#### U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

### **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

		SEC	TION A	A – PROPERTY INFO	RMATION	FOR IN	SURANCE COMPANY USE
A1. Building Owner's Name  Big Pass Condominium dba Sea Village					Policy N	lumber:	
						ny NAIC Number:	
City	אווונט ועו-ע			State ZIP Cod			
Sarasota A3. Property Description (I	ot and Block Nu	mbers Tax Parcel N	Number		4242		
APN 0079-12-1027	Lot and Block Nu	mbers, rax r arcer	Varriber	, Legar Description, etc.)			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential  A5. Latitude/Longitude: 27.2858, Longitude = -82.5632 Horizontal Datum: NAD 1927 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 1b  A8. For a building with a crawlspace or enclosure(s):  a) Square footage of crawlspace or enclosure(s) sq ft  b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade  c) Total net area of flood openings? Yes No  A9. For a building with an attached garage:  a) Square footage of attached garage NA sq ft  b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade  c) Total net area of flood openings? Yes No							
	SECT	TION B – FLOOD	INSU	RANCE RATE MAP (	FIRM) INFORMATIO	N	
B1. NFIP Community Name Unincorporated		lumber 25114	B2. Co Sara	ounty Name sota		B3. Stat	
B4. Map/Panel Number 125114 0143	B5. Suffix E	B6. FIRM Index I 09/03/92	Date	B7. FIRM Panel Effective/Revised Dat 09/03/92	e B8. Flood Zone(s) V15	B9. E	Base Flood Elevation(s) (Zone AO, use base flood depth) 13'
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.    FIS Profile   FIRM   Community Determined   Other/Source:  B11. Indicate elevation datum used for BFE in Item B9:   NGVD 1929   NAVD 1988   Other/Source:  B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?   Yes   No							
Designation Date: CBRS OPA  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. 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.  Benchmark Utilized: Local TBM Vertical Datum: NGVD							
Indicate elevation datum used for the elevations in items a) through h) below. ☑ NGVD 1929 ☐ NAVD 1988 ☐ Other/Source:  Datum used for building elevations must be the same as that used for the BFE.							
							asurement used.
<ul><li>a) Top of bottom floor (i</li><li>b) Top of the next highe</li></ul>	Ū	ent, crawlspace, or e	enclosur	,	8.9 . <u>NA</u>		☐ meters ☐ meters
c) Bottom of the lowest		ıral member (V Zon	es only)		7.3	☐ feet	☐ meters
d) Attached garage (top			,,	•	NA		meters
<ul> <li>e) Lowest elevation of n</li> <li>(Describe type of equ</li> </ul>			buildin	g	9.3		☐ meters
f) Lowest adjacent (finis					7.5		☐ meters
g) Highest adjacent (fini					7.9	feet	meters
h) Lowest adjacent grad	le at lowest eleva	ation of deck or stair	s, inclu	ding structural support	. <u>NA</u>	☐ feet	meters
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION							
This certification is to be signiformation. I certify that the I understand that any false  Check here if comments the Check here if attachments the Check here if attachments the Check here if attachments the Check here is attachments.	e information on statement may but ts are provided cents.	this Certificate repre se punishable by fine	esents n e or imp Were	my best efforts to interpresertsonment under 18 U.S. latitude and longitude in the land surveyor?	et the data available. Code, Section 1001. Section A provided by Yes □ No		R. DANO PROPERTY OF SOME SOME SOME SOME SOME SOME SOME SOME
Certifier's Name Billy R. Da	vis, Jr.			License Numb	per 5099		LESS HESS
Title RPLS	v Dide E	City Magra	⊢ıst Am		7ID Cod- 70400		STATE OF CORIDA
Address 1700 S. Broadwa	y, Diug. E	City Moore  Date 3/3/14		State OK Telephone 4	ZIP Code 73160 05-378-5800		AND SURVE

ELEVATION CERTIFICATE, pa	ige 2					
IMPORTANT: In these spaces, c	opy the corresponding information from S	ection A.	FC	OR INSURANCE COMPANY USE		
Building Street Address (including Apt. 4660 Ocean Boulevard Units M-V	., Unit, Suite, and/or Bldg. No.) or P.O. Route and E	Box No.	Po	olicy Number:		
City Sarasota	State Z Florida	IP Code 34242	Co	ompany NAIC Number:		
	D – SURVEYOR, ENGINEER, OR ARCHITI		FICATION (CON	ITINUED)		
	ficate for (1) community official, (2) insurance agen		•	•		
Comments MACHINERY IS AC UNIT	C2c elevation is estimated bottom of the concrete	slab of lowe	est level.			
Signature Billy air Th	Date 3.	/3/14				
	VATION INFORMATION (SURVEY NOT RE	QUIRFD) F	OR ZONE AO A	ND ZONE A (WITHOUT BEE)		
	·	•		·		
	omplete Items E1–E5. If the Certificate is intended grade, if available. Check the measurement used. I					
E1. Provide elevation information for	the following and check the appropriate boxes to		•			
grade (HAG) and the lowest adja a) Top of bottom floor (including	acent grade (LAG). basement, crawlspace, or enclosure) is	☐ fe	eet    meters	above or D below the HAG.		
b) Top of bottom floor (including	basement, crawlspace, or enclosure) is	fe	eet 🗌 meters 🔲	above or Delow the LAG.		
	permanent flood openings provided in Section A Ite of the building is ☐ feet ☐ met		9 (see pages 8–9 o √e or □ below the			
E3. Attached garage (top of slab) is	E3. Attached garage (top of slab) is feet					
	d/or equipment servicing the building is number is available, is the top of the bottom floor ε		_			
	Unknown. The local official must certify this infor			community 3 noodplain management		
SECTION	F – PROPERTY OWNER (OR OWNER'S R	EPRESEN <sup>.</sup>	TATIVE) CERTIF	ICATION		
	zed representative who completes Sections A, B, a ments in Sections A, B, and E are correct to the be		`	A-issued or community-issued BFE)		
Property Owner's or Owner's Authorize						
Address	City		State	ZIP Code		
Signature	Date		Telephor	ne		
Comments						
				Check here if attachments		
Floring to the Control of the Contro	SECTION G – COMMUNITY INFORM	•		annulate Ocations A. D. O. (an E.), and O.		
	or ordinance to administer the community's floodplate applicable item(s) and sign below. Check the meas					
	was taken from other documentation that has been elevation information. (Indicate the source and dat					
_ ,	ed Section E for a building located in Zone A (withou		•	r-issued BFE) or Zone AO.		
G3. The following information (Iter	ms G4–G10) is provided for community floodplain n	nanagement	purposes.			
G4. Permit Number	G5. Date Permit Issued	G6. Date 0	Certificate Of Comp	liance/Occupancy Issued		
G7. This permit has been issued for:	☐ New Construction ☐ Substantial Imp	rovement				
G8. Elevation of as-built lowest floor (ir		☐ feet	☐ meters I	Datum		
G9. BFE or (in Zone AO) depth of flood	ling at the building site:	☐ feet	☐ meters I	Datum		
G10. Community's design flood elevation	n:	☐ feet	☐ meters I	Datum		
Local Official's Name	Title					
Community Name	Tele	phone				
Signature	Date	•				
Comments						
Communic				☐ Check here if attachments.		

#### **ELEVATION CERTIFICATE**, page 3

## **Building Photographs**See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. N 4660 Ocean Boulevard Units M-V	Policy Number:		
City Sarasota	State Florida	ZIP Code 34242	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.

#### Photo Taken 2/20/14 Front



#### **ELEVATION CERTIFICATE, page 4**

# Building Photographs Continuation Page

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. I 4660 Ocean Boulevard Units M-V	No.) or P.O. Route a	nd Box No.	Policy Number:
City Sarasota	State Florida	ZIP Code 34242	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 taken 2/20/14Rear

