/2008 13:42 FAX Ø 001/002 S. DEPARTMENT OF HOMELAND SECURITY ELEVATION CERTIFICATE UNIB NO. 1660-0008 Federal Emergency Management Agency Expires February 28, 2009 National Flood Insurance Program Important: Read the Instructions on pages 1-8. 143 SECTION A - PROPERTY INFORMATION For Insurance Company Use: A1. Building Owner's Name M.E.R.C.R.E.D.I., INC. Policy Number Building Street Address (Including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. Company NAIC Number 00 OCELOT ROAD VENICE State FL ZIP Code 34293 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 15. LEMON BAY ESTATES A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Latitude/Longitude: Lat. 27.025267 Long. -82.414481 Horlzontal Datum: ☐ NAD 1927 ☒ NAD 1983 A8. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 1 A8. For a building with a crawl space or enclosure(s), provide A9. For a building with an attached garage, provide: a) Square footage of crawl space or enclosure(s) a) Square footage of attached garage N/A sq ft 1425 Bq ft b) No. of permanent flood openings in the crawl space or b) No. of permanent flood openings in the attached garage enclosure(s) walls within 1,0 foot above adjacent grade N/A walls within 1.0 foot above adjacent grade 25 Total net area of flood openings in A8.b NA Total net area of flood openings in A9.b 3880 sq In sq In SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name B3. State SARASOTA COUNTY SARASOTA FL B4. Map/Panel Number B5. Suffix B6. FIRM Index B7. FIRM Panel BB. Flood B9. Base Flood Elevation(s) (Zone Date Effective/Revised Date Zone(s) AO, use base flood depth) 125144 1343E 9/03/92 9/03/92 AE B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. ☐ FIS Profile Ø FIRM Community Determined Other (Describe) B11. Indicate elevation datum used for BFE in Item B9; X NGVD 1929 ☐ NAVD 1988 Other (Describe) B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes **⊠No** Designation Date N/A CBRS OPA SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under 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-g below according to the building diagram specified in Item A7. Benchmark Utilized PLAT Vertical Datum NGVD Conversion/Comments NONE Check the measurement used. Top of bottom floor (including basement, crawl space, or enclosure floor) 12.2 ☑ feet ☐ meters (Puerto Rico only) Top of the next higher floor 25.2 ☑ feet ☐ meters (Puerto Rico only) Bottom of the lowest horizontal structural member (V Zones only) c) N/A ☐ feet ☐ meters (Puerto Rico only) Attached garage (top of slab) d) 9.2 ☑ feet ☐ meters (Puerto Rico only) Lowest elevation of machinery or equipment servicing the building 0) ☑ feet ☐ meters (Puerto Rico only) 12.1 (Describe type of equipment in Comments) Lowest adjacent (finished) grade (LAG) 9.1 Highest adjacent (finished) grade (HAG) g) ☑ feet ☐ meters (Puerto Rico only) 10.4

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 evailable. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Check here if comments are provided on back of form.

Certifier's Name C. Gary Hoffman

License Number LS 4909

Title V.P.

Company Name Asian and American Surveying and Services, Inc.

Pers 1225 Tamlami Trall, Unit B 13

City Port Charlotte

State FL ZIP Code 33953

ature

Date 8/27/2008

Telephone (941) 743-0985

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MPORTANT: In these spaces,	copy the corresponding inform	nation from Section A.		For Insurance Company Use:
Building Street Address (Including Ap 1300 OCELOT ROAD	ot., Unit, Suite, and/or Bidg. No.) or P.	O. Route and Box No.		Policy Number
City VENICE State FL ZIP Code	34293			Company NAIC Number
SECTIO	N D - SURVEYOR, ENGINEER, C	OR ARCHITECT CERTIFIC	CATION (CONT	NUED
	tificate for (1) community official, (2) in			
Comments C2e CENTRAL AIR CON	NDITIONING UNITS (2)	nsurance agent/company, and	(3) pullaing owne	r
	ARAGE DOOR (3240 SQ. IN.) & 7 LC	DUVERED VENTS IN GARAC	GE WALL (420 SQ	. <mark>IN.)</mark>
Signature				
C. Gary Hoffman	melle	Date 8/27/08		☐ Check here if attachment
SECTION E - BUILDING ELE	VATION INFORMATION (SURV	EY NOT REQUIRED) FOR	ZONE AO ANI	ZONE A (WITHOUT BFE)
E1. Provide elevation information for grade (HAG) and the lowest adjust a) Top of bottom floor (including b) Top of bottom floor (including b) Top of bottom floor (including E2. For Building Diagrams 6-8 with (elevation C2.b in the diagrams) E3. Attached garage (top of slab) is E4. Top of platform of machinery and E5. Zone AO only: If no flood depth ordinance? Yes No	basement, crawl space, or enclosure basement, crawl space, or enclosure basement, crawl space, or enclosure basement flood openings provided in the building la	rement used. In Puerto Rico late boxes to show whether the late boxes to show the	only, enter meters to elevation is about meters ab to had, to had, meters above trance with the co- ction G.	i. ye or below the highest adjacent ove or below the HAG. ove or below the LAG. ructions), the next higher floor AG. or below the HAG. mmunity's floodplain management
SECTION	F - PROPERTY OWNER (OR O	WNER'S REPRESENTAT	IVE) CERTIFIC	ATION
Poerty Owner's or Owner's Authorized	zed representative who completes Sements in Sections A, B, and E are co ed Representative's Name	rrect to the best of my knowle	odge. State	ZIP Code
Signature		Date	Telephone	
Comments				
		1000		Check here if attachmen
o local official who to puth a sized his la	SECTION G - COMMUNIT	Y INFORMATION (OPTIC	NAL)	
d G of this Elevation Certificate. Com	w or ordinance to administer the complete the applicable item(s) and sign	munity's floodplain manageme below. Check the measureme	ent ordinance can ent used in Items	complete Sections A, B, C (or E).
 The Information in Section C vis authorized by law to certify 	was taken from other documentation to elevation information. (Indicate the so ad Section E for a building located in 2	hat has been signed and seal ource and date of the elevation	led by a licensed s	urveyor, engineer, or architect who ments area below.)
	ns G4G9.) is provided for community			100
64. Permit Number	G5. Date Permit Issued	G6 Date Certif	ficate Of Complian	ce/Occupancy Issued
This permit has been issued for: Elevation of as-built lowest floor (Inc., BFE or (in Zone AO) depth of flooding)	cluding basement) of the building:	postantial improvement feet		
ocal Official's Name		Title		
ommunity Name		Telephone		V-m
ignature		Date		
glnen		-		