

Bcos-4881 FIN  
403724

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM  
**ELEVATION CERTIFICATE**

O.M.B. No. 3067-0077  
Expires December 31, 2005

Important: Read the instructions on pages 1-7.

<b>SECTION A - PROPERTY OWNER INFORMATION</b>			For Insurance Company Use:	
BUILDING OWNER'S NAME J2 Solutions, Inc.			Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 521 Lewis Street			Company NAIC Number	
CITY Englewood	STATE FL	ZIP CODE		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 5, Usher Subdivision				
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential				
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###" or ##.#####)		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983		SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____

**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Sarasota County - 125144		B2. COUNTY NAME Sarasota		B3. STATE FL	
B4. MAP AND PANEL NUMBER 125144-0451	B5. SUFFIX D	B6. FIRM INDEX DATE 8/3/92	B7. FIRM PANEL EFFECTIVE/REVISED DATE 5/01/84	B8. FLOOD ZONE(S) A12	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 12.0

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.  
 FIS Profile  FIRM  Community Determined  Other (Describe): \_\_\_\_\_  
 B11. Indicate the elevation datum used for the BFE in 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)?  Yes  No Designation Date \_\_\_\_\_

**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. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)  
 C3. 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 C3-a-i below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.  
 Datum NGVD29 Conversion/Comments \_\_\_\_\_  
 Elevation reference mark used Local B.M. Does the elevation reference mark used appear on the FIRM?  Yes  No

a) Top of bottom floor (including basement or enclosure)	14. 16 ft. (●)
b) Top of next higher floor	NA. ___ ft. (m)
c) Bottom of lowest horizontal structural member (V zones only)	NA. ___ ft. (m)
d) Attached garage (top of slab)	13. 81 ft. (●)
e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area)	13. 75 ft. (●)
f) Lowest adjacent (finished) grade (LAG)	11. 50 ft. (●)
g) Highest adjacent (finished) grade (HAG)	13. 20 ft. (●)
h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	NA
i) Total area of all permanent openings (flood vents) in C3.h	NA sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

*Bruce Caldwell*  
10/31/05 #5584

**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 in Sections A, B, and C 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.

CERTIFIER'S NAME	Bruce Caldwell	LICENSE NUMBER	PSM#5584
TITLE	Florida Professional Surveyor & Mapper	COMPANY NAME	Caldwell Land Surveying, Inc.
ADDRESS	909 South Tamiami Trail	CITY	Nokomis
		STATE	FL
		ZIP CODE	34275
SIGNATURE	<i>Bruce Caldwell</i>	DATE	10/31/05
		TELEPHONE	941-488-0121