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

OMB No. 1660-0008 Expiration Date: November 30, 2018

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.

SECTION A - PROPERTY INFORMATION				FOR INSUF	RANCE COMPANY USE	
	A1. Building Owner's Name OSPREY PROPERTY INVESTMENTS LLC Policy Number:				ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4437 MERIDIAN ROAD				Company N	IAIC Number:	
City VENICE			State Florida		ZIP Code 34293	
	ription (Lot and Block Numbe 59, UNIT NO. 74, SOUTH VI		l Number, Le	gal Description, et	c.)	
A4. Building Use (e	e.g., Residential, Non-Reside	ential, Addition	, Accessory,	etc.) RESIDEN	TIAL	
}	ude: Lat. 27.044350N		82.417840		I Datum: NAD 1	1927 × NAD 1983
A6. Attach at least	2 photographs of the building				_	_
A7. Building Diagra						
A8. For a building v	with a crawlspace or enclosur	ıre(s):				
a) Square foot	age of crawispace or enclosu	ure(s)		0.00 sq ft		
b) Number of p	ermanent flood openings in t	the crawlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ade 0
c) Total net are	ea of flood openings in A8.b		0.00 sq in	1		
d) Engineered	flood openings? Yes	⊠ No				
A9. For a building w	vith an attached garage:					
a) Square foots	a) Square footage of attached garage 400.00 sq ft					
b) Number of p	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0					
c) Total net are	c) Total net area of flood openings in A9.b 0.00 sq in					
d) Engineered flood openings?						
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1 NFIP Communit	ty Name & Community Numb		B2. County		ORMATION	B3. State
VENICE	125144	JEI	SARASOTA		Florida	
B4. Map/Panel Number	B5. Suffix B6. FIRM Inde	Effe	RM Panel ective/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
12115C/0341	F 11-04-2016	11-04-2	vised Date 2016	AE	10.0	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:						
FIS Profile X 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	B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No				PA)? ☐ Yes ⊠ No	
Designation Date: CBRS OPA						

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			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, 4437 MERIDIAN ROAD	and/or Bldg. No.) or P.O.	Route and Box No.	Policy Number:	
City VENICE		ZIP Code 34293	Company NAIC Number	
SECTION C - BUILDIN	NG ELEVATION INFORM	MATION (SURVEY R	EQUIRED)	
*A new Elevation Certificate will be required v C2. Elevations – Zones A1–A30, AE, AH, A (with Complete Items C2.a–h below according to ti	when construction of the book BFE), VE, V1–V30, V (with be building diagram specif	th BFE), AR, AR/A, AR fied in Item A7. In Puerl	/AE, AR/A1-A30, AR/AH, AR/AO.	
Benchmark Utilized: COUNTY BENCH MAR Indicate elevation datum used for the elevation			***	
□ NGVD 1929 ⊠ NAVD 1988 □	, •	selow.		
Datum used for building elevations must be t		he BFE.	Check the measurement used.	
a) Top of bottom floor (including basement, or	crawispace, or enclosure f	loor)	10.5 X feet meters	
b) Top of the next higher floor			N/A feet meters	
c) Bottom of the lowest horizontal structural	member (V Zones only)		N/A feet meters	
d) Attached garage (top of slab)			10.1 X feet meters	
e) Lowest elevation of machinery or equipment (Describe type of equipment and location	ent servicing the building in Comments)		10.1 × feet meters	
f) Lowest adjacent (finished) grade next to b	ouilding (LAG)		9.5 X feet meters	
g) Highest adjacent (finished) grade next to	building (HAG)		10.1 X feet meters	
h) Lowest adjacent grade at lowest elevatior structural support	of deck or stairs, includin	g 	N/A feet meters	
SECTION D - SURV	EYOR, ENGINEER, OR	ARCHITECT CERTIF	ICATION	
This certification is to be signed and sealed by a life information on this Certificate repostatement may be punishable by fine or imprison.	resents my best efforts to I	interoret the data availa	y law to certify elevation information. able. I understand that any false	
Were latitude and longitude in Section A provided	by a licensed land survey	or? 🗵 Yes 🗌 No		
Certifier's Name BRUCE LINDH	License Number P.L.S. #4306		THE TIFICA TO THE PARTY OF THE	
Title LAND SURVEYOR			BRANCE RTIFICATAL AND	
Company Name BRUCE LINDH LAND SURVEYOR, INC			No 4306 + Seal STATE OF SO LAND SHIFT	
Address 1380 CAMBRIDGE DRIVE			TO SHOW THE STATE OF THE STATE	
City VENICE	State Florida	ZIP Code 34293	THE LAND LAND LAND	
Signature	Date 04-04-2018	Telephone (941) 496-7828	Ext. (2) (2) (3)	
Copy all pages of this Elevation Certificate and all at			agent/company, and (3) building owner.	
Comments (including type of equipment and locating 1) LATITUDE AND LONGITUDE BY: LATLONG.N	on, per C2(e), if applicable IET2) A/C ON NORTH S	e) IDE OF HOUSE	BA	



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ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.			NCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bl	dg. No.) or P.O. Route and Box N			
City State	ZIP Code	Company NAI	C Number	
SECTION E - BUILDING ELEVAT FOR ZONE AO	ION INFORMATION (SURVEY AND ZONE A (WITHOUT BFE			
For Zones AO and A (without BFE), complete Items E1–E5. I complete Sections A, B,and C. For Items E1–E4, use natural enter meters.	f the Certificate is intended to sugrade, if available. Check the me	pport a LOMA or LOM easurement used. In P	R-F request, uerto Rico only,	
E1. Provide elevation information for the following and check the highest adjacent grade (HAG) and the lowest adjacent	the appropriate boxes to show vnt grade (LAG).	vhether the elevation is	s above or below	
a) Top of bottom floor (including basement, crawlspace, or enclosure) is		meters above o	r Delow the HAG.	
b) Top of bottom floor (including basement, crawlspace, or enclosure) is		. <u>–</u>	r 🔲 below the LAG.	
E2. For Building Diagrams 6–9 with permanent flood opening		andlar O leas nages 1.	2 of Instructions)	
the next higher floor (elevation C2.b in the diagrams) of the building is			r Delow the HAG.	
E3. Attached garage (top of slab) is	[] feet [meters 🔲 above o	r below the HAG.	
E4. Top of platform of machinery and/or equipment servicing the building is	feet	meters above o	r Delow the HAG.	
E5. Zone AO only: If no flood depth number is available, is the floodplain management ordinance? Yes No	ne top of the bottom floor elevate Unknown. The local official	d in accordance with the must certify this inform	ne community's mation in Section G.	
SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATI	VE) CERTIFICATION		
SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION The property owner or owner's authorized representative who completes Sections A, B, 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, and E are correct to the best of my knowledge.				
Property Owner or Owner's Authorized Representative's Nan	ne			
Address	City	State	ZIP Code	
Signature	Date	Telephone		
Comments				
			•	
		☐ Check	here if attachments.	

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corresponding information f	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or F	P.O. Route and Box No.	Policy Number:		
City State	ZIP Code	Company NAIC Number		
SECTION G - COMMUNITY INF	ORMATION (OPTIONAL)			
The local official who is authorized by law or ordinance to administer the Sections A, B, C (or E), and G of this Elevation Certificate. Complete the used in Items G8–G10. In Puerto Rico only, enter meters.	community's floodplain ma applicable item(s) and sign	nagement ordinance can complete a below. Check the measurement		
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 Section E for a building located or Zone AO.	d in Zone A (without a FEM.	A-issued or community-issued BFE)		
G3. The following information (Items G4–G10) is provided for common comm	munity floodplain managem	ent purposes.		
G4. Permit Number 65. Date Permit Issued	G6. (Date Certificate of Compliance/Occupancy Issued		
G7. This permit has been issued for: New Construction S	ubstantial Improvement			
G8. Elevation of as-built lowest floor (including basement) of the building:	feet	meters Datum		
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 location, per C2(e), if applicable)				
		Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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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.			FOR INSURANCE COMPANY USE Policy Number:	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

FRONT YIEW

Photo One Caption

Clear Photo One



Photo Two Caption

Photo Two

REMA VIEW

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
Building Street Address (inclu	ding Apt., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:	
City	State	ZIP Code	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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo Three

SIDE LIEW

Photo Three Caption

Clear Photo Three



PLEME 5 510E VIEW

Photo Four Caption

Photo Four

Clear Photo Four