

ELEVATION CERTIFICATE

OMB No. Expires M

Important: Read the instructions on pages 1-9. #10 0139

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name _____ For Insurance Company _____
Policy Number _____

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
615 FARMHOUSE DRIVE _____ Company NAIC Number _____

City NORTH PORT State FLORIDA ZIP Code 34287

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
UNIT 591 HARBOR COVE MHP (PROPERTY ID # 0790-01-359)

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL

A5. Latitude/Longitude: Lat. 27°02.455N Long. 82°11.493W Horizontal Datum: NAD 1927

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number 5

A8. For a building with a crawlspace or enclosure(s):
a) Square footage of crawlspace or enclosure(s) 1866 sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A
c) Total net area of flood openings in A8.b N/A sq in
d) Engineered flood openings? Yes No

A9. For a building with an attached garage:
a) Square footage of attached garage 12
b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 12
c) Total net area of flood openings in A9.b 12
d) Engineered flood openings? Yes 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 <u>125144-0375</u>	B5. Suffix <u>D</u>	B6. FIRM Index Date <u>5/1/84</u>	B7. FIRM Panel Effective/Revised Date <u>5/1/84</u>	B8. Flood Zone(s) <u>A8</u>	B9. Base Flood Elevation AO, use base flood depth entered in Item B9. <u>3 FEET N</u>
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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 (Describe) _____

B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?
Designation Date _____ CBRS OPA Yes No

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 Item below according to the building diagram specified in Item A7. Use the same datum as the BFE.
Benchmark Utilized 10 - HARBOR COVE Vertical Datum NGVD 1929
Conversion/Comments _____

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>9.0</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>N/A</u> <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u> <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>N/A</u> <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>9.2</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG)	<u>3.8</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG)	<u>5.5</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>5.5</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)

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.

Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Certifier's Name MELVIN HATTON License Number PLS # 5109

Title PROFESSIONAL SURVEYOR & MAPPER Company Name MELVIN HATTON PLS, INC.

Address 2218B GASLINE ROAD, PORT CHARLOTTE, FLORIDA 33952 State FLORIDA ZIP Code 33952

Signature [Signature] Date 06/22/20 Telephone (239) 450-9949

... these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. # 615 FAIRMOUNT DRIVE For Insurance Policy Number

City NORTH PORT State FLORIDA ZIP Code 34287 Company Name

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments

a) FINISH FLOOR g) HIGH GROUND

e) A/C PAD h) LOW GROUND AT STE

f) LOW GROUND

Signature [Signature] Date 6/22/2010 Check

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (W)

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 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 grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below
 - b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below
- 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 (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 floodpl 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 commu 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 Representative's Name _____

Address _____ City _____ State _____ ZIP Code _____

Signature _____ Date _____ Telephone _____

Comments _____

SECTION G - COMMUNITY INFORMATION (OPTIONAL) Check here

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9.

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, 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
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. Permit Number _____ G5. Date Permit Issued _____ G6. Date Certificate Of Compliance/Occupancy Issu _____

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 (PR) Datum _____

G9. BFE or (in Zone AO) depth of flooding at the building site _____ feet meters (PR) Datum _____

G10. Community's design flood elevation _____ feet meters (PR) Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments _____