

DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
ELEVATION CERTIFICATE

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16

OMB Control Number: 1660-0008
Expiration: 11/30/2018

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				FORM INSURANCE COMPANY USE		
A1. Building Owner's Name: Michael and Linda Baskind 15-1495				Policy Number:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7625 Manasota Key Road				Company NAIC Number:		
City Englewood		State FL		Zip Code 34223		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Portion of Section 22, Township 40 South, Range 19 East, Sarasota County Florida Parcel ID#0490120006						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential						
A5. Latitude/Longitude: Lat. 26.591163° Long. 82.235836° Horizontal Datum: <input type="radio"/> NAD 1927 <input checked="" type="radio"/> NAD 1983						
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.						
A7. Building Diagram Number 8						
A8. For a building with a crawlspace or enclosure(s):				A9. For a building with an attached garage:		
a) Square footage of crawlspace or enclosure(s)		3083 sq ft		a) Square footage of attached garage		749 sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade		5		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade		4
c) Total net area of flood openings in A8.b		3830 sq in		c) Total net area of flood openings in A9.b		800 sq in
d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No				d) Engineered flood openings? <input checked="" type="radio"/> Yes <input type="radio"/> No		
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/Panel Number 125144 0432	B5. Suffix D	B6. FIRM Index Date 09-03-1992	B7. FIRM Panel Effective/ Revised Date 05-01-1984	B8. Flood Zone(s) A12	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 11'	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="radio"/> FIS Profile <input checked="" type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other/Source: _____						
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input type="radio"/> Other/Source: _____						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="radio"/> Yes <input checked="" type="radio"/> No Designation Date: <input type="radio"/> CBRS <input type="radio"/> OPA						
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
C1. Building elevations are based on: <input type="radio"/> Construction Drawings* <input type="radio"/> Building Under Construction* <input checked="" type="radio"/> Finished Construction						
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. * A new Elevation Certificate will be required when construction of the building is complete.						
Benchmark Utilized: #17-84-C15, EL=2.78				Vertical Datum: NGVD		
Indicate elevation datum used for the elevations in items a) through h) below. <input checked="" type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input type="radio"/> Other/Source: _____						
Datum used for building elevations must be the same as that used for the BFE.				Check the measurement used.		
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	5	-	5	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
b) Top of the next higher floor	12	-	7	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A	-	A	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
d) Attached garage (top of slab)	7	-	5	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	11	-	6	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
f) Lowest adjacent (finished) grade next to building (LAG)	4	-	8	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
g) Highest adjacent (finished) grade next to building (HAG)	5	-	4	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	7	-	5	<input checked="" type="radio"/> feet	<input type="radio"/> meters	

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7625 Manasota Key Road

Englewood

FL

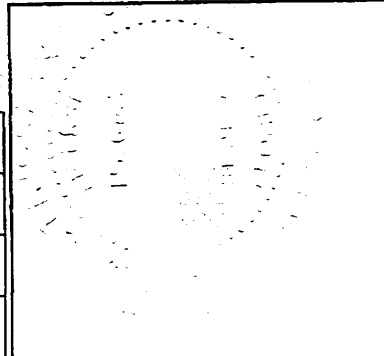
34223

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 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.

Were latitude and longitude in Section A provided by a licensed land surveyor?
 Yes No

Check here if attachments.



Certifier's Name R. J. Strickland, Jr.		License Number 6144/Florida	
Title PSM	Company Name All Service Land Surveying, Inc.		
Address 17840 Toledo Blade Blvd. Suite B	City Port Charlotte	State FL	Zip Code 33948
Signature 	Date 07-06-2016	Telephone +1 (941) 629-6801	

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

Comments (including type of equipment and location, per C2(e), if applicable)
 C2e: IS AIR CONDITIONER. VENTS IN GARAGE ARE ENGINEERED VENTS. VENTS IN CRAWSPACE ARE NOT. NOTE: THIS DOCUMENT IS PREPARED EXCLUSIVELY FOR THE PARTY IN A1. USE OF THIS CERTIFICATE BY OTHERS WILL BE AT THE SOLE RISK OF THE USER. COPYRIGHT 2016 DUPLICATION PROHIBITED.

Signature Date 07-06-2016

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

For Zones AO and A (without BFE), complete Items E1 -E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1 -E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- 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 meters above or below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ - _____ feet meters above or below the LAG.
- E2. For Building Diagrams 6 -9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8 -9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ - _____ feet meters above or below the HAG.
- E3. Attached garage (top of slab) is _____ - _____ feet meters above or below the HAG.
- E4. Top of platform of machinery and /or equipment servicing the building is _____ - _____ feet meters above or below the HAG.
- E5. 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, 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 Name: _____

Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			

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. 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 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 -G10) is provided for community floodplain management purposes.

G4. Permit Number 15-115942 B1	G5. Date Permit Issued	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: _____ - _____ 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

Check here if attachments.

BUILDING PHOTOGRAPHS

See instructions for Item A6

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IMPORTANT: In these spaces, copy the corresponding information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7625 Manasota Key Road	Policy Number:
City Englewood State FL Zip Code 34223	Company NAIC 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.



Front View 07-01-2016

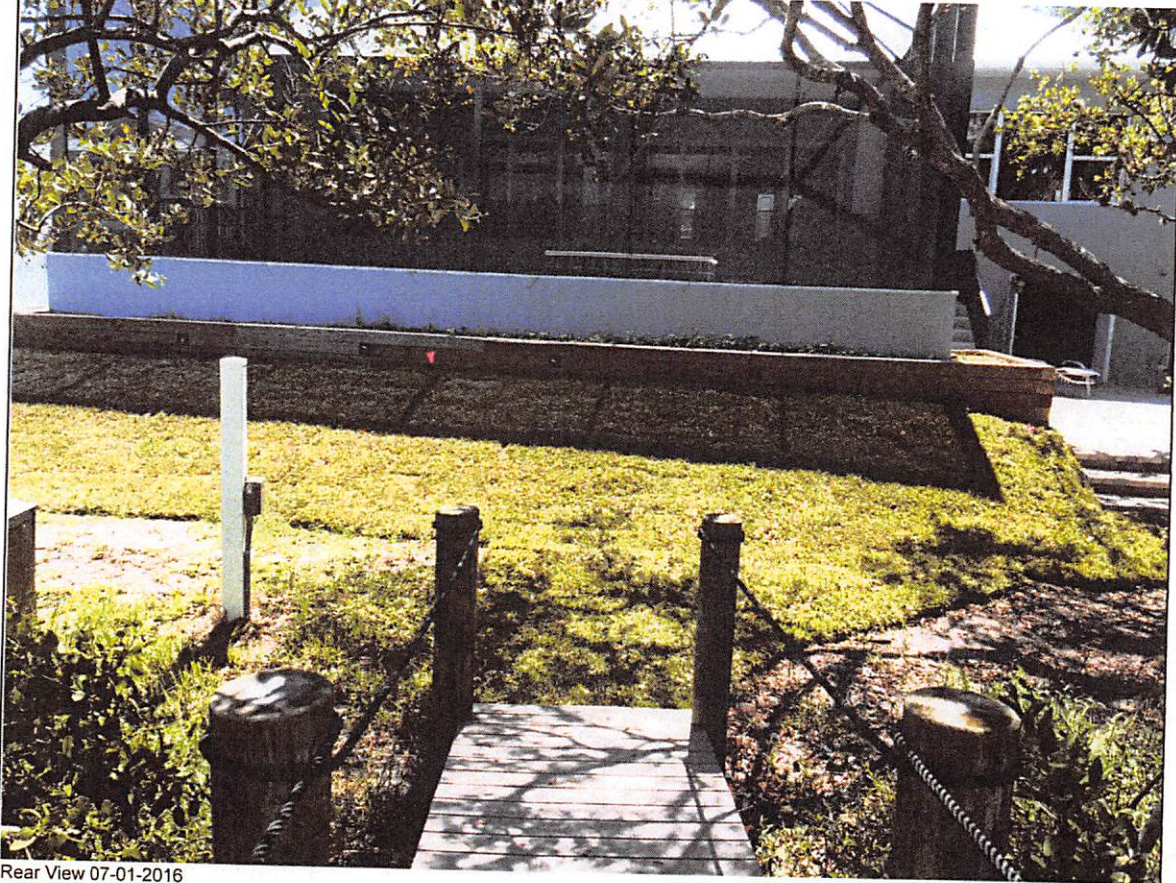
BUILDING PHOTOGRAPHS

Continuation Page

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City Englewood	State FL	Zip Code 34223	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.



Rear View 07-01-2016

BUILDING PHOTOGRAPHS

See instructions for Item A6

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City Englewood	State FL Zip Code 34223	Company NAIC Number:	

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Garage Vents 07-01-2016

BUILDING PHOTOGRAPHS

Continuation Page

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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.
7625 Manasota Key Road

FORM INSURANCE COMPANY USE

Policy Number:

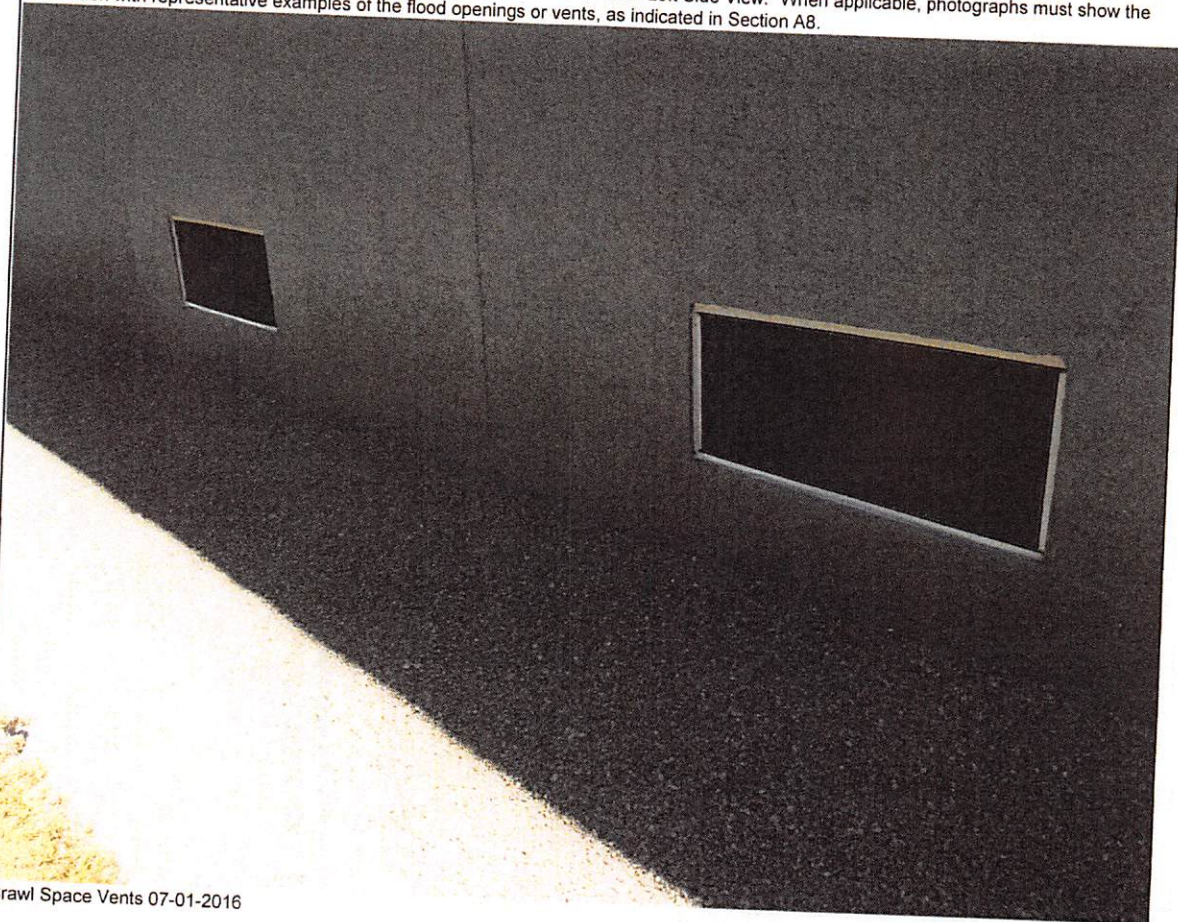
City Englewood

State FL

Zip Code 34223

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.



Crawl Space Vents 07-01-2016