### U.S. DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency National Flood Insurance Program

### **ELEVATION CERTIFICATE**

12-1165868 OMB No. 1660-0008

Important: Read the instructions on pages 1-9.

Expires March 31, 2012

$\alpha$	Building Owner's Name Teresa A. Kersey	SECTION A - PR	OPERTY INFORI	MATION	For Insurance Company Use:
				LINEY K.I.	Policy Number
77	Building Street Address (including Apt., Unit, S 72 HOLIDAY DRIVE	uite, and/or Bldg. No.) or P.	O. Route and Box I	No.	Company NAIC Number
	City SARASOTA State FL ZIP Code 342				o mpany to do Hambel
A3.	Property Description (Lot and Block Numbers, 10, BLOCK A, HOLIDAY HARBOR PID# 0125-	Tax Parcel Number, Legal I	Description, etc.)		
		03-0054			
A6. A7.	Building Use (e.g., Residential, Non-Residential Latitude/Longitude: Lat. 27°14'21"N Long. 82° Attach at least 2 photographs of the building if the Building Diagram Number 1A  For a building with a crawlspace or enclosure(s) a) Square footage of crawlspace or enclosure(b) No. of permanent flood openings in the crawled enclosure(s) within 1.0 foot above adjacent (c) Total net area of flood openings: \times Yes	30'29"W  he Certificate is being used ): s)	A9. For a a) Sq b) No wit c) To	building with an atta juare footage of atta o of permanent flood thin 1.0 foot above a	ched garage: ched garage 640 sq ft d openings in the attached garage djacent grade 6 openings in A9.b 1200 sq in
	SECTION B	- FLOOD INSURANCE	RATE MAP (FIRE	M) INFORMATION	Yes No
B1. I	NEIP Community Name & Community Number	B2. County Nar			
OAN	ASOTA COUNTY 125144	SARASOTA			B3, State FLORIDA
	125144 0207 E	Date Effective 9/3/92	FIRM Panel e/Revised Date 9/3/92	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zor AO, use base flood depth)
10.	ndicate the source of the Base Flood Elevation (	BEE) data or book flood do	51515Z	AE	12
	☐ FIS Profile   ☐ FIRM   ☐ Comm		Double (Describe)		A STATE OF THE PARTY OF THE PAR
	SECTION C BU	III DINO EL ELATIONO			
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Building Street Address (inclu 7772 HOLIDAY DRIVE	paces, copy the corresponding Apt., Unit, Suite, and/or Bid	a. No.) or P.O. Pout	section A.		For Insurance Company Use:		
City SARASOTA State FL Z	IP Code 24004		SOX No.		Policy Number		
					Company NAIC Number		
SE	CTION D - SURVEYOR, EN	IGINEER OR ARCHITE	07.055				
Copy both sides of this Elevati	SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)  Deprive the sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.						
FLOOD VENTS	CAL PANEL - 12.2; A/C - 12.7 5; STAIR\$ 7.6 SMARTIVENTS MODEL 1540-52	20		i) building owne	er.		
Signature		1//20/fg					
SECTION E - BUILDING	G ELEVATION INFORMATION	ON (SUBVEY NOT DES			☐ Check here if attachm		
For Zones AO and A (without E	FE), complete items E1-E5. If the atural grade, if available. Check	TOURVET NOT REQ	UIRED) FOR Z	ONE AO ANI	ZONE A (WITHOUT BFE)		
grade (HAG) and the lowe a) Top of bottom floor (inc b) Top of bottom floor (inc) E2. For Building Diagrams 6-9 (elevation C2.b in the diag E3. Attached garage (top of size E4. Top of platform of machine E5. Zone AO only: If no flood of ordinance?  Yes    SEC	ast adjacent grade (LAG). Iuding basement, crawlspace, or Iuding basement, crawlspace, or with permanent flood openings rams) of the building is  ab) is feet ry and/or equipment servicing the depth number is available, is the No Unknown. The local officent	enclosure) is enclosure) is enclosure) is enclosure) is provided in Section A Items feet meters meters above or building is top of the bottom floor elevicial must certify this informa	wwhether the el	evation is above the meters above a pages 8-9 of Install below the HAG.  Bers above on the company above the company above the company above the company are above to the c	e or below the highest adjacent ve or  below the HAG. ve or  below the LAG. structions), the next higher floor G.  r  below the HAG. munity's floodplain management		
Zone AO must sign here. The	Statements in Continue 4 5	npletes Sections A, B, and E	for Zone A (with	out a FEMA-is	sued or community		
POILY OWNERS OF OWNER'S Auti		nest of the pest of	LILIV KNOWIAdaa		Josueu DEE		
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ddress gnature	Name S Name	City Date		State Telephone	ZIP Code		
gnature mments	SECTION G - COM	City  Date  MMUNITY INFORMATIO	N (OPTIONAL	State Telephone	ZIP Code  ☐ Check here if attachmen		
oddress  gnature  mments  local official who is authorized by G of this Elevation Certificate. C	SECTION G - CON	City Date  MMUNITY INFORMATIO the community's floodplain	N (OPTIONAL	State Telephone	ZIP Code  ZIP Code  ☐ Check here if attachmen		
ddress gnature comments  local official who is authorized by G of this Elevation Certificate. C The information in Section is authorized by law to cert A community official comple	SECTION G - COM y law or ordinance to administer complete the applicable item(s) a C was taken from other docume ify elevation information. (Indica eted Section E for a building loca tems G4-G9) is provided for com	City  Date  MMUNITY INFORMATIO the community's floodplain and sign below. Check the restriction that has been signed the the source and date of the ated in Zone A (without a Fernmunity floodplain managements)	N (OPTIONAL management ord neasurement used and sealed by a le elevation data MA-issued or conent purposes.	State Telephone inance can cond in Items G8 and in Items G8 an	ZIP Code  ☐ Check here if attachment  Deplete Sections A, B, C (or E),  and G9.  Eyor, engineer, or architect who ts area below.)  BFE) or Zone AO.		
ddress gnature comments  Gocal official who is authorized by Gof this Elevation Certificate. Complete is authorized by law to cert A community official complete is authorized by law to cert The following information (I	SECTION G - COME y law or ordinance to administer complete the applicable item(s) and C was taken from other docume ify elevation information. (Indicated Section E for a building locatems G4-G9) is provided for come G5. Date Permit Issued	City  Date  MMUNITY INFORMATIO the community's floodplain and sign below. Check the restriction that has been signed the the source and date of the ated in Zone A (without a Fernmunity floodplain managements)	N (OPTIONAL management ord neasurement used and sealed by a le elevation data MA-issued or conent purposes.	State Telephone inance can cond in Items G8 and in Items G8 an	ZIP Code  ☐ Check here if attachment  Deplete Sections A, B, C (or E),  and G9.  Eyor, engineer, or architect who ts area below.)  BFE) or Zone AO.		
ddress gnature comments  Cocal official who is authorized by Gof this Elevation Certificate. Comments  The information in Section is authorized by law to cert A community official completion of the following information (I Permit Number	SECTION G - COM  y law or ordinance to administer  complete the applicable item(s) a  C was taken from other docume ify elevation information. (Indica eted Section E for a building loca tems G4-G9) is provided for com  G5. Date Permit Issued	City  Date  MMUNITY INFORMATIO the community's floodplain ind sign below. Check the rintation that has been signed te the source and date of the ated in Zone A (without a Fermunity floodplain management)  G6. I	M (OPTIONAL management ord neasurement used and sealed by a see elevation data EMA-issued or content purposes.	State Telephone inance can coned in Items G8 at licensed survein the Commentum in the Commentum in the Compliance/Off Complian	ZIP Code  Check here if attachment plete Sections A, B, C (or E), and G9.		
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## Building Photographs See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7772 HOLIDAY DR.	For Insurance Company Use: Policy Number
City SARASOTA State FL ZIP Code 34231	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page on the

#### FRONT VIEW 11/20/12

#### **REAR VIEW 11/20/12**



**LEFT SIDE VIEW 11/20/12** 

RIGHT SIDE VIEW 11/20/12



# Building Photographs Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	For Insurance Company Use: Policy Number
City SARASOTA State FL ZIP Code 34231	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."

#### **SMART VENT 1540-520**

