Bup 2000-20325

## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOQD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires July 31, 2002

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Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: BUILDING OWNER'S NAME Policy Number JOANNA PIECUCH BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 411 NIGHTINGALE ROAD CITY ZIP CODE STATE VENICE FL 34293 PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) THE SOUTH 1/2 OF LOT 16525, AND ALL OF LOTS 16526 AND 16527 SOUTH VENICE, UNIT NO. 62 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): ( ##° - ##' - ##.##" or ##.####") ■ NAD 1927 ■ NAD 1983 USGS Quad Map Other: SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME** B3. STATE SARASOTA COUNTY 125144 SARASOTA **FLORIDA B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX DATE B7. FIRM PANEL B8. FLOOD ZONE(S)** B9. BASE FLOOD ELEVATION(S) NUMBER EFFECTIVE/REVISED DATE E 9-3-92 (Zone AO, use depth of flooding) AE 125144-341 9-3-92 11.00 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. **⊠** FIRM Community Determined FIS Profile Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe): SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) p2000-20325 C1. Building elevations are based on: Construction Drawings\* Building Under Construction\* X Finished Construction \*A new Elevation Certificate will be required when construction of the building is complete. C2. 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.) 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 C3.-a-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 1929 Conversion/Comments NONE Elevation reference mark used S.R.D. B.M. ELEV. 15.13\_Does the elevation reference mark used appear on the FIRM? Yes No □ a) Top of bottom floor (including basement or enclosure) 11.74 ft. Seal b) Top of next higher floor N/A ft. Embossed S ☐ c) Bottom of lowest horizontal structural member (V zones only) WAfL d) Attached garage (top of slab) 11.25 ft. ☐ e) Lowest elevation of machinery and/or equipment License Number, Signature, servicing the building (Describe in a Comments area) 11.14 ft. ☐ f) Lowest adjacent (finished) grade (LAG) 10.7 ft. RONALD J. BORER g) Highest adjacent (finished) grade (HAG) 11.0 ft. F.S.M. NO.6265 ☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade N/A 01/09/02 i) Total area of all permanent openings (flood vents) in C3.h N/A sq. in. 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 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 RONALD J. BORER LICENSE NUMBER P.S.M.#6265 COMPANY NAME STRAYER SURVEYING & MAPPING, INC. TITLE PROFESSIONAL LICENSED SURVEYOR **ADDRESS** CITY ZIP CODE STATE 763 SHAMROCK BOULEVARD **VENICE** FL 34293 SIGNATURE DATE TELEPHONE

FEMA Form 81-31, JUL 00

SEE REVERSE SIDE FOR CONTINUATION

01-09-02

REPLACES ALL PREVIOUS EDITIONS

{941} 497-1290

these spaces, o	these spaces, copy the corresponding information from Section A.					
AT ADDRESS (Including NGALE ROAD	fing Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND B	BOX NO.	Policy Number			
NOALE NOAD	STAT FL	E	ZIP CODE 34293	Company NAIC Number		
2	SECTION D - SURVEYOR, ENGINEER, OR A	RCHITECT CERTIFIC				
, both sides of this Elevation C	Certificate for (1) community official, (2) insurance agent/	en senten				
	NUMBER 00-01-25. A/C PAD IS AT ELEVATIO		and a constraint	ENT FLOW THROUGHS.		
				Check here if attachments		
SECTION E -	BUILDING ELEVATION INFORMATION (SURVEY N	OT REQUIRED) FOR	ZONE AO AND ZONE	(WITHOUT BFE)		
For Zone AO and Zone A (without B	FE), complete Items E1 through E4. If the Elevation Ce	ertificate is intended for	r use as supporting informa	ation for a LOMA or LOMR-F,		
Section C must be completed.						
	lect the building diagram most similar to the building for	which this certificate is	s being completed – see p	ages 6 and 7. If no diagram accurately		
represents the building, provide		a) in (am) $\square$ about	a ar Dhalau (abad) an	) the highest ediscout ands. // les		
natural grade, if available).	ding basement or enclosure) of the building isft.(rr	1)in.(d1i) above	e or Delow (check one	e) the highest adjacent grade. (Use		
	openings (see page 7), the next higher floor or elevated	floor (elevation b) of th	ne building is ft.(m)	in.(cm) above the highest adjacent		
grade. Complete items C3.h ar			5 _ ( /_			
Ŧ.	epth number is available, is the top of the bottom floor el		with the community's floor	dplain management ordinance?		
Yes No Unknow	vn. The local official must certify this information in Sect					
	SECTION F - PROPERTY OWNER (OR OWN			N		
	horized representative who completes Sections A, B, C in here. The statements in Sections A, B, C, and E are of			ithout a FEMA-issued or community-		
With the second with the second secon	S AUTHORIZED REPRESENTATIVE'S NAME	correct to the best or it	ly knowledge.			
	O NO THORIZED NET NESERVATIVE STRAINE					
ADDRESS		CITY	STAT	TE ZIP CODE		
SIGNATURE		DATE	TELE	PHONE		
COMMENTS						
				Check here if attachments		
	SECTION G - COMMUNITY II	NEORMATION (OPT)	ONAL)	Cricco fiere il attaci i fierita		
The local official who is authorized h	y law or ordinance to administer the community's floodp			ions A. B. C (or E), and G of this Eleva		
Certificate. Complete the applicable		Jan Managaman da				
G1. The information in Section (	C was taken from other documentation that has been sig					
photo as local law to as it.	elevation information. (Indicate the source and date of the					
	stad Section E for a building located in Zone A (without:		nmunity-issued BFE) or Zo	one AO.		
G2. A community official comple		ananant numana				
G2. A community official comple G3. The following information (It	ems G4-G9) is provided for community floodplain mana			IDI IANGE/GOOD IDANGY IOOUED		
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