Federal Emergency Management Agency National Flood Insurance Program	Important: Bood the install OB-	0,0000	OMB No. 1660-0008 Expires March 31, 2012	
Tread the manuachoris on pages 1-9.		Deach House		
A1. Building Owner's Name	SECTION A - PROPERTY INFORM	MATION	For Insurance Company Use:	
A2 Building Street Address (including Apt Unit	1 Mary Hicks		Policy Number	
City City	sey bey Rd.		Company NAIC Number	
A3. Property Description (Lot and Block Numbers	Florida		IP Code	
A3. Property Description (Lot and Block Numbers, Petes & Dounds Petes	Tax Parcel Number, Legal Description, etc.)	2 desc	200 10 F 1	
A4 Building Use (e.g., Residential, Non-Residentia	al Addition Accessory etc.) Docces	DOLL IX	18 FUZ4	
variance/roudings rat 5 to //. D/ /	1 1000 270 201 11 " 1 3		tum: NAD 1927 NAD 1983	
a and any of the state of the s	the Certificate is being used to obtain flood insu	rance.		
A8 For a building with a crawlspace or enclosure(s	$\frac{2S\sqrt{1}}{sq ft} = \frac{A9}{sq ft} = $	building with an attach	ned narane	
 a) Square footage of crawlspace or enclosure b) No of permanent flood openings in the cra 	wishare or	quare footage of attact	ned garage NIC so #	
enclosure(s) within 1.0 foot above adjacent		o. of permanent flood of thin 1.0 foot above ad	openings in the attached garage	
c) Total net area of flood openings in A8 b d) Engineered flood openings? Yes	No N/2 sq in c) To	stal net area of flood o	penings in A9 h NIQ so in	
	- 1.117	ngineered flood openir	ngs? Yes No No	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION				
B1 NFIP Community Name & Community Number	B2. County Name	7 E	3. State	
	FIRM Index B7. FIRM Panel	270	Florida	
125144-0228 E 9=	Date Effective/Revised Date	B8. Flood Zone(s)	B9 Base Flood Elevation(s) (Zone AO, use base flood depth)	
B10. Indicate the source of the Base Flood Elevation	(BFE) data or base flood depth entered in Item	B9.	11 ++,	
LI PIS PIOIRE A FIRM Commu	unity Determined Other (Describe) _			
B11. Indicate elevation datum used for BFE in Item I B12. Is the building located in a Coastal Barrier Reso Designation Date	B9: X NGVD 1929 NAVD 1988 DUICES System (CRRS) area or Otherwise Run	Other (Describe)		
	CBRS [] OPA		Yes No	
SECTION C - E	BUILDING ELEVATION INFORMATION (SURVEY REQUIRE	D)	
C1 Building elevations are based on Constru	ection Decuired		Finished Construction	
*A new Elevation Certificate will be required whe C2. Elevations – Zones A1-A30, AE, AH, A (with BFE below according to the building diagram specifie	n construction of the building is complete.		Timished Construction	
below according to the building diagram specified	d in Item A7. Use the same datum as the BFE.	., AR/A1-A30, AR/AH,	AR/AO. Complete Items C2 a-h	
Benchmark Utilized Construction Conversion/Comments	tion anterity is	NEND 10	29	
Services Services Services				
Top of bottom floor (including basement, cra	awlspace, or enclosure floor) 20 %	Check the measureme		
 D) Top of the next higher floor 	NIO		s (Puerto Rico only) s (Puerto Rico only)	
d) Attached parage (top of slap)				
e) Lowest elevation of machinery or equipment servicing the building				
(Describe type of equipment and location in Lowest adjacent (finished) grade next to built	Comments)	ieet ∐ meter	s (Puerto Rico only)	
g) Highest adjacent (finished) grade next to built	Iding (LAG)		s (Puerto Rico only)	
 h) Lowest adjacent grade at lowest elevation of 	f deck or stairs, including		s (Puerto Rico only) s (Puerto Rico only)	
structural support	HDVEVOD ENGINEER		• •	
	SURVEYOR, ENGINEER, OR ARCHITEC			
information. I certify that the information on this Certify that the information on this Certify understand that any false statement may be purish	ificate represents my best efforts to interpret the	law to certify elevation e data available		
I understand that any false statement may be punish. Check here if comments are provided on back of	able by line or imprisonment under 18 U.S. Coo	le, Section 1001.	MITARH	
somments are provided our pack of			MACHA	
Certifier's Name \ . \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		∐ No	_ LS 5538 - 3/2/10	
Martin J. Dr.H	License Number	553X		
Tresident	ny Name MSB Survieu o	Too	3/2/10	
Address 960 lem lane City	State E	ZIP Code	-	
Signature	Date 3 Telephone	74540	_	
EMA Form 81-31, Mar 09	2-1-5010 (241)	751-4935	y	
· =····· Ur Ur Hidi UU	See reverse side for continuation.		Replaces all previous editions	

WIFUR LANGE. III triese spaces, copy the corresponding information from Section A.		For Insurance Company Use:	
Building Street Address (including Apt, Unit, Suite, and/or E	3ldg No Lor P.O. Route and Box No		Policy Number
City Nokomis	Florida 3	ZIP Code	Company NAIC Number
SECTION D - SURVEYOR,	ENGINEER, OR ARCHITECT CE	RTIFICATION (CONT	INUED)
Copy both sides of this Elevation Certificate for (1) commun	nity official, (2) insurance agent/compa	ny, and (3) building owne	er.
Comments Showin hereco	are bosed on Con	StalCerstruc	transcontrol wonners
	1584 VRAD16521.	, , , , , , , , , , , , , , , , , , , ,	
15 20.8 Ft New 1929.3) Low Signature	est ekuthion of mo	chinery is	Check here if attachments
SECTION E - BUILDING ELEVATION INFORM	ATION (SURVEY NOT REQUIRE	D) FOR ZONE AO AN	ID ZONE A (WITHOUT BFE)
For Zones AO and A (without BFE), complete Items E1-E5 and C. For Items E1-E4, use natural grade, if available. C	Check the measurement used. In Puer	to Rico only, enter meter	S
 E1. Provide elevation information for the following and chegrade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawlspab) Top of bottom floor (including basement, crawlspab). E2. For Building Diagrams 6-9 with permanent flood oper 	ace, or enclosure) is	feet meters aborteet meters aborteet meters aborteet	ve or below the HAG ve or below the LAG Instructions), the next higher floor
(elevation C2.b in the diagrams) of the building is	feet meters above or be	above or below the	e HAG
E4. Top of platform of machinery and/or equipment serviE5. Zone AO only: If no flood depth number is available,	, is the top of the bottom floor elevated		
ordinance? Yes No Unknown. The lo	THE RESIDENCE OF THE PARTY OF T	CARREST CO. C.	0.1710.1
	OWNER (OR OWNER'S REPRES		
The property owner or owner's authorized representative w or Zone AO must sign here. The statements in Sections A			A-issued or community-issued BFE)
Property Owner's or Owner's Authorized Representative's	Name		
Address	City	State	ZIP Code
Signature	Date	Telephon	e
Comments			
			Check here if attachment
	G - COMMUNITY INFORMATION		
The local official who is authorized by law or ordinance to ad and G of this Elevation Certificate. Complete the applicable	item(s) and sign below. Check the me	easurement used in Item	s G8 and G9.
The information in Section C was taken from other is authorized by law to certify elevation information	n (Indicate the source and date of the	elevation data in the Co	mments area below.)
G2 A community official completed Section E for a bu G3 The following information (Items G4-G9) is provide			issued BFE) or Zone AO
G4 Permit Number G5 Date Permit		Pate Certificate Of Compl	iance/Occupancy Issued
G7 This permit has been issued for New Constructio	on Substantial Improvement		
G8 Elevation of as-built lowest floor (including basement)	of the building	feet meters (PF	R) Datum
G9. BFE or (in Zone AO) depth of flooding at the building s	ite	feet meters (PF	R) Datum
			N Park
G10. Community's design flood elevation		feet meters (PF	R) Datum
G10. Community's design flood elevation Local Official's Name	Title		k) Datum
	Title Telephone		K) Datum
			() Datum
Local Official's Name Community Name	Telephone		() Datum
Local Official's Name Community Name Signature	Telephone		() Datum

Building Photographs See Instructions for Item A6.

For Insurance Company Use:

Policy Number

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

City

ZIP Code

Company NAIC Number

