U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

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

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.

					OR INSUR	RANCE COMPANY USE	
A1. Building Owner's Name WILLIAM B & SUSAN E NEWBEGIN Policy Number:					ber:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.1220 ORANGE AVE					Route and (Company N	AIC Number:
City NOKOMIS						IP Code 4275	
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 1, HIDDEN BAY ESTATES						
A4. Building Use (e	.g., Resident	ial, Non-Residential, A	ddition,	Accessory, etc.)	RESIDENTIAL		6
A5. Latitude/Longit	ude: Lat. <u>27</u>	°08'14.02"N L	.ong. <u>8</u> 2	2°26'16.71"W	Horizontal Datum:	□ NAD 1	927 X NAD 1983
A6. Attach at least	2 photograph	s of the building if the	Certific	ate is being used to	o obtain flood insurar	ice.	
A7. Building Diagra	m Number _	1B					
A8. For a building v	vith a crawlsp	ace or enclosure(s):					
a) Square foot	age of crawis	pace or enclosure(s)		0 sq ft			
b) Number of p	ermanent flo	od openings in the cra	wispac	e or enclosure(s) w	ithin 1.0 foot above a	idjacent gra	ade0
c) Total net are	ea of flood op	enings in A8.b0	s	q in			
d) Engineered	flood opening	gs? ☐ Yes ☒ No)				<i>t</i> :
A9. For a building v	A9. For a building with an attached garage:						-
a) Square foot	a) Square footage of attached garage694 sq ft						
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0							
c) Total net area of flood openings in A9.b 0 sq in							
d) Engineered flood openings? Yes No							
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name B3. State							
SARASOTA 12514		Similarity Number		SARASOTA			Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Ef	IRM Panel ffective/ evised Date	B8. Flood Zone(s)	(Zor	se Flood Elevation(s) ne AO, use Base od Depth)
12115C 0239	F	11/04/2016		/2016	AE	10	од Берију
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 X 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							
, ==							
		****		****	<u> </u>		

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MPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Rout 1220 ORANGE AVE	te and Box No.	Policy Number:			
City State ZIP (NOKOMIS Florida 3427	Company NAIC Number				
SECTION C - BUILDING ELEVATION INFORMAT	ION (SURVEY RI	EQUIRED)			
*A new Elevation Certificate will be required when construction of the buildir C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BF Complete Items C2.a–h below according to the building diagram specified in	E), AR, AR/A, AR/ n Item A7. In Puert	 /AE, AR/A1-A30, AR/AH, AR/AO.			
Benchmark Utilized: SARASOTA CO BM 383-H Vertical Datum:	~-				
Indicate elevation datum used for the elevations in items a) through h) below ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source:	v.				
Datum used for building elevations must be the same as that used for the B	FE.	Charle the management would			
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	12, 1	Check the measurement used.			
b) Top of the next higher floor	N/A	X feet meters			
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A				
d) Attached garage (top of slab)	10 24	X feet meters meters			
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	11.0	X feet meters			
f) Lowest adjacent (finished) grade next to building (LAG)	10, 0	X feet meters			
g) Highest adjacent (finished) grade next to building (HAG)	10, 8	X feet meters			
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	10.1	X feet meters			
	LITECT CERTIE	ICATION			
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 LAWRENCE R WEBER 3868					
Title		ENGE R			
PROFESSIONAL SURVEYOR & MAPPER					
Company Name WEBER ENGINEERING & SURVEYING, INC.		Sea 3868			
Address 4596 ASHTON ROAD		STATE OF			
City State Florida	ZIP Code 34233	SONAL PORIDA			
Signature Date 31/17	Telephone (941) 921-3914	SURVE			
Copy all pages of this Elevation Certificate and all attachments for (1) community of	icial, (2) insurance	agent/company, and (3) building owner.			
Comments (including type of equipment and location, per C2(e), if applicable) C2.d - Ac C2.h - deck A5 - LAT/LONG FROM FEMA INTERACTIVE MAP					

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the co	rresponding information	n from Section A.	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, 1220 ORANGE AVE	Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:			
City	State	ZIP Code	Company NAIC Number			
NOKOMIS	Florida	34275				
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)						
For Zones AO and A (without BFE), complete complete Sections A, B,and C. For Items E1-enter meters.	e Items E1–E5. If the Cer -E4, use natural grade, if	tificate is intended to suppo f available. Check the measu	rt a LOMA or LOMR-F request, urement used. In Puerto Rico only,			
E1. Provide elevation information for the follothe the highest adjacent grade (HAG) and the	e lowest adjacent grade	ropriate boxes to show when (LAG).	ther the elevation is above or below			
 Top of bottom floor (including baseme crawlspace, or enclosure) is 		feet me	eters above or below the HAG.			
 b) Top of bottom floor (including baseme crawlspace, or enclosure) is 	ent, 	[] feet [] me	eters above or below the LAG.			
E2. For Building Diagrams 6–9 with permane the next higher floor (elevation C2.b in	ent flood openings provid	led in Section A Items 8 and	Vor 9 (see pages 1–2 of Instructions),			
the diagrams) of the building is		feet me	eters above or below the HAG.			
E3. Attached garage (top of slab) is		feet me	eters above or below the HAG.			
E4. Top of platform of machinery and/or equ servicing the building is	ipment	feet me	eters above or below the HAG.			
E5. Zone AO only: If no flood depth number floodplain management ordinance?						
SECTION F - PROPE	RTY OWNER (OR OWN	NER'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 Repre	esentative's Name		8 1			
Address		City	State ZIP Code			
Signature		Date	Telephone			
Comments						
27						
er en						
		30	☐ Check here if attachments.			

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, St 1220 ORANGE AVE	uite, and/or Bldg. No.)	or P.O. Route and Box	No. Policy Number:
City	State	ZIP Code	Company NAIC Number
NOKOMIS	Florida	34275	
SECTIO	N G - COMMUNITY	INFORMATION (OPTION	ONAL)
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete ter meters.	the applicable item(s)	and sign below. Check the measurement
engineer, or architect who is authoriz data in the Comments area below.)	ed by law to certify el	evation information. (Inc	igned and sealed by a licensed surveyor, licate the source and date of the elevation
G2. A community official completed Section Zone AO.	on E for a building loo	cated in Zone A (without	t a FEMA-issued or community-issued BFE)
G3. The following information (Items G4–	G10) is provided for (community floodplain ma	anagement purposes.
G4. Permit Number	G5. Date Permit Iss	sued	G6. Date Certificate of
16-139199			Compliance/Occupancy Issued
G7. This permit has been issued for:] New Construction [☐ Substantial Improver	nent
G8. Elevation of as-built lowest floor (including of the building:	g basement)		feet meters Datum
G9. BFE or (in Zone AO) depth of flooding at	the building site:	<u> </u>	feet meters Datum
G10. Community's design flood elevation:	_	•	feet meters Datum
Local Official's Name		Title	
Community Name		Telephone	
Signature		Date	W
		- Bankla	
Comments (including type of equipment and lo	cation, per C2(e), if a	oplicable)	
10			
6			
		345 gr	
		1	Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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City	State	ZIP Code	Company NAIC Number
NOKOMIS	Florida	34275	

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 VIEW 2-27-17



Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces,	FOR INSURANCE COMPANY USE		
Building Street Address (including 1220 ORANGE AVE	ng Apt., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
NOKOMIS	Florida	34275	

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 One

Photo One Caption RIGHT SIDE VIEW 2-27-17



Photo Two

Photo Two Caption LEFT SIDE VIEW 2-27-17