U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1–9.

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

SEC	CTION A - PROPERTY	INFORI	MATION		FOR INSU	RANCE COMPANY USE
A1. Building Owner's Name Michael Steven Cavanaugh					Policy Num	ber:
A2. Building Street Address (in Box No. 7746 Holiday Drive	ncluding Apt., Unit, Suite	e, and/oi	r Bldg. No.) o	r P.O. Route and	Company N	IAIC Number:
City Sarasota			State Florida		ZIP Code 34231	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PID #0125030073; Lot 3, Block A, Holiday Harbor, Unit 1, PB 7, Pg 67, Public Records of Sarasota County, Florida						
A4. Building Use (e.g., Reside	ential, Non-Residential, <i>i</i>	Addition,	, Accessory,	etc.) RESIDEN	TIAL	
A5. Latitude/Longitude: Lat.	N027° 14' 24.24"	Long. W	/082° 30' 28.8	B5" Horizonta	l Datum: ☐ NAD	1927 × NAD 1983
A6. Attach at least 2 photogra	phs of the building if the	Certific	ate is being ເ	sed to obtain floo	d insurance.	
A7. Building Diagram Number	1A					
A8. For a building with a crawl	space or enclosure(s):					
a) Square footage of crav	vispace or enclosure(s)			N/A sq ft		
b) Number of permanent f	lood openings in the cra	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ade N/A
c) Total net area of flood of	openings in A8.b		N/A sq in	1		
d) Engineered flood open	ings? ☐ Yes ⊠ N	0				
A9. For a building with an attac	ched garage:					
a) Square footage of attac	ched garage		606.00 sq ft			
b) Number of permanent f	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A					
c) Total net area of flood of	ppenings in A9.b		N/A sq	in		
d) Engineered flood openi	ngs?	0				
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name &		NOUNA	B2. County	,	ORWATION	B3. State
Sarasota County 125144	Community Number		Sarasota			Florida
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	Effe	 RM Panel ective/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	Levation(s) e Base Flood Depth)
12115C0207 F	11-14-2016	11-14-2	vised Date 2016	AE	10	
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/Source:						
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🗵 No						
Designation Date: CBRS OPA						
			_ _			

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Building Street Address (including Apt., Unit, Suite, 7746 Holiday Drive	Policy Number:				
City Sarasota		P Code 231	Company NAIC Number		
SECTION C – BUILDIN	NG ELEVATION INFORMA	ATION (SURVEY RE	EQUIRED)		
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 Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: SRQ BM 112-A Vertical Datum: NAVD 1988 Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 NAVD 1988 Other/Source:					
Datum used for building elevations must be the		BFE.			
 a) Top of bottom floor (including basement, of b) Top of the next higher floor c) Bottom of the lowest horizontal structural red d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment (Describe type of equipment and location) 	member (V Zones only) ent servicing the building	or)	Check the measurement used. 11.3		
f) Lowest adjacent (finished) grade next to b	uilding (LAG)		4.8 X feet meters		
g) Highest adjacent (finished) grade next to b	ouilding (HAG)		9.5 × feet meters		
 h) Lowest adjacent grade at lowest elevation structural support 	of deck or stairs, including		N/A feet meters		
SECTION D - SURVE	EYOR, ENGINEER, OR A	RCHITECT CERTIFI	CATION		
This certification is to be signed and sealed by a la I certify that the information on this Certificate represent may be punishable by fine or imprisonn Were latitude and longitude in Section A provided	resents my best efforts to inc nent under 18 U.S. Code, S	terpret the data availa ection 1001. —	law to certify elevation information. able. I understand that any false Check here if attachments.		
Certifier's Name Walter J. Smith	License Number PSM #4807				
Title Professional Surveyor and Mapper			Place		
Company Name ESP Associates FL, INC.			Seal		
Address 518 13TH ST. W.			Here		
City Bradenton	State Florida	ZIP Code 34205			
Signature	Date	Telephone (941) 345-5451	Ext.		
Copy all pages of this Elevation Certificate and all at	tachments for (1) community	official, (2) insurance	agent/company, and (3) building owner.		
Comments (including type of equipment and location, per C2(e), if applicable) The purpose of this Partial Interim Elevation Certificate is to depict the first living floor elevation. Site BM based on Sarasota County Benchmark 112-A with a published Elevation of 8.91 feet (NAVD 1988). A9 b) No flood vents have been installed. C2 e) No machinery or equipment servicing the building has been installed. C2 d) The garage has not been established at the time of this Elevation Certificate and a finish grade can not be determined at this time, the site is stem walls and dirt. The construction plans call the garage elevation to be 9.8					

FEMA Form 086-0-33 (12/19)

ELEVATION CERTIFICATE

IMP	ORTANT: In these spaces, copy the correspo	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.				Policy Number:			
	6 Holiday Drive	Ctata	ZID Codo	O TO THE STATE OF			
City Sar	rasota	State Florida	ZIP Code 34231	Company NAIC Number			
	SECTION E – BUILDING FOR 70		RMATION (SURVEY NO E A (WITHOUT BFE)	T REQUIRED)			
For	Zones AO and A (without BFE), complete Items		,	a LOMA or LOMR-F request			
con	pplete Sections A, B,and C. For Items E1–E4, user meters.	se natural grade, if a	vailable. Check the measur	ement used. In Puerto Rico only,			
E1.	E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).a) Top of bottom floor (including basement,						
	crawlspace, or enclosure) is		feet mete	ers 🗌 above or 🗌 below the HAG.			
	 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet	ers 🗌 above or 🗌 below the LAG.			
E2.	For Building Diagrams 6–9 with permanent floothe next higher floor (elevation C2.b in the diagrams) of the building is	d openings provided	I in Section A Items 8 and/c				
E3.	Attached garage (top of slab) is						
	Top of platform of machinery and/or equipment servicing the building is	i.					
E5.	Zone AO only: If no flood depth number is avai floodplain management ordinance? Yes		e bottom floor elevated in a				
	SECTION F - PROPERTY O	OWNER (OR OWNE	R'S REPRESENTATIVE) C	ERTIFICATION			
The	e property owner or owner's authorized represent nmunity-issued BFE) or Zone AO must sign here	tative who completes . The statements in	s Sections A, B, and E for Z Sections A, B, and E are co	one A (without a FEMA-issued or brect to the best of my knowledge.			
Pro	perty Owner or Owner's Authorized Representat	ive's Name					
Add	dress	(City S	State ZIP Code			
Sig	nature	Ī	Date T	elephone			
Cor	mments						
				Check here if attachments.			

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, S 7746 Holiday Drive	uite, and/or Bldg. N	lo.) or P.O. Route and Bo	x No.	Policy Number:		
City Sarasota	State Florida	ZIP Code 34231		Company NAIC Number		
SECTION	ON G - COMMUNI	TY INFORMATION (OPT	IONAL)			
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.						
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who 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 Sect or Zone AO.	ion E for a building	located in Zone A (withou	ıt a FEMA	A-issued or community-issued BFE)		
G3. The following information (Items G4-	-G10) is provided fo	or community floodplain m	nanageme	ent purposes.		
G4. Permit Number	G5. Date Permit	Issued		Pate Certificate of compliance/Occupancy Issued		
G7. This permit has been issued for:	New Constructio	n	ment			
G8. Elevation of as-built lowest floor (including basement) of the building:						
G9. BFE or (in Zone AO) depth of flooding at	the building site: _		feet	meters Datum		
G10. Community's design flood elevation:	-		feet	meters Datum		
Local Official's Name		Title				
Community Name		Telephone				
Signature		Date				
Comments (including type of equipment and lo	cation, per C2(e), it	f applicable)				
				☐ Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE (COMPANY USE		
Building Street Address (including Apt., Unit, Sui 7746 Holiday Drive	ite, and/or Bldg. No.) o	r P.O. Route and Box No.	Policy Number:	
City	State	ZIP Code	Company NAIC Nur	nber
Sarasota	Florida	34231		
If using the Elevation Certificate to obtain N instructions for Item A6. Identify all photographs "Left Side View." When applicable, photograp vents, as indicated in Section A8. If submitting it	s with date taken; "Fro hs must show the foo	nt View" and "Rear View"; an undation with representative	d, if required, "Right S examples of the floo	Side View" and
	Photo	One		
	Dhata G			
Photo One Caption	Photo C	one		Clear Photo One
	Photo	Two		
	Photo T	-wo		
Photo Two Caption				Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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Building Street Address (including Apt., Unit, Suite, 7746 Holiday Drive	and/or Bldg. No.) or P	.O. Route and Box No.	Policy Number:	
City Sarasota	State Florida	ZIP Code 34231	Company NAIC Number	
If submitting more photographs than will fit on th with: date taken; "Front View" and "Rear View photographs must show the foundation with repres	ne preceding page, aff	ix the additional photogra Right Side View" and "L	eft Side View." When ap.	pplicable,
	Photo Thi	ree		
	Photo Three			
Photo Three Caption			Clear	Photo Three
	Photo Fo	ur		
Photo Four Caption	Photo Four		Class	r Photo Four
THOIS FOUL CAPROTI			Clea	i Photo Four