## U.S. DEPARTMENT OF HOMELAND SECURITY

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008

Federal Emergency Management Agency National Flood Insurance Program

Important: Read the instructions on pages 1-8.

Expires February 28, 2009 08 840 778 BI

						00 10 10
File # 08-10-11 SECTION A - PROPERTY INFORMATION						For Insurance Company Use:
A1. Building Owner's Nam Frank Nuzzi	e					Policy Number
12. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 913 Loreto Court						Company NAIC Number
City			State		ZIP C	
Nokomis A3. Property Description (	l ot and Block Nu	mhere Tay Parcel Nu	FL Page Description	n etc)	342	/5
Lot 16 & The West ½			mber, Legal Description		<del> </del>	
A4. Building Use (e.g., Re	sidential, Non-Re	sidential, Addition, Ac	cessory, etc.) R	ESIDENTIAL MANU	JEACTURED I	HOME
A5. Latitude/Longitude: La			rizontal Datum: 🔲 NA		183	
A6. Attach at least 2 photo		ilding if the Certificate	is being used to obtain	flood insurance.		
A7. Building Diagram Nun A8. For a building with a c		clocure(e) provide:		AO For a building y	with an attache	nd damae intovide:
a) Square footage of			<u>VA</u> sq ft	A9. For a building v a) Square foo		
b) No. of permanent	flood openings in	the crawl space or	•	b) No. of pem	nanent flood o	penings in the attached garage
		ove adjacent grade N				e adjacent grade <u>N/A</u>
c) Total net area of f	the state of the s	Market Market Street and the second section of the second section of the	VA sq in ISURANCE RATE!	THE RESIDENCE OF THE PARTY OF T	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN	enings in A9.b NA sq in
B1. NFIP Community Nam	e & Community N	lumber   E	32. County Name		B3	3. State
125144 - SARASOTA			SARASOTA COUN	ПΥ		FLORIDA
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM P	I .	8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
0327	D	9-3-92	5-1-84		A12	11
B10. Indicate the source of	the Base Flood B	levation (BFE) data o	r base flood depth ent	ered in Item B9.		
FIS Profile	⊠ FIRM	☐ Community Deter	mined Othe	er (Describe)		
B11. Indicate elevation dat	um used for BFE	in Item B9: 🛛 NO	SVD 1929 🔲 NAV	D 1988 🔲 Oth	er (Describe) _	<u> </u>
B12. Is the building located				rwise Protected Are	ea (OPA)?	ີ Yes ເ⊠ືNo
Designation Date			_ CBRS	OPA		
	SECTIO	N C - BUILDING E	LEVATION INFORI	MATION (SURVE	Y REQUIRE	D)
C1. Building elevations are	based on:	Construction Drawings	s* Buildin	g Under Construction	on*	☑ Finished Construction
*A new Elevation Certif C2. Elevations – Zones A1 below according to the	-A30, AE, AH, A (	with BFE), VE, V1-V3	-	•	-A30, AR/AH,	AR/AO. Complete Items C2.a-g
Benchmark Utilized _U		-	Ve	rtical Datum ELE	VATION = 10	.40 ' (NGVD 1929)
Conversion/Comments				9,		
	-			Check tl	he measureme	ent used.
a) Top of bottom floo	or (including base)	ment, crawl space, or	enclosure floor) <u>13. 40</u>		⊠ feet [	meters (Puerto Rico only)
b) Top of the next his	gher floor		<u>N/A</u>			meters (Puerto Rico only)
c) Bottom of the low	est horizontal stru	ctural member (V Zon	es only) <u>12, 04</u>	:		meters (Puerto Rico only)
d) Attached garage (	top of slab)		<u>N/A</u>	<u></u>		meters (Puerto Rico only)
e) Lowest elevation (Describe type of		quipment servicing the nments)	e building <u>11. 11</u>		⊠ feet[	meters (Puerto Rico only)
f) Lowest adjacent (	finished) grade (L	AG)	<u>9</u> . <u>4</u>			meters (Puerto Rico only)
g) Highest adjacent	(finished) grade (l	HAG)	<u>10</u> . <u>3</u>		feet     ∫	meters (Puerto Rico only)
	SECTION	ON D - SURVEYOR	, ENGINEER, OR	ARCHITECT CER	TIFICATION	V S
This certification is to be s information. I certify that to I understand that any false.	he information on statement may b	this Certificate repres be punishable by fine o	ents my best efforts to	interpret the data a	vailable.	
Certifier's Name	e are provided or					
	s are provided or	Dack of form.	Licens	e Number		
ROBERT B. STRAYER, JR.	ls are provided or			e Number 4. # 5027	-(1	1/1/hay
Title		Company Name	P.S.M		(_/	Al May
			P.S.M		ode	ROBERT B. STRAYER, JR.
Title PROFESSIONAL LICENSED		Company Name STRAYER SURVEYING	P.S.M R MAPPING, INC.	A.#5027 ZIP C 342	Gode 293	ROBERT B. STRAYER, JR. P.S.M. #5027 1/5/09

IMPORTANT: In these spaces, co	For Insurance Company Use:		
Building Street Address (including Apt., U 913 Loreto Court	Jnit, Suite, and/or Bldg. No.) or P.O. Route and	Box No.	Policy Number
City Nokomis	State FL	ZIP Code 34275	Company NAIC Number
SECTION D	- SURVEYOR, ENGINEER, OR ARCHI	TECT CERTIFICATION (CO	NTINUED)
Copy both sides of this Elevation Certification	ate for (1) community official, (2) insurance ago	ent/company, and (3) building ov	vner.
	elevation of machinery servicing the building a	nd is at elevation 11.11'. The ele	evation of the bottom of the beams
under the manufactured home is at eleva	ition 12.04°.		
	/////		
Signature	Date		
-(11/6.76)	1/5/09		Check here if attachments
	ATION INFORMATION (SURVEY NOT R		
For Zones AO and A (without BFE), com and C. For Items E1-E4, use natural gra	nplete Items E1-E5. If the Certificate is intende ade, if available. Check the measurement use	ed to support a LOMA or LOMR- d. In Puerto Rico only, enter me	F request, complete Sections A, B, sters.
E1. Provide elevation information for the	ne following and check the appropriate boxes to	•	
grade (HAG) and the lowest adjact a) Top of bottom floor (including ba	ent grade (LAG). asement, crawl space, or enclosure) is	☐feet ☐ meters	☐above or ☐ below the HAG.
	asement, crawl space, or enclosure) is		above or below the LAG.
	rmanent flood openings provided in Section A		
	f the building is feet  me feet  meters  above o		ie HAG.
	or equipment servicing the building is	-	above or Delow the HAG.
E5. Zone AO only: If no flood depth no	umber is available, is the top of the bottom floo	r elevated in accordance with th	
	Unknown. The local official must certify this i		
	- PROPERTY OWNER (OR OWNER'S		
	d representative who completes Sections A, B ents in Sections A, B, and E are correct to the		EMA-issued or community-issued BFE)
Property Owner's or Owner's Authorized	Representative's Name		
Address	City	State	ZIP Code
Signature	Date	Teleph	one
Comments			
			Check here if attachments
	SECTION G - COMMUNITY INFOR	MATION (OPTIONAL)	
The local official who is authorized by law and G of this Elevation Certificate. Compl	or ordinance to administer the community's flo lete the applicable item(s) and sign below. Che	odplain management ordinance	can complete Sections A, B, C (or E), ems G8, and G9.
G1. The information in Section C wa	es taken from other documentation that has be evation information. (Indicate the source and o	en signed and sealed by a licens	sed surveyor, engineer, or architect who
_	Section E for a building located in Zone A (with		
	G4G9.) is provided for community floodplain		
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Con	npliance/Occupancy Issued
	G5. Date Permit Issued  New Construction		npliance/Occupancy Issued
	New Construction Substantial Imp		npliance/Occupancy Issued  Datum
G7. This permit has been issued for:	New Construction Substantial Implication Substantial Implication	provement	
G7. This permit has been issued for:  G8. Elevation of as-built lowest floor (inclu	New Construction Substantial Important Subst	provement  feet meters (PR)	Datum
G7. This permit has been issued for:  G8. Elevation of as-built lowest floor (inclu G9. BFE or (in Zone AO) depth of flooding	New Construction Substantial Important Subst	provement  feet meters (PR)  feet meters (PR)	Datum
G7. This permit has been issued for:  G8. Elevation of as-built lowest floor (inclu G9. BFE or (in Zone AO) depth of flooding Local Official's Name	New Construction Substantial Important Subst	provement feet meters (PR) feet meters (PR) tie	Datum
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## Building Photographs See Instructions for Item A6.

			For Insurance Company Use:
Building Street Address (inclu	Policy Number		
913 Loreto Court			
City	State	ZIP Code	Company NAIC Number
Nokomis	FL	34275	

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, following.





**RIGHT VIEW 12/31/08** 



**REAR VIEW 12/31/08** 



**LEFT VIEW 12/31/08**