## Bup2001-16898

BUF 2001-18898

## 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 July 31, 2002

			DDODEDTI OL			Te
		SECTION	A - PROPERTY OV	WNER INFORMAT	ION	For Insurance Company Use:
BUILDING OWNER'S NAME THOMAS & PATTY MONAGHAN						Policy Number
291 CRANE ROAD	pt., Unit, Suite, and/o	). ROUTE AND BO	X NO.	Company NAIC Number		
СПҮ				STATE	ZIP C	
VENICE				EL .	3429	93
PROPERTY DESCRIPTION LOTS 4318 & 4319 S	SOUTH VENIC	E UNIT #17				,
BUILDING USE (e.g., Res	idential, Non-reside	ential, Addition, Acce	ssory, etc. Use a C	comments area, if ne	ecessary.)	
RESIDENTIAL	OPPONAL		OLEM DATE:		OUDOE	
LATITUDE/LONGITUDE ( ( ##° - ##' - ##.##" or ##.			ONTAL DATUM: 83	□ USGS C	OURCE: GPS (T) Quad Map GPS (T)	
	S	ECTION B - FLOO	D INSURANCE RA	TE MAP (FIRM) IN	FORMATION	
B1. NFIP COMMUNITY NAME		BER	B2. COUNTY NAME			B3. STATE
SARASOTA COUNTY, FLORI	DA 125144		SARASOTA			FLORIDA
B4. MAP AND PANEL	B5. SUFFIX		B7.F	IRM PANEL	1	B9. BASE FLOOD ELEVATION(S)
NUMBER	33.33.73	B6. FIRM INDEX DAT		E/REVISED DATE	B8. FLOOD ZONE(S	
125144 0341	E	SEPT. 3, 1992	SEP	T. 3, 1992	AE	11.0'
B10. Indicate the source of the	Base Flood Elevatio	n (BFE) data or base fl	ood depth entered in	B9.	1 4 4	in the second
		Community De		Other (Descri	ibe):	- 11 1170
B11. Indicate the elevation date	um used for the BFE	in B9: NGVD 192	9		Other (Describe):	
B12. Is the building located in a						
		TION C - BUILDIN	<del></del>			China
C1. Building elevations are bas			☐ Building Under C		Finished Construction	TONISM 94
				ZOTISUUCIOTI 🔼	Trinished constituction	
*A new Elevation Certifica	35			The street of th		MUAKE HON -
C2. Building Diagram Number		7.0	lar to the building for v	which this certificate is	being completed - see p	pages 6 and 7. If no diagram
accurately represents the b						
C3. Elevations – Zones A1-A3	10. 000	72 000				
						the datum used for the BFE in
Section B, convert the dat	tum to that used for th	ne BFE. Show field me	asurements and datu	m conversion calculati	ion. Use the space prov	ided or the Comments area of
Section D or Section G, a	as appropriate, to doc	cument the datum conv	rersion.			
Datum NGVD 1929 Cor	version/Comments_					
Elevation reference mark	used SARCO BM	Does the elev	ration reference mark	used appear on the F	IRM? ☐ Yes ☒ N	0
o a) Top of bottom floor (	including basement of	or endosure)	12.7	<u>ft.(m)</u>		
o b) Top of next higher fl	oor	W.	N/A ft.(m)	2 10	8	(4)
o c) Bottom of lowest ho		mber (V zones only)	N/A. ft.(m)		oossed	100 M
o d) Attached garage (to		The (* Zerice craj)	12.2 ft.(m)		de a	on y's on a gr
o e) Lowest elevation of		uinmont	12.2 1.(11)		and bra	h ).
			NIA A ()		Sea Sea	le lance M
	ng (Describe in a Co	mments area)	<u>NA</u> ft.(m)		License Number, Embos Seal, Signature, and Date	WAYNE C. MYERS
o f) Lowest adjacent (fini	the court of the c		11.5 ft.(m)	ls.	Sign	Professional Land Surveyor
o g) Highest adjacent (fir	The state of the s		12.2 ft.(m)		8	Florida Certificate No. 5012
AND THE RESERVE TO SERVE THE PROPERTY OF THE P	and the second s	nts) within 1 ft. above a			_	Date: JULY 2, 2002
o i) Total area of all pern	nanent openings (floo	od vents) insq. in.	(sq. am)			Vigit II
	S	ECTION D - SURVE	YOR, ENGINEER	OR ARCHITECT	CERTIFICATION	
This certification is to be						nformation
I certify that the informati						NO.
I understand that any fall		be punishable by tin	e or imprisonment u	inder 18 U.S. Code,		E042
CERTIFIER'S NAME. WA	INC C. MYERS				LICENSE NUMBER	
TITLE PROFESSIONAL	LAND SURVEYO	R		COMPANY NAME	BRITT SURVEYING,	INC.
ADDRESS				CITY	STA	
606 CYPRESS AVENUS				VENICE	FL	34292
SIGNATURE	2. 1	^		DATE JULY 2, 2002	TEL (941) 493-1	EPHONE 396
	~ ~/			JULI 2, 2002	(341) 133-1	-

	For Insurance Company Use:					
BUILDING STREET ADDRESS (Includi <b>291 CRANE ROAD</b>	ling Apt., Unit, Suite, and/or Bldg. No.) OR P.O.	ROUTE AND BOX NO.		Policy Number		
OTY VENICE		STATE FL	ZIP CODE 34293	Company NAIC Number		
	SECTION D - SURVEYOR, ENGIN	IEER, OR ARCHITECT CI	ERTIFICATION (CONTINUE	0)		
copy both sides of this Elevation Ce	ertificate for (1) community official, (2) insu	rance agent/company, and (3)	building owner.			
COMMENTS A/C PAD ELEV. = 12.1'						
				H 2m		
				Check here if attachment		
SECTION E - BUIL	DING ELEVATION INFORMATION	(SURVEY NOT REQUIRE	ED) FOR ZONE AO AND ZO			
r Zone AO and Zone A (without BF	E), complete Items E1 through E4. If the					
ection C must be completed.						
Building Diagram Number(Se     accurately represents the building	elect the building diagram most similar to l g, provide a sketch or photograph.)	he building for which this certifi	icate is being completed – see pa	ges 6 and 7. If no diagram		
	g, provide a sketch or photograph.) fing basement or enclosure) of the buildin	nis ft(m) in (cm) □	ahove or D below (check one	the highest adjacent grade. (Llee		
natural grade, if available).	my second to a decode you are balloning	10 _ IE(II) _ IE(GII) [	aured Libear (diex die	The highest adjacent grade. (Use		
<ol><li>For Building Diagrams 6-8 with or</li></ol>	penings (see page 7), the next higher floor	or elevated floor (elevation b)	of the building isft.(m)in.(	om) above the highest adjacent		
grade. Complete items C3.h and	d C3.i on front of form.					
4. For Zone AU only: If no flood dep	oth number is available, is the top of the b n. The local official must certify this inform	ation floor elevated in accordance	nce with the community's floodpla	in management ordinance?		
	SECTION F - PROPERTY OWNE		SENTATIVE) CERTIFICATION	NA .		
The property owner or owner's auth		. 5 2765				
ssued BFE) or Zone AO must sign	here. The statements in Sections A, B, C	and E are correct to the best	of my knowledge.	oca i Elivissoca a continuing		
	ER'S AUTHORIZED REPRESENTATIV	ES NAME TO SUC	EPT	10 - 1 2		
ADDRESS	OK	20 COUNTROS	STA	TE ZIP CODE		
SIGNATURE	10t 60	red representative who completes, Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community- re. The statements in Sections A, B, C, and E are correct to the best of my knowledge.  S AUTHORIZED REPRESENTATIVE'S NAME  CITYUS  STATE  ZIP CODE  TELEPHONE				
COMMENTS	OASU OPE	4				
	SAND PRO					
	Al-					
				Check here if attachment		
na local official who is authorized by	law or ordinance to administer the comm	MMUNITY INFORMATIO		100/5 10///5		
	itarry's) and sign holaw	and, a marchian management	to on the local complete cooler	on, b, o (or b), and o or this betalout		
ertificate. Complete the applicable in the information in Section C state or local law to certify elections. A community official complete.	was taken from other documentation that kevation information. (Indicate the source ted Section E for a building located in Zon ems G4-G9) is provided for community flo	and date of the elevation data ie A (without a FEMA-issued or	in the Comments area below.) r community-issued BFE) or Zone			
ertificate. Complete the applicable in the information in Section C state or local law to certify elections. A community official complete.	was taken from other documentation that devation information. (Indicate the source ted Section E for a building located in Zon	and date of the elevation data ie A (without a FEMA-issued or	in the Comments area below.) r community-issued BFE) or Zono s.			
ertificate. Complete the applicable in the information in Section C state or local law to certify election. A community official complete. The following information (tiels). This permit has been issued for the information for the information of the information	was taken from other documentation that devation information. (Indicate the source ted Section E for a building located in Zonems G4-G9) is provided for community flogs. DATE PERMIT ISSUED	and date of the elevation data le A (without a FEMA-issued or odplain management purposes	in the Comments area below.) r community-issued BFE) or Zono s.	AO.		
ertificate. Complete the applicable in the information in Section C state or local law to certify etc. A community official complete. The following information (tie.)  G4. PERMIT NUMBER  7. This permit has been issued for the second of the	was taken from other documentation that levation information. (Indicate the source ted Section E for a building located in Zonems G4-G9) is provided for community flogs. DATE PERMIT ISSUED  New Construction  Substantial (including basement) of the building is:	and date of the elevation data le A (without a FEMA-issued or odplain management purposes	in the Comments area below.) r community-issued BFE) or Zone s. G6. DATE CERTIFICATE OF CO	AO.		
ertificate. Complete the applicable in the information in Section C state or local law to certify elections. A community official complete. The following information (tiels). This permit has been issued for the section of as-built lowest floor (9. BFE or (in Zone AO) depth of floor.	was taken from other documentation that levation information. (Indicate the source ted Section E for a building located in Zonems G4-G9) is provided for community flogs. DATE PERMIT ISSUED  New Construction  Substantial (including basement) of the building is:	and date of the elevation data le A (without a FEMA-issued or odplain management purposes	in the Comments area below.) r community-issued BFE) or Zono s. G6. DATE CERTIFICATE OF CO	AO.  WPLIANCE/OCCUPANCY ISSUED		
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ertificate. Complete the applicable in the information in Section C state or local law to certify et a community official complete. The following information (tiese. This permit has been issued for: 8. Elevation of as-built lowest floor (9. BFE or (in Zone AO) depth of floor LOCAL OFFICIAL'S NAME	was taken from other documentation that levation information. (Indicate the source ted Section E for a building located in Zonems G4-G9) is provided for community flogs. DATE PERMIT ISSUED  New Construction  Substantial (including basement) of the building is:	and date of the elevation data le A (without a FEMA-issued or odplain management purposes  I Improvement	in the Comments area below.) r community-issued BFE) or Zond s.  G6. DATE CERTIFICATE OF CO	AO.  WPLIANCE/OCCUPANCY ISSUED  Datum:		
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