

2003-22203

O.M.B. NO. 3065-0077  
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

232-6253

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME <b>Rachel Renee Perry &amp; Thomas W. Perry</b>	Insurance Company Use
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <b>115 Loyola Road</b>	Policy Number
CITY <b>Venice</b>	STATE <b>Florida</b>
ZIP CODE <b>34293</b>	Community NAIC Number

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

**Lots 13905 & 13906, South Venice Unit No. 53, Sarasota County, Fl.**

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc.) Use Comments section if necessary.

**Residential**

LATITUDE/LONGITUDE (OPTIONAL) (##-##-##.## or ##.#####) \_\_\_\_\_ HORIZONTAL DATUM:  NAD 1927  NAD 1983 SOURCE:  GPS (Type): \_\_\_\_\_  USGS Quad Map  Other: \_\_\_\_\_

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <b>Sarasota County 125144</b>		B2. COUNTY NAME <b>Sarasota</b>		B3. STATE <b>FL</b>	
B4. MAP AND PANEL NUMBER <b>125144-0344</b>	B5. SUFFIX <b>E<sup>v</sup></b>	B6. FIRM INDEX DATE <b>09-03-92</b>	B7. FIRM PANEL EFFECTIVE/REVISED DATE <b>09-03-92</b>	B8. FLOOD ZONE(S) <b>A</b>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <b>None</b>

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 Resource 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 \_\_\_\_\_ (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 C3a-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 NGVD-29 Conversion/Comments \_\_\_\_\_  
Elevation reference mark used \_\_\_\_\_ Does the elevation reference mark used appear on the FIRM?  Yes  No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	_____	ft.	License Number, Embossed Seal, Signature, and Date
<input type="checkbox"/> b) Top of next higher floor	_____	ft.	
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____	ft.	
<input type="checkbox"/> d) Attached garage (top of slab)	_____	ft.	
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building. (Describe in comments area)	_____	ft.	
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	_____	ft.	
<input type="checkbox"/> g) Highest adjacent grade (HAG)	_____	ft.	
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	_____		
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	_____	sq. in.	

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect 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	LICENSE NUMBER
TITLE	COMPANY NAME
ADDRESS	CITY
SIGNATURE	DATE
	TELEPHONE

BUP 2003-22203

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

115 Loyola Road

CITY Venice

STATE FL

ZIP CODE 34293

For Insurance Company Use
Policy Number
Expenditure Code Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION**

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

COMMENTS

Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zone AO and Zone A (without BFE), complete Items E1 through E5. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. 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.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is 3 ft. 0 in.  above or  below (check one) the highest adjacent grade. (Use natural grade, if available.)
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is      ft.      in. above the highest adjacent grade. Complete Items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is 2 ft. 0 in.  above or  below (check one) the highest adjacent grade. (Use natural grade, if available.)
- E5. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in sections A, B, C, and E are correct to the best of my knowledge

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME Van Buskirk/Fish & Associates, Inc. Alan K. Fish, P.S.M. L.S. #3941

ADDRESS 12450 Tamiami Trail, Unit D CITY North Port STATE Florida ZIP CODE 34287

SIGNATURE  DATE 3-22-04 TELEPHONE (941) 426-0681

COMMENTS Elevation of Reference level floor is 17.83 feet "NGVD-29";

Estimated Average Elevation of highest natural grade is 14.8 feet "NGVD-29"

Check here if attachments

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

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.

- G1.  The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.  A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3.  The following information (Items G4 - G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT USED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G7. This permit has been issued for:  New Construction  Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: \_\_\_\_\_ ft. Datum: \_\_\_\_\_

G9. BFE or (Zone AO) depth of flooding at the building site is: \_\_\_\_\_ ft. Datum: \_\_\_\_\_

LOCAL OFFICIAL'S NAME \_\_\_\_\_ TITLE \_\_\_\_\_

COMMUNITY NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

COMMENTS

Check here if attachments