

ELEVATION CERTIFICATE

82835EC

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 GERALD J. CASE AND JANE CASE				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 709 TREASURE BOAT WAY				Company NAIC Number:	
City SIESTA KEY		State FLORIDA		ZIP Code 34242	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PARCEL ID 0081060028					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>27.28088951</u> Long. <u>-82.55640411</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>1B</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>N/A</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>676</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 12115C-0143	B5. Suffix F	B6. FIRM Index Date 11/4/2016	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) g
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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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.			Policy Number:
709 TREASURE BOAT WAY			Company NAIC Number
City	State	ZIP Code	
SIESTA KEY	FLORIDA	34242	

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: (GPS) Y 700 ; DL1799 ; 2.70 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) _____ 5. 89 _____ feet meters
- b) Top of the next higher floor _____ N/A. _____ feet meters
- c) Bottom of the lowest horizontal structural member (V Zones only) _____ N/A. _____ feet meters
- d) Attached garage (top of slab) _____ 4. 80 _____ feet meters
- e) Lowest elevation of machinery or equipment servicing the building
 (Describe type of equipment and location in Comments) _____ 4. 81 _____ feet meters
- f) Lowest adjacent (finished) grade next to building (LAG) _____ 3. 91 _____ feet meters
- g) Highest adjacent (finished) grade next to building (HAG) _____ 6. 21 _____ feet meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____ N/A. _____ feet 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	License Number	<small>I HEREBY CERTIFY THAT THE SUBJECT OF THE HEREON DESCRIBED PROPERTY WAS PREPARED UNDER MY CLOSE SUPERVISION AND MEETS THE STANDARDS OF PRACTICE SET FORTH IN THE FLORIDA BOARD OF PROFESSIONAL SURVEYORS AND MAPPERS CHAPTER 471.009 THROUGH 471.015, FLORIDA ADMINISTRATIVE CODE, SUBJECT TO CHAPTER 471.007.</small>  <small>STATE OF FLORIDA CERTIFICATE OF LICENSE NO. 5144 JON SHOEMAKER, P.S. 407-951-3425 OFFICE, 407-528-5433 (FAX), 1-877-756-8122 NOT VALID WITHOUT SIGNATURE AND RAISED SEAL OR ELECTRONIC SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER</small>
JON SHOEMAKER	5144	
Title		
PROFESSIONAL SURVEYOR AND MAPPER		
Company Name		
FIRST CHOICE SURVEYING, INC.		
Address		
PO BOX 470978		
City	State	ZIP Code
LAKE MONROE	FLORIDA	32747
Signature 	Date	Telephone
	7/12/2023	P: (407)951-3425

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)
 NOTE: C2.E = AC UNIT PAD.
 NOTE: THIS ELEVATION CERTIFICATE IS ONLY VALID FOR THE PERSON OR PERSONS NAMED ON THIS CERTIFICATE. THIS CERTIFICATE IS FOR FLOOD INSURANCE PURPOSES ONLY. THE INFORMATION ON THIS CERTIFICATE SHOULD NOT BE USED FOR CONSTRUCTION OR PLANNING.

CENTERLINE ROAD ELEVATION: 3.55

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City SIESTA KEY	State FLORIDA	ZIP Code 34242	Company NAIC Number

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. 82835EC

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City SIESTA KEY	State FLORIDA	ZIP Code 34242	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

Front View Date: 07/12/2023

Rear View Date: 07/12/2023



Right Side View

A picture of the property is unavailable.

Left Side View

Right Side View: 07/12/2023

Left Side View: