

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
1733 OLYMPIA FIELDS ST

FOR INSURANCE COMPANY USE
Policy Number:

City
SARASOTA

State
Florida

ZIP Code
34234

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
19-118634 B1

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

A1. Building Owner's Name DAVID GATCHEL		FOR INSURANCE COMPANY USE Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1733 OLYMPIA FIELDS ST		Company NAIC Number:	
City SARASOTA	State Florida	ZIP Code 34234	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 464, TRI PAR ESTATES, UNIT 5			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL			
A5. Latitude/Longitude: Lat. 27.375039		Long. -82.536106	
		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 8			

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s) 1224 sq ft

b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 22

c) Total net area of flood openings in A8.b 1232 sq in

d) Engineered flood openings? Yes No

A9. For a building with an attached garage:

a) Square footage of attached garage N/A sq ft

b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A

c) Total net area of flood openings in A9.b N/A sq in

d) Engineered flood openings? Yes No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number SARASOTA-125114		B2. County Name SARASOTA		B3. State Florida	
B4. Map/Panel Number 12115C-0131	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) 17.5 FEET

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

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City State
SARASOTA Florida

ZIP Code Company NAIC Number
34234

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, ARA, ARAE, ARA1-A30, ARAH, 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: J 279 Vertical Datum: NAVD 88

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, crawspace, or enclosure floor) _____ 18.0 feet meters
- b) Top of the next higher floor _____ 20.9 feet meters
- c) Bottom of the lowest horizontal structural member (V Zones only) _____ N/A feet meters
- d) Attached garage (top of slab) _____ N/A feet meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) _____ 18.6 feet meters
- f) Lowest adjacent (finished) grade next to building (LAG) _____ 16.9 feet meters
- g) Highest adjacent (finished) grade next to building (HAG) _____ 17.8 feet meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____ N/A feet 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 License Number
LELAND E. BEDWELL PSM 5884

Title
REGISTERED SURVEYOR

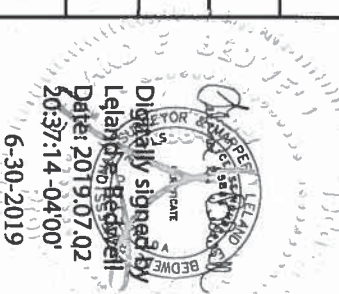
Company Name
LELAND E. BEDWELL SURVEYING, INC.

Address
3423 55TH DRIVE EAST

City State ZIP Code
BRADENTON Florida 34203

Signature Date: 2019.07.02 20:37:28
Leland E. Bedwell Digitally signed by Leland E. Bedwell
94999

Date Telephone Ext
06-30-2019 (941) 753-9994 NA



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)
LOWEST MACHINERY/EQUIPMENT SERVICING

THE BUILDING BEING A/C SEE ATTACHED, BOTTOM FRAME= 19.6 FEET,
THERE ARE 22-8x16 shop air vents @ 56 sq. in. each, for a total of 1232 sq. in. of net-free area, includes 1 vent at a/c stand, SEE PHOTOS

NOTE, THIS CERTIFICATE IS NONTRANSFERABLE, AND IS ONLY VALID TO: DAVID GATCHEL

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SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).

a) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ N/A feet meters above or below the HAG.

b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ N/A feet meters above or below the LAG.

E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ N/A feet meters above or below the HAG.

E3. Attached garage (top of slab) is _____ N/A feet meters above or below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is _____ N/A feet meters above or below the HAG.

E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative's Name
N/A

Address
N/A

City
N/A

State
N/A

ZIP Code
N/A

Signature
Date
Telephone

Comments

Check here if attachments.

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BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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City SARASOTA	State Florida	Company NAIC Number
	ZIP Code 34234	

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.



FRONT / SIDE



FRONT

Photo One Caption

Photo One

Clear Photo One



SIDE



VENTS



REAR

Photo Two Caption

Photo Two

Clear Photo Two

ELEVATION CERTIFICATE**BUILDING PHOTOGRAPHS**

Continuation Page

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Policy Number:City
SARASOTAState
FloridaZIP Code
34234

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 Caption

Photo Three

Clear Photo Three

Photo Four

Photo Four Caption

Photo Four

Clear Photo Four