ederal Emergency Manageme	ent Agency		W.OLIXIII IOA		Expires February 28, 2009
ational Flood Insurance Progr	ram	Important: Read th			7-710201
4 District O and M	Miles III	SECTION A - F	PROPERTY INFORM	ATION	For Insurance Company Use:
1. Building Owner's Name	Policy Number				
2. Building Street Address 4333 H	Company NAIC Number				
City SARP	SOTA		State	RIDA	ZIP Code
Property Description (Lo	t and Block Numbers	s, Tax Parcel Number, Leg	al Description, etc.)		
LOT 3 E NOT	TH 10 FE	EL OF LOT	3 E. 2' BOA	DS SUB	OF BLOCK A
4. Building Use (e.g., Resid	lential, Non-Residen	tial, Addition, Accessory,	etc.) RESIDEN		
 Latitude/Longitude: Lat. Attach at least 2 photogr 	aphs of the building	if the Certificate is being u	sed to obtain flood insur	Horizontal D	atum: NAD 1927 NAD 19
Building Diagram Number	er 8				
For a building with a crav Square footage of cr No. of permanent floenclosure(s) walls with the color of the color of the color of the craw of the cr	awl space or enclose od openings in the c thin 1.0 foot above a	ure(s) 1977 s	sqft a) Sqi b) No wa	uare footage of atta . of permanent flood lis within 1.0 foot ab	ched garage, provide: ched garage
	SECTION	B - FLOOD INSURAN	CE RATE MAP (FIRM	M) INFORMATIO	V
1. NFIP Community Name 8				.,	B3. State
SARASOTA CO		5144	SARASO	ATC	FLORIDA
B4. Map/Panel Number	B5. Suffix B		B7. FIRM Panel	B8. Flood	89. Base Flood Elevation(s) (Zo
25144 0141	0	1 0 0 0	ective/Revised Date 5 · (· 84	Zone(s)	AO, use base flood depth)
). Indicate the source of the	Base Flood Elevati		od depth entered in Item	B9.	11.0
☐ FIS Profile	IJRM ☐ Comr	nunity Determined	Other (Describe)	100,050.E	
I. Indicate elevation datum	used for BFE in Item	n B9: NGVD 1929	NAVD 1988	Other (Describe)	
2. Is the building located in Designation Date	a Coastal Barrier Re	sources System (CBRS):	area or Otherwise Prote BRS	cted Area (OPA)?	Yes No
			Internal Section		
	SECTION C	BUILDING ELEVATION	N INFORMATION (S	URVEY REQUIR	ED)
below according to the bulbenchmark Utilized	te will be required wi 0, AE, AH, A (with B Ilding diagram specif	ica in item At.	Building Under Co. Ilding is complete. BFE), AR, AR/A, AR/AE	, AR/A1-A30, AR/AI	Finished Construction i, AR/AO. Complete Items C2.a-g
Conversion/Comments					
				Check the measurer	nent used.
a) Top of bottom floor (inb) Top of the next higher	ncluding basement, or	crawl space, or enclosure	floor) <u>43</u>	Seet met	ers (Puerto Rico anly)
		member (V Zones only)	N.A.		ers (Puerto Rico only)
d) Attached garage (top	ers (Puerto Rico only) ers (Puerto Rico only)				
e) Lowest elevation of m (Describe type of equ	nachinery or equipment	ent servicing the building	AC 12.1		ers (Puerto Rico only)
f) Lowest adjacent (finis		9	4 81	Z feet ☐ met	om (Duanta Dian anta)
g) Highest adjacent (fini					ers (Puerto Rico only) ers (Puerto Rico only)
	SECTIONS	SUBVEYOR THE			
nis certification is to be signe	ed and sealed by a li	- SURVEYOR, ENGINE	EER, OR ARCHITEC	TCERTIFICATIO	N
understand that any false st	atement may be pun	eruiicate represents my be ishable by fine or imprison	est afforts to interpret the	a data available	on Palles Wing
Check here if comments a	are provided on back	c of form.			150 0Z 07 07 07 07 07 07 07 07 07 07 07 07 07
PODN	EJ W. MC	KINZIE	License Number	-L. # 4780	
itle OWNER	Соп	npany Name	IL NOVINCE		
ddress	City		State	ZIP Code	
AAII BEE RICE	E ROAD #4	ZI SARASOTI	Telephone C	342	33
- Jegw.r	very o	8.62.	07 941	228.478	00
MA Form 81-31, Februar	v 2008	Saa	side for continuation		
	, =====	OUR INVERSE	CONTRACTOR TOT MINE		Donlagge all acquique adili

PORTANT: In these space	For Insurance Company Use:			
iliding Street Address (includin	g Apt., Unit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.		Policy Number
SARASOTA	State	FLORIDA	ZIP Code	. Company NAIC Number
SEC	TION D - SURVEYOR, ENGINEER		RTIFICATION (CO	NTINUED)
THE RESERVE AND ADDRESS OF THE PARTY OF THE	Certificate for (1) community official, (2	THE RESIDENCE OF THE PARTY.		
mments	CZ(e) REFER	S A	C UNIT	
TIEM	CC(E) REFER	<u> </u>		
gnature	•••	Date		
I-SALW.V		08.	02.07	Check here if attachments
	ELEVATION INFORMATION (SU			
or Zones AO and A (without B	FE), complete Items E1-E5. If the Cert atural grade, if available. Check the me	ficate is intended to suppeasurement used. In Pue	ort a LOMA or LOMR- erto Rico only, enter me	F request, complete Sections A, B, eters.
1. Provide elevation informa	tion for the following and check the app	ropriate boxes to show w	hether the elevation is	above or below the highest adjacent
grade (HAG) and the lower	est adjacent grade (LAG).	Control of the Contro	feet meters	
a) Top of bottom floor (inc	cluding basement, crawl space, or enclo Eluding basement, crawl space, or enclo			above or below the LAG.
For Building Diagrams 6-	with permanent flood openings provid	ed in Section A Items 8 a	nd/or 9 (see page 8 of	Instructions), the next higher floor
(elevation C2.b in the dia	grams) of the building is	feet meters _	above or below	the HAG.
3. Attached garage (top of s		iters above or to		above or Delow the HAG
 Top of platform of maching Zone AO only: If no floor 	ery and/or equipment servicing the build depth number is available, is the top o	f the bottom floor elevate	d in accordance with th	ne community's floodplain management
ordinance? Yes	No Unknown. The local official m	nust certify this informatio	n in Section G.	
SE	CTION F - PROPERTY OWNER (C	OR OWNER'S REPRE	SENTATIVE) CERT	TIFICATION
he property owner or owner's	authorized representative who complet	es Sections A, B, and E f	or Zone A (without a F	EMA-issued or community-issued BFE)
r Zone AO must sign here. The	ne statements in Sections A, B, and E a	re correct to the best of n	ny knowledgė.	
roperty Owner's or Owner's A	uthorized Representative's Name			
ddress		City	State	ZIP Code
Signature		Date	Telep	hone
Comments				
	Ken Lander et al.			Check here if attachme
	SECTION G - COMM	MUNITY INFORMATIO	N (OPTIONAL)	U GROOK HOLD II GROOM
e local official who is authoriz	ed by law or ordinance to administer the	e community's floodplain	management ordinanc	e can complete Sections A, B, C (or E).
d G of this Elevation Certifica	te. Complete the applicable item(s) and	sign below. Check the	measurement used in I	Items G8. and G9.
1. The information in Se	ction C was taken from other document	ation that has been signe	d and sealed by a licer	nsed surveyor, engineer, or architect w
	o certify elevation information. (Indicate			
	completed Section E for a building locat			Inity-Issued BPE) of Zone AO.
3. L The following informa	tion (Items G4G9.) is provided for con	munity floodplain manag	ement purposes.	
G4. Permit Number	G5. Date Permit Issued	G6.	Date Certificate Of Co	ompliance/Occupancy Issued
7. This permit hás been issue	d for. New Construction	Substantial Improvemen	t	
	floor (including basement) of the building	ng:	feet meter	s (PR) Datum
7, 00	of flooding at the building site:		☐ feet ☐ meter	s (PR) Datum
Local Official's Name		Title		
Community Name		Telephor	le la	
Signature		Date		
Comments				
				Check here if attachr
				L Check here it attacht