo quipment servicing th nments) ext to building (LAG) ext to building (HAG) evation of deck or stai	nes only) e building	n/a [] 17.5 [] 16.6 [] 17.1		
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION							
Cer Title	s certification is to be signation. I certify that the derstand that any false Check here if comme check here if attach tifier's Name: David B. President	e information on statement may be ents are provided ments Shremshock	this Certificate repre- be punishable by fine on back of form. Company Name:	sents my best e or imprisonmen Were latitude a licensed land Shremshock Si	fforts to interpret at under 18 U.S. Cand longitude in Saurveyor? Y	the data available. Code, Section 1001. Section A provided by Section Section A provided by Section Se	Color Color
***************************************	ress: 5265 Alametos Te	errace	City: North Port			ZIP Code: 34288	
Sigr	nature		Date:	11/21/15	Telephone: 94	41-423-8875	The state of the s

15 145 510 B1

ELEVATION CERTIFICATE, page IMPORTANT: In these spaces, copy				For Insurance Company Use:		
Building Street Address (including Apt. 81 Cornell Road			lo.		Policy Number	
City: Venice	State: Florida	ZIP C	ode: 3429	93	Company NAIC Number	
CECTION	D - SURVEYOR, ENGINEER, O	D ADCUITECT	CEDTIE	ICATION (CONT	'INHED)	
Copy both sides of this Elevation Certif			npany, an	a (3) building owne	ÐF.	
Comments: Addition	al photos available upon request	FB 198 Pg 77				
Signature		Date: 11/21	/15			
SECTION E - BUILDING ELEVAT	TION INFORMATION (SURVEY N	NOT REQUIRED) FOR Z	ONE AO AND Z	ONE A (WITHOUT BFE)	
For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters. E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawl space, or enclosure) is feet meters above or below the HAG. b) Top of bottom floor (including basement, crawl space, or enclosure) is feet meters above or below the LAG. E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in 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 equipment servicing the building is feet meters above or below the HAG. E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.						
SECTION	F - PROPERTY OWNER (OR O	WNER'S REPR	ESENTA	ATIVE) CERTIFIC	CATION	
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.						
Property Owner's or Owner's Authorized David B. Shremshock	ed Representative's Name					
Address 5265 Alametos Terrace		City North Port		State Florida	ZIP Code 34288	
Signature	2	Date		Telephor	ne	
Comments		11/21/15		941-423	-8875	
See Section D						
					☐ Check here if attachment	
	SECTION G - COMMUNIT	and the second s				
The local official who is authorized by law or of Certificate. Complete the applicable item(s) a	rdinance to administer the community's floor nd sign below. Check the measurement us	odplain managemen sed in Items G8-G10	t ordinance In Puerto I	can complete Sectio Rico only, enter meter	ns A, B, C (or E), and G of this Elevation rs.	
The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.) A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.						
	ns G4G9.) is provided for community		7			
G4. Permit Number	G5. Date Permit Issued	G6.	. Date Ce	rtificate Of Complia	ance/Occupancy Issued	
G7. This permit has been issued for:		ntial Improvement				
G8. Elevation of as-built lowest floor (inc			<u></u>	meters (PR)	Datum	
9. BFE or (in Zone AO) depth of flooding at the building site						
Local Official's Name		Title				
Community Name		Telephor	ne			
Signature		Date				
Comments						
					Chack here if attachments	

Building Photographs See Instructions for Item A6.

ELEVATION CERTIFICATE, page 3

			For Insurance Company Use:
Building Street Address (including Ap 81 Cornell Road	t., Unit, Suite, and/or Bldg. No.) or P.O. Route and Bo	ox No.	Policy Number
City: Venice	State: Florida	ZIP Code: 34293	Company NAIC Number

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



Rear View

Building Photographs Continuation Page

	LEVATION CERTIFICATE, page 4 uilding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			
81 Cornell Road	3		,-	
City: Venice	State: Florida	ZIP Code: 34293	Company NAIC Number	
1.00				

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.



Left Side View



Right Side View