

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

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. 12488 DAVIE COURT			Policy Number:
City VENICE	State Florida	ZIP Code 34293	Company NAIC Number

SECTION G – COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

- G1. 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.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4–G10) is provided for community floodplain management purposes.

G4. Permit Number 19-116739 B1	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
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- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ 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 location, per C2(e), if applicable)

Check here if attachments.

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. Building Owner's Name RESOURCE CONSERVATION OF SARASOTA, LLC				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 12488 DAVIE COURT				Company NAIC Number:	
City VENICE		State Florida		ZIP Code 34293	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 1824, GRAND PALM, PHASE 2C, PLAT BOOK 52, PAGE 351, PID#0759060023					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>27°04'26.40"N</u> Long. <u>82°19'44.28"W</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 <u>1A</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>0</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u>					
c) Total net area of flood openings in A8.b <u>0</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>678</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>					
c) Total net area of flood openings in A9.b <u>0</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number SARASOTA COUNTY 125144			B2. County Name SARASOTA		B3. State Florida
B4. Map/Panel Number 12115C0355	B5. Suffix F	B6. FIRM Index Date 11/04/2016	B7. FIRM Panel Effective/ Revised Date 11/04/2016	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 7
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

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City VENICE	State Florida	ZIP Code 34293	Company NAIC Number		

SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

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: NGS B699 (SEE COMMENTS) Vertical Datum: NAVD 1988

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929 NAVD 1988 Other/Source: _____

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

- | | | | | | |
|---|-------|-------------------------------------|------|--------------------------|--------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) | 10. 6 | <input checked="" type="checkbox"/> | feet | <input type="checkbox"/> | meters |
| b) Top of the next higher floor | N/A | <input checked="" type="checkbox"/> | feet | <input type="checkbox"/> | meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | N/A | <input checked="" type="checkbox"/> | feet | <input type="checkbox"/> | meters |
| d) Attached garage (top of slab) | 10. 1 | <input checked="" type="checkbox"/> | feet | <input type="checkbox"/> | meters |
| e) Lowest elevation of machinery or equipment servicing the building
(Describe type of equipment and location in Comments) | 10. 1 | <input checked="" type="checkbox"/> | feet | <input type="checkbox"/> | meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | 10. 0 | <input checked="" type="checkbox"/> | feet | <input type="checkbox"/> | meters |
| g) Highest adjacent (finished) grade next to building (HAG) | 9. 6 | <input checked="" type="checkbox"/> | feet | <input type="checkbox"/> | meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support | 10. 4 | <input checked="" type="checkbox"/> | feet | <input type="checkbox"/> | meters |

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments.

Certifier's Name MICHAEL P ALLEN	License Number PSM 6822	Place Seal Here
Title OWNER		
Company Name BRIGHAM/ALLEN LAND SURVEYING		
Address 807 US HIGHWAY 41 BYPASS SOUTH, SUITE A		
City VENICE	State Florida	
Signature 	Date 09/24/2019	Telephone (941) 493-4430

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 and location, per C2(e), if applicable)
 A5 SOURCE OF LAT/LONG IS HAND HELD GPS USING A CONVERSION APP (GPS TEST). C2 BENCH MARK 9.16 NAVD88 CONVERTED TO 10.27 NGVD29 USING 1.11 CONVERSION FACTOR AS PER VERTCON SOFTWARE FROM NOAA. C2(a-h) ELEVATIONS CONVERTED FROM NGVD29 TO NAVD88 USING THE ABOVE CONVERSION FACTOR. C2E AC IS LOCATED ON THE RIGHT SIDE OF HOUSE.

OWNER PART - These spaces apply for the entire building information from Section A.

Building Name: DAVID COURT
 Address: 13001 Highway 41, Bay Area, South, Suite A
 City: Florida State: FL Zip: 32408
 Company Name: DAVID COURT

SECTION C - BUILDING ELEVATION INFORMATION (NEVER REPEATED)

1. Elevation elevations based on: Mean Sea Level (MSL) Highest Adjacent Finished Grade (HAFG) Lowest Adjacent Finished Grade (LAFG)

2. Elevation - Zone A1-A30, A6, A11, A12, A13, A14, A15, A16, A17, A18, A19, A20, A21, A22, A23, A24, A25, A26, A27, A28, A29, A30. In Zone A1, the elevation is based on the datum established in Section A.

3. Elevation - Zone B1-B30. In Zone B1, the elevation is based on the datum established in Section A.

4. Elevation - Zone C1-C30. In Zone C1, the elevation is based on the datum established in Section A.

5. Elevation - Zone D1-D30. In Zone D1, the elevation is based on the datum established in Section A.

6. Elevation - Zone E1-E30. In Zone E1, the elevation is based on the datum established in Section A.

7. Elevation - Zone F1-F30. In Zone F1, the elevation is based on the datum established in Section A.

8. Elevation - Zone G1-G30. In Zone G1, the elevation is based on the datum established in Section A.

9. Elevation - Zone H1-H30. In Zone H1, the elevation is based on the datum established in Section A.

10. Elevation - Zone I1-I30. In Zone I1, the elevation is based on the datum established in Section A.

11. Elevation - Zone J1-J30. In Zone J1, the elevation is based on the datum established in Section A.

12. Elevation - Zone K1-K30. In Zone K1, the elevation is based on the datum established in Section A.

13. Elevation - Zone L1-L30. In Zone L1, the elevation is based on the datum established in Section A.

14. Elevation - Zone M1-M30. In Zone M1, the elevation is based on the datum established in Section A.

15. Elevation - Zone N1-N30. In Zone N1, the elevation is based on the datum established in Section A.

16. Elevation - Zone O1-O30. In Zone O1, the elevation is based on the datum established in Section A.

17. Elevation - Zone P1-P30. In Zone P1, the elevation is based on the datum established in Section A.

18. Elevation - Zone Q1-Q30. In Zone Q1, the elevation is based on the datum established in Section A.

19. Elevation - Zone R1-R30. In Zone R1, the elevation is based on the datum established in Section A.

20. Elevation - Zone S1-S30. In Zone S1, the elevation is based on the datum established in Section A.

21. Elevation - Zone T1-T30. In Zone T1, the elevation is based on the datum established in Section A.

22. Elevation - Zone U1-U30. In Zone U1, the elevation is based on the datum established in Section A.

23. Elevation - Zone V1-V30. In Zone V1, the elevation is based on the datum established in Section A.

24. Elevation - Zone W1-W30. In Zone W1, the elevation is based on the datum established in Section A.

25. Elevation - Zone X1-X30. In Zone X1, the elevation is based on the datum established in Section A.

26. Elevation - Zone Y1-Y30. In Zone Y1, the elevation is based on the datum established in Section A.

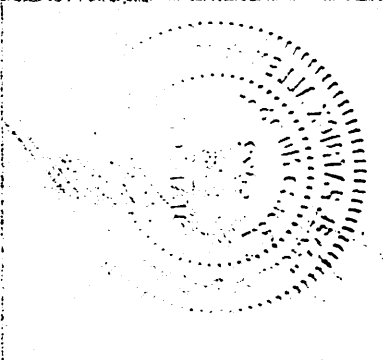
27. Elevation - Zone Z1-Z30. In Zone Z1, the elevation is based on the datum established in Section A.

SECTION B - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

I, the undersigned, being a duly licensed Surveyor, Engineer, or Architect, certify that the information furnished on this certificate is true and correct to the best of my knowledge and belief, and that I am a duly licensed Surveyor, Engineer, or Architect under the laws of the State of Florida.

My signature and the seal of this profession are hereby placed on this certificate.

Signature: Michael Allen
 Title: OWNER
 Company Name: BRIGHTWELL LAND SURVEYING
 Address: 13001 Highway 41, Bay Area, South, Suite A
 City: Florida State: FL Zip: 32408

Professional Seal: 

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SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE 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, crawlspace, or enclosure) is _____ . _____ feet meters above or below the HAG.
- b) Top of bottom floor (including basement, crawlspace, 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 1–2 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 OWNER'S REPRESENTATIVE) CERTIFICATION

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 or Owner's Authorized Representative's Name

Address _____ City _____ State _____ ZIP Code _____

Signature _____ Date _____ Telephone _____

Comments

Check here if attachments.

BUILDING PHOTOGRAPHS

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See Instructions for Item A6.

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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

Photo One Caption FRONT 9/24/19



Photo Two

Photo Two Caption REAR 9/24/19

BUILDING PHOTOGRAPHS

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Continuation Page

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City VENICE	State Florida	ZIP Code 34293	Company NAIC Number

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.

Photo One

Photo One

Photo One Caption

Photo Two

Photo Two

Photo Two Caption