PERMII # 00 B1

## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

## **ELEVATION CERTIFICATE**

O.M.B. No. 3067-0077 Expires December 31, 2005

| Important: Read the instructions on pages 1 - 7.  SECTION A - PROPERTY OWNER INFORMATION   |   |  |  |  |
|--|---|--|--|--|
| BUILDING OWNER'S NAME  | For Insurance Company Use:  Policy Number |  |  |  |
| LEGACY HOMES   | Telley Number                             |  |  |  |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 5208 OLD TRENTON LANE  | Company NAIC Number                       |  |  |  |
| SARASOTA STATE FLORIDA   | ZIP CODE 2110 A C                         |  |  |  |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)   | 246.50                                    |  |  |  |
| LOT 53, OAK VISTAS   |   |  |  |  |
| BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)  | 3812 01                                   |  |  |  |
| LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: ( ##° - ##' - ##.##" or ##.####")   NAD 1927   NAD 1983   SOURCE:   GPS (Type):  | 10 44 1 1 1 1 1                           |  |  |  |
| USGS Quad N  | Map    Other                              |  |  |  |
| SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION  | ON  |  |  |  |
| 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   B7. FIRM PANEL   B8. FLOOD   | B9. BASE FLOOD ELEVATION(S)               |  |  |  |
| NUMBER 125144 0154  E  DATE   EFFECTIVE/REVISED DATE   ZONE(S) 9-29-96 9-3-92 AE   | (Zone AO, use depth of flooding)          |  |  |  |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.   | e reference                               |  |  |  |
| ☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe):  |   |  |  |  |
| B11. Indicate the elevation datum used for the BFE in B9: \_\nabla NGVD 1929 \ NAVD 1988 \ Other (I  |   |  |  |  |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected A Designation Date:  | rea (OPA)? Yes No                         |  |  |  |
| SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUI   | RED)                                      |  |  |  |
| Cuilding 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. Building Diagram Number (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/A                        | 1 A20 AB/AU AB/AO                         |  |  |  |
| Complete Items C3.a-i below according to the building diagram specified in Item C2. State the datum u  | ised. 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 measi  | urements and datum conversion             |  |  |  |
| calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate,  |   |  |  |  |
| Datum NGVD 1929 Conversion/Comments  |   |  |  |  |
| Elevation reference mark used <u>CD</u> , <u>BM</u> . Does the elevation reference mark used appe  |   |  |  |  |
| a) Top of bottom floor (including basement or enclosure)   | DSM # 5/21                                |  |  |  |
| U b) Top of next higher floor  |   |  |  |  |
| c) Bottom of lowest horizontal structural member (V zones only)  d) Attached garage (top of slab)  22. 4 ft.(m)  |   |  |  |  |
| LI et l'owest elevation of machinery and/or equipment  | SCOTT CRIDER                              |  |  |  |
| servicing the building (Describe in a Comments area.)  g) Highest adjacent (finished) grade (LAG)  g) Highest adjacent (finished) grade (HAG)  h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade NA |   |  |  |  |
| ☐ f) Lowest adjacent (finished) grade (LAG)  |   |  |  |  |
| g) Highest adjacent (finished) grade (HAG)   | 1   |  |  |  |
|  |   |  |  |  |
| i) Total area of all permanent openings (flood vents) in C3.h NA sq. in. (sq. cm)  |   |  |  |  |
| SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION   | ON .                                      |  |  |  |
| This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to  |   |  |  |  |
| I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret   |   |  |  |  |
| I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Sec  | tion 1001.                                |  |  |  |
| SCOTT CRIDER   | + 5671                                    |  |  |  |
| DWNER PRESIDENT FLORIDA COAST S  | surreying INC                             |  |  |  |
| 1105 5384 HVETILE BAST #202 BRAILENTON   | FL 21000E 34203                           |  |  |  |
| SIGNATURE BATE/2-13-00 TELEPHO   | 141-744-9295                              |  |  |  |
| FEMA Form 81-31, January 2003 See reverse side for continuation.   | Replaces all previous editions            |  |  |  |

| IMPORTANT: In these spaces   | , copy the corresponding information f   | rom Section A.   | For Insurance Company Use:  |
|--|--|--|---|
| BUILDING STREET ADDRESS (Inc. 5208 OLD   | luding Apt., Unit, Suite, and/or Bldg, No.) OR P   | .O. ROUTE AND BOX NO.  | Policy Number   |
| CITY SARASOTA  | STATE ELDRID   | A ZIP CODE   | Company NAIC Number   |
|  | ON D - SURVEYOR, ENGINEER, OR ARC  |  | ITINUED)  |
| Copy both sides of this Elevation  | Certificate for (1) community official, (2) i  | nsurance agent/company, and (3   | building owner.   |
| COMMENTS ALC MAL   | THINERY BERVILLES  | Building   |   |
|  |  | Jan 2011   | Check here if attachme  |
| SECTION E - BUILDING ELI   | EVATION INFORMATION (SURVEY NOT<br>BFE), complete Items E1. through E5. If   | REQUIRED) FOR ZONE AO A  | ND ZONE A (WITHOUT BFE)   |
| see pages 6 and 7. If no diage 2. The top of the bottom floor (in (check one) the highest adjace 3. For Building Diagrams 6-8 with the part of the platform of mace (check one) the highest adjace 2. For Zone AO only: If no flood floodplain management ordinates and the property owner or owner's authority at FEMA-issued or commutate the pest of my knowledge.  | Cselect the building diagram most similar accurately represents the building, procluding basement or enclosure) of the building basement (Use natural grade, if available achinery and/or equipment servicing the building basement grade. (Use natural grade, if available depth number is available, is the top of the lance?   Yes   No   Unknown.  NF-PROPERTY OWNER (OR OWNER) atthorized representative who completes Septimity-issued BFE) or Zone AO must sign in   | ding is ft. (m) in.  loor or elevated floor (elevation bete Items C3.h and C3.i on front cliding is ft. (m) in.  looe of the local official must certify this separate of the local official must certify this ections A, B, C (Items C3.h and Chere. The statements in Sections | (cm)    above or    below of the building is of form. (cm)    above or    below ance with the community's information in Section G.  CATION C3.i only), and E for Zone A  |
| PROPERTY OWNER'S OR OWNER'   | 'S AUTHORIZED REPRESENTATIVE'S NAME  | 0  |   |
| ADDRESS  | CITY   | STATE  | ZIP CODE  |
| SIGNATURE  | DATE   | TELEPHO  | DNE   |
| COMMENTS   |  |  |   |
|  | ali e de la composición dela composición de la composición de la composición de la composición de la composición dela composición de la composición de la composición dela composición dela composición de la composición dela composición de la composición de la composición dela compos |  | Check here if attachmer   |
|  | SECTION G - COMMUNITY INFO   |  | THE REAL PROPERTY OF THE PARTY |
| ections A, B, C (or E), and G of the control of the | leted Section E for a building located in Zo  Items G4-G9) is provided for community fl  | olicable item(s) and sign below.  at has been signed and embosse by elevation information. (Indicate  one A (without a FEMA-issued or  oodplain management purposes.   | ed by a licensed surveyor,<br>the source and date of the<br>community-issued BFE) or  |
| G4. PERMIT NUMBER  | G5. DATE PERMIT ISSUED   | G6. DATE CERTIFICATE OF (  | COMPLIANCE/OCCUPANCY  |
| 7. This permit has been issued fo<br>8. Elevation of as-built lowest floo<br>9. BFE or (in Zone AO) depth of fl  | r (including basement) of the building is:   |  | ft. (m) Datum:<br>ft. (m) Datum:  |
| OCAL OFFICIAL'S NAME   | 1  | TITLE  |   |
| COMMUNITY NAME   | 7  | ELEPHONE   | ve tak projec   |
| SIGNATURE  |  | DATE   |   |
| COMMENTS   |  |  |   |
| 1  |  |  |   |
|  | A TOTAL TOTA |  | Check here if attachment  |
| EMA Form 81-31, January 2003   |  |  | Replaces all previous editions  |