U.S. DEPARTMENT OF HOMELAND SECURITY

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency

National Flood Insurance Program	Important: Read the instructions of		
	SECTION A - PROPERTY INFO	RMATION	For Insurance Company Use
A1. Building Owner's Name LEGI	ACY HOMES		Policy Number
A2. Building Street Address (including Apt., 5215 OID TO	Unit, Suite, and/or Bldg. No.) or P.O. Route and Bo ZENTON CANE	ox No.	Company NAIC Number
City SARASOTA	State Plo	RIDA	ZIP Code
A3. Property Description (Lot and Block Num	nbers, Tax Parcel Number, Legal Description, etc.)	HUI	
LOT 19, OAK VIE	STA SUBDIVISON		
A4. Building Use (e.g., Residential, Non-Res	idential, Addition, Accessory, etc.) PESIDEN	ITIAL .	
A5. Latitude/Longitude: Lat. N 2 16,	168 Long. 10002 & 1,380	Horizontal	Datum: NAD 1927 NAD
	ling if the Certificate is being used to obtain flood in	surance.	
A7. Bullding Diagram Number A8. For a building with a crawl space or enclo	sure(s), provide: A9. For	a building with an att	ached garage, provide:
a) Square footage of crawl space or enc	losure(s) NA sq ft a) S	Square footage of att	ached garage 200 - sq
<ul> <li>No. of permanent flood openings in the enclosure(s) walls within 1.0 foot above</li> </ul>			d openings in the attached garage bove adjacent grade <u>NA</u>
c) Total net area of flood openings in A8.		otal net area of flood	
05070	ON B - FLOOD INSURANCE RATE MAP (FIF	PM) INFORMATIO	N
		CWI) INFORMATIO	
1. NFIP Community Name & Community Num NINC AREA 135/44	ber B2. County Name SARASOTA		B3. State FORIDA
34. Map/Panel Number   B5. Suffix	B6. FIRM Index B7. FIRM Panel	B8. Flood	B9 Base Flood Elevation(s) (Zi
4. Map/Panel Number BS: Sullix	Date Effective/Revised Date	Zone(s)	AO, use base flood depth)
5141 0154 E	9-26-96 9-3-92	1 At	80
	tion (BFE) data or base flood depth entered in Item	i B9.	
FIS Profile FIRM Con	nmunity Determined Other (Describe)		
Indicate elevation datum used for BFE in Ite	m B9: NGVD 1929 NAVD 1988	Other (Describe)	600
Is the building located in a Coastal Barrier R	esources System (CBRS) area or Otherwise Protect	cted Area (OPA)?	Yes No
Designation Date	CBRS OPA		
SECTION C	BUILDING ELEVATION INFORMATION (S	URVEY REQUIRE	D)
	truction Drawings* Building Under Con	struction*	Finished Construction
A new Elevation Certificate will be required w	nen construction of the building is complete.	ADIA4 ASO ABIAH	ARIAO Complete Here on
Bevations – Zones A1-A30, AE, AH, A (with B elow according to the building diagram specif	FE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE,	AR/A1-A30, AR/AH,	AR/AO. Complete Items C2.a-g
enchmark Utilized CONTY BS		NV(41) 196	19
conversion/Comments	C. I. C. L.		
onversion/Containents	Ch	eck the measuremen	nt used.
	rawl space, or enclosure floor)	feet meters	(Puerto Rico only)
Top of bottom floor (including basement, co	rawi space, or enclosure floor)		(Puerto Rico only)
Top of the next higher floor  Bottom of the lowest horizontal structural m			(Puerto Rico only)
Attached garage (top of slab)	" - 40 - 10		(Puerto Rico only)
Lowest elevation of machinery or equipmen	20 617	-	Puerto Rico only)
(Describe type of equipment in Comments)			* *1
Lowest adjacent (finished) grade (LAG)			Puerto Rico only)
Highest adjacent (finished) grade (HAG)	81.91	feet meters (	Puerto Rico only)
SECTION D. S	SURVEYOR, ENGINEER, OR ARCHITECT C	ERTIFICATION	
	surveyor, engineer, or architect authorized by law		
tion. I certify that the information on this Certification	ifficate represents my best efforts to interpret the date	ta available.	
stand that any false statement may be punished	able by fine or imprisonment under 18 U.S. Code, S	ection 1001.	1
ck here if comments are provided on back of	form		
ock here it continents are provided on back of	Total Control of the		
's Name LALL- Daid	License Number , L	-101	· ·
SCOTT CRIDE	#	5611	
PRESIDENT-OWNIDE	Name FISTINA MAST SUN	EXING	
LATE FORA ALLA TORY	State El ZIP	Code	
MUDDOWN TIVELE	Date 1 C Telephone All M	11 1000	
	11-8-00 1000 941-74	4-4245	

Building Street Address (		ding information from Section A.	For Insumper Comments
5215	(including Apt., Unit, Suite, and/or Bld	g. No.) or P.O. Route and Boy No.	For Insurance Company Us Policy Number
City	OID TRENTON G	State 710 Code	0
SARAGOTA	SECTION D. COMP.	MORIDA	Company NAIC Number
Corry both sides of this Ele	SECTION D - SURVEYOR, EN	GINEER, OR ARCHITECT CERTIFICATION (C	ONTINUED)
Comments	vation Certificate for (1) community of	official, (2) insurance agent/company, and (3) building	owner.
10 10			ta to the W
HIC Y	MACHINERY SERVIC	ES BUIDNIE	
Signature	0/	Date 1 CO	
SECTION E - BUILDI	ING ELEVATION INFORMATION	V (SURVEY NOT REQUIRED) FOR ZONE AO	Check here if attachr
		(GORVET NOT REQUIRED) FOR ZONE AO	AND ZONE A (WITHOUT BFE
and C. For Items E1-E4 use	It BFE), complete Items E1-E5. If the	Certificate is intended to support a LOMA or LOMR-F	request, complete Sections A R
E1. Provide elevation inform	nation for the following and check the	certificate is intended to support a LOMA or LOMR-F ie measurement used. In Puerto Rico only, enter mete appropriate boxes to show whether the elevation is al	ers.
grade (HAG) and the lo	west adjacent grade (LAG).		bove or below the highest adjacen
b) Top of bottom floor (in	ncluding basement, crawl space, or e		ove or below the HAG.
E2. For Building Diagrams 6	ncluding basement, crawl space, or el	vided in Section A Items 8 and/or 9 (see page 8 of Ins	
(elevation C2.b in the dia	agrams) of the building is	feet meters above or below the	tructions), the next higher floor
Es. Auached garage (top of s	slab) is feet	meters Dahove or Dhalou the UAO	inno.
E5. Zone AO only: If no floor	nery and/or equipment servicing the h	uilding is	ve or below the HAG.
ordinance? Yes	No Unknown The local official	of the bottom floor elevated in accordance with the comust certify this information in Section G.	mmunity's floodplain managemen
		must certify this information in Section G.	
SEC	TION F - PROPERTY OWNER (	OR OWNER'S REPRESENTATIVE) CERTIFIC	ATION
The property owner or owner's a	uthorized representative who complete	toe Cooling A D J E C T	ATION
		re correct to the best of my knowledge.	ssued or community-issued BFE)
Property Owner's or Owner's Aut	horized Representative's Name	The state of the second	1
Address	* *		
	of p <sup>ar</sup> s w is a large	City State	ZIP Code
Signature		Date Telephone	12 XX
Comments			3 3 3
		2000 mg	
			П
	SECTION G - COMMU	NITY INFORMATION (OPTIONAL)	Check here if attachments
The local official who is authorized by	law or ordinance to administrath	NITY INFORMATION (OPTIONAL)	
The local official who is authorized by nd G of this Elevation Certificate. Co	<ul> <li>law or ordinance to administer the co omplete the applicable item(s) and sig</li> </ul>	ommunity's floodplain management ordinance can con	nplete Sections A, B, C (or E),
The local official who is authorized by nd G of this Elevation Certificate. Co	/ law or ordinance to administer the co omplete the applicable item(s) and sig	ommunity's floodplain management ordinance can con in below. Check the measurement used in Items G8.	nplete Sections A, B, C (or E), and G9.
The local official who is authorized by and G of this Elevation Certificate. Co.  1. The information in Section C is authorized by law to certificate.	y law or ordinance to administer the co complete the applicable item(s) and sig C was taken from other documentation by elevation information. (Indicate the	ommunity's floodplain management ordinance can con in below. Check the measurement used in Items G8. In that has been signed and sealed by a licensed survey source and date of the elevation data in the Community.	and G9.  eyor, engineer, or architect who
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Replaces all previous editions