

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expiration Date: November 30, 2022

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5060 OLIVIA ROAD			Policy Number:
City VENICE	State Florida	ZIP Code 34293	Company NAIC Number

## SECTION G – COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

- G1.  The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.  A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3.  The following information (Items G4–G10) is provided for community floodplain management purposes.

G4. Permit Number <b>20-113319 BA</b>	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
--	------------------------	---

- G7. This permit has been issued for:  New Construction  Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments (including type of equipment and location, per C2(e), if applicable)

Check here if attachments.

# ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name JOHN J. DEBIASE & JUNE ANN DEBIASE				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5060 OLIVIA ROAD				Company NAIC Number:	
City VENICE		State Florida		ZIP Code 34293	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOTS 19564, 19565, 19566 & 19567, SOUTH VENICE, UNIT 75, PLAT BOOK 7, PAGE 76, PID #0459160104					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL GARAGE</u>					
A5. Latitude/Longitude: Lat. <u>27°02'10.98"N</u> Long. <u>82°24'09.52"W</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 <u>1A</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>					
c) Total net area of flood openings in A8.b <u>N/A</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>N/A</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>					
c) Total net area of flood openings in A9.b <u>N/A</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number SARASOTA COUNTY 125144			B2. County Name SARASOTA COUNTY		B3. State Florida
B4. Map/Panel Number 12115C0342	B5. Suffix F	B6. FIRM Index Date 11-04-2016	B7. FIRM Panel Effective/ Revised Date 11-04-2016	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 11.2
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input checked="" type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expiration Date: November 30, 2022

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5060 OLIVIA ROAD			Policy Number:
City VENICE	State Florida	ZIP Code 34293	Company NAIC Number

## 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: NGS H 635 Vertical Datum: NAVD 1988

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.

Check the measurement used.

- |  |      |  |                                 |
|--|------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor)  | 12.7 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor  | N/A  | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only)  | N/A  | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| d) Attached garage (top of slab)   | N/A  | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) | 17.0 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)   | 12.1 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)  | 12.5 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support                               | N/A  | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |

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

Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  Check here if attachments.

Certifier's Name MICHAEL P ALLEN	License Number PSM6822	Place Seal Here  10-27-20
Title OWNER		
Company Name BRIGHAM/ALLEN LAND SURVEYING		
Address 807 US 41 HIGHWAY BYPASS SOUTH, SUITE A		
City VENICE	State Florida	
Signature 	Date 10-27-2020	Telephone (941) 493-4430
Ext.		

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)

A4 THIS FLOOD ELEVATION CERTIFICATE IS FOR A DETACHED GARAGE.  
 A5 SOURCE OF LAT/LONG IS HAND HELD GPS USING A CONVERSION APP (GPS TEST).  
 C2(a) ELEVATION WAS DETERMINED ON THE EAST GARAGE DOORS, ELEVATION AT THE NORTH DOOR IS 13.0'.  
 C2(e) ELECTRIC METER LOCATED ON THE WEST SIDE OF GARAGE (REAR SIDE).

**ELEVATION CERTIFICATE**

Form No. 680-008  
 Revised Date: 12/20/05

PROPERTY (to be filled in by applicant) The certificate information in this section is to be provided to the County when the certificate is submitted.	6060 OLIVE ROAD Building Street Address (including Apt. #, Unit #, etc.) and Box No.
City	San Diego
County	San Diego
State	California
Parcel Number	22000
Company Name	Company Name
Phone Number	(619) 443-8800

**SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)**

1. Building elevations are based on:

- finished floor elevations
- finished grade elevations
- finished floor elevations at the garage door (see Part 3)
- finished floor elevations at the garage door (see Part 3) and (c) building corner

2. Elevation - Elevation shall be based on the finished floor elevation at the garage door. Elevation shall be based on the finished floor elevation at the garage door.

3. Elevation - Elevation shall be based on the finished floor elevation at the garage door. Elevation shall be based on the finished floor elevation at the garage door.

4. Elevation - Elevation shall be based on the finished floor elevation at the garage door. Elevation shall be based on the finished floor elevation at the garage door.

5. Elevation - Elevation shall be based on the finished floor elevation at the garage door. Elevation shall be based on the finished floor elevation at the garage door.

6. Elevation - Elevation shall be based on the finished floor elevation at the garage door. Elevation shall be based on the finished floor elevation at the garage door.

7. Elevation - Elevation shall be based on the finished floor elevation at the garage door. Elevation shall be based on the finished floor elevation at the garage door.

8. Elevation - Elevation shall be based on the finished floor elevation at the garage door. Elevation shall be based on the finished floor elevation at the garage door.

9. Elevation - Elevation shall be based on the finished floor elevation at the garage door. Elevation shall be based on the finished floor elevation at the garage door.

10. Elevation - Elevation shall be based on the finished floor elevation at the garage door. Elevation shall be based on the finished floor elevation at the garage door.

**SECTION D - SIGNATURE OF ARCHITECT OR SURVEYOR**

1. I hereby certify that the information furnished on this certificate is true and correct to the best of my knowledge and belief, and that I am a duly licensed and qualified professional person in the State of California.

2. I hereby certify that the information furnished on this certificate is true and correct to the best of my knowledge and belief, and that I am a duly licensed and qualified professional person in the State of California.

3. I hereby certify that the information furnished on this certificate is true and correct to the best of my knowledge and belief, and that I am a duly licensed and qualified professional person in the State of California.

4. I hereby certify that the information furnished on this certificate is true and correct to the best of my knowledge and belief, and that I am a duly licensed and qualified professional person in the State of California.

5. I hereby certify that the information furnished on this certificate is true and correct to the best of my knowledge and belief, and that I am a duly licensed and qualified professional person in the State of California.

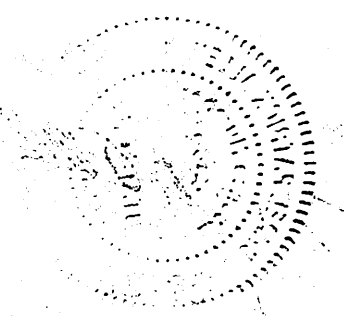
6. I hereby certify that the information furnished on this certificate is true and correct to the best of my knowledge and belief, and that I am a duly licensed and qualified professional person in the State of California.

7. I hereby certify that the information furnished on this certificate is true and correct to the best of my knowledge and belief, and that I am a duly licensed and qualified professional person in the State of California.

8. I hereby certify that the information furnished on this certificate is true and correct to the best of my knowledge and belief, and that I am a duly licensed and qualified professional person in the State of California.

9. I hereby certify that the information furnished on this certificate is true and correct to the best of my knowledge and belief, and that I am a duly licensed and qualified professional person in the State of California.

10. I hereby certify that the information furnished on this certificate is true and correct to the best of my knowledge and belief, and that I am a duly licensed and qualified professional person in the State of California.







# BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008  
Expiration Date: November 30, 2022

## ELEVATION CERTIFICATE

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5060 OLIVIA ROAD			Policy Number:
City VENICE	State Florida	ZIP Code 34293	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 One

Photo One Caption FRONT 10/22/2020

Clear Photo One



Photo Two

Photo Two Caption REAR 10/22/2020

Clear Photo Two

# BUILDING PHOTOGRAPHS

## ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008  
Expiration Date: November 30, 2022

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5060 OLIVIA ROAD			Policy Number:
City VENICE	State Florida	ZIP Code 34293	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 Three

Photo Three

Photo Three Caption

Clear Photo Three

Photo Four

Photo Four

Photo Four Caption

Clear Photo Four