

# 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. 55 Palm Grove (Shed)	FOR INSURANCE COMPANY USE Policy Number:
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City Englewood	State Florida	ZIP Code 34223
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### 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>18-126443 BA</b>	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
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G7. This permit has been issued for:  New Construction  Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) \_\_\_\_\_ meters Datum \_\_\_\_\_ of the building:  feet  meters

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	Telephone
Community Name		
Signature		Date

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

Check here if attachments.

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P. O. Route and Box No. **FOR INSURANCE COMPANY USE**  
55 Palm Grove (Shed) Policy Number:

City Englewood State Florida ZIP Code 34223 Company NAIC Number

**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 \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  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 \_\_\_\_\_  feet  meters  above or  below the HAG.

E3. Attached garage (top of slab) is \_\_\_\_\_  feet  meters  above or  below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_  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

Address City State ZIP Code

Signature Date Telephone

Comments

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 Cliff Colvin		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. 55 Palm Grove (Shed)		Company NAIC Number:	
City Englewood	State Florida	ZIP Code 34223	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 4/ Block 1/Allenwood			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Accessory			
A5. Latitude/Longitude: Lat 26°57'23" Long 82°21'15"		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 1A			

- A8. For a building with a crawlspace or enclosure(s):
- a) Square footage of crawlspace or enclosure(s) n/a sq ft
- b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade n/a
- c) Total net area of flood openings in A8.b n/a 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 County 125144		B2. County Name Sarasota	B3. State Florida
B4. Map/Panel Number 12015C0453	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'

- 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

**ELEVATION CERTIFICATE**

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City Englewood	State Florida	Company NAIC Number
	ZIP Code 34223	

**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, AR/AH, ARAO. Complete items C2.a-h below according to the building diagram specified in item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: NGS BM PID # AG9528 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)  | <u>12</u> <u>1</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| b) Top of the next higher floor  | <u>n/a</u>         | <input type="checkbox"/> feet <input type="checkbox"/> meters            |
| c) Bottom of the lowest horizontal structural member (V Zones only)  | <u>n/a</u>         | <input type="checkbox"/> feet <input type="checkbox"/> meters            |
| d) Attached garage (top of slab)   | <u>n/a</u>         | <input checked="" 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) | <u>n/a</u>         | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)   | <u>11</u> <u>9</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)  | <u>12</u> <u>0</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support                               | <u>n/a</u>         | <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 Joseph E. Trott	License Number #5153	 Place Seal Here
Title President		
Company Name Meridian Group of South Florida, Inc.		
Address 493 Barger Drive, Unit A		
City Port Charlotte	State Florida	ZIP Code 33954
Signature 	Date 11/19/2018	Telephone (941) 766-0011
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)		

**ELEVATION CERTIFICATE**

**BUILDING PHOTOGRAPHS**

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See Instructions for Item A6.

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City Englewood	State Florida	ZIP Code 34223
FOR INSURANCE COMPANY USE		Company NAIC Number
Policy 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 Caption Front View (Shed) 11/19/18



Photo Two Caption Rear View (Shed) 11/19/18

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**BUILDING PHOTOGRAPHS**

Continuation Page

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P. O. Route and Box No.  
55 Palm Grove (Shed)

Policy Number:

City State ZIP Code  
Englewood Florida 34223

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 One**

Photo One

Photo One Caption

**Photo Two**

Photo Two

Photo Two Caption