15-129047 Bz

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28, 2009

National Flood Insurance Program

Important: Read the instructions on pages 1-8

Transfer Francisco			TION A - PROPERT			For Insurance Company Use:		
SECTION A - PROPERTY INFORMATION A1. Building Owner's Name						Policy Number		
A1. Building Owner's Name Andrew J. Sloman A2. Building Street Address (including Apt., Unit, Syite, and/or Bldg. No.) or P.O. Route and Box No.						Company NAIC Number		
City State						IP Code		
Sarasota	1 11 11 1 1 1 1 1 1 1			FL		34242		
	A3 Properly Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Metes & Bound							
A4. Building Use (e.g., Residential, Non-R	esidential, Addition, A	ccessorv. etc.) Resi	dential				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat. 27 14'54" N Long. 82 31'44" Horizontal Datum: NAD 1927 X NAD 1983								
	2 photographs of the bu	uilding if the Certificate	e is being used to obta	in flood insurance				
A7. Building Diagra	am Number _ with a crawl space or en	odocuro(a) provida:		AO Ear a buildin	a with an attack	ned garage, provide: 🔒		
	lage of crawl space or e		D sq ft		foolage of allact	. 110/		
	nanent flood openings in		0			openings in the attached garage		
	s) walls within 1.0 foot a		sq in			ve adjacent grade NIK sq in		
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name B3. State								
	sota County 1251		B2. County Name	arasota		33. State FL		
84. Map/Panel Nu	mber B5. Suffix	B6. FIRM Index	B7. FIRM F		B8. Flood	B9. Base Flood Elevation(s) (Zone		
125144 020	7 E	Date 09/03/92	Effective/Revis 09/03/9		Zone(s) AE	AO, use base flood depth) 11		
B10. Indicate the so	urce of the Base Flood I	Elevation (BFE) data	or base flood depth en	tered in Item B9.				
FIS Profile		Community Determine	=					
	on datum used for BFE				r (Describe)			
Designation Da	ocated in a Coastal Bar	rier Resources Syste	m (CBRS) area or Oth 	erwise Protected / PA	Area (OPA)?	Yes X No		
	SECTIO	ON C - BUILDING E	LEVATION INFOR	MATION (SURV	EY REQUIRE	D)		
C1. Building elevations are based on: Construction Drawings* Building Under Construction*								
	Certificate will be requi			•	A4 A20 AD/AU	AR/AO. Complete Items C2.a-g		
	to the building diagram		10, V (WILLI BEE), AR, A	ANA, ANAE, AN	A 1-A30, ANAN,	ANAO. Complete items 62.a-g		
	ed AED STATE BY	1, SQ.CUTINO		ertical Datum NG	VD 1929			
Conversion/Con	mentsVI	sta hermosa	CIP.					
					the measurem	ent used.		
a) Top of botto	m floor (including base	ment, crawl space, or	enclosure floor)	4.7 × fee		rs (Puerto Rico only)		
	ext higher floor			JA X fee		rs (Puerto Rico only)		
	e lowest horizontal stru rage (top of slab)	clural member (V Zor	ies only)	N/AX fee		rs (Puerto Rico only) rs (Puerto Rico only)		
	ation of machinery or e	quipment servicing the	e building	4.7 X fee		rs (Puerto Rico only)		
(Describe type of equipment in Comments)								
	cent (finished) grade (L	•		4.5 X fee	=	rs (Puerto Rico only)		
g) Highest adj	acent (finished) grade (F	TAG),		49 X fee	at Interes	rs (Puerto Rico only)		
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION								
	be signed and sealed					n		
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.								
Check here if comments are provided on back of form.								
E.J Check liele ii co	mments are provided of	n back of form.						
Certifier's Name	EDT C BOUCE		Licens	se Number				
Title	ERT G. BRUCE	Company Name	D OTAVE OUTSTO	4519		- Rolling		
OWNER Address		City	D STAKE SURVEYO Slate		Code	- 10 KJ'		
7123 PROCTO	₹RD.	SARASOTA	Fl	•	34241	_1/LOW 1		
Signature Soft	Tell Ind	Date 12/	Teleph 16/2009	one (941) 923 - 999	97	41		

IMPORTANT: In these spaces, co	opy the corresponding information fro	om Section A.	For Insurance Company Use:
Building Street Address (including Apt., 6841 Peacock Rd.	Unit, Suite, and/or Bldg. No.) or P.O. Route a	and Box No.	Policy Number
City Sarasota	State FL	ZIP Code 34242	Company NAIC Number
SECTION I	D - SURVEYOR, ENGINEER, OR ARCH	HITECT CERTIFICATION (CO	NTINUED)
Copy both sides of this Elevation Certific	cate for (1) community official, (2) insurance a	agent/company, and (3) building ov	wner.
Comments jection B. Flood insurance rate man (FIRM) is	nformation to be verified at local F.E.M.A. control	office Elle #09020294	
The state of the s	Hormaton to be verified at local P.E.M.A. Control	Office File #96030384	
Signature Signature	Date	e	
SECTION E PUIL DING ELEV		16/2009	Check here if attachment
SECTION E - BUILDING ELEV	ATION INFORMATION (SURVEY NOT	REQUIRED) FOR ZONE AO	AND ZONE A (WITHOUT BFE)
For Zones AO and A (without BFE), com	nplete Items E1-E5. If the Certificate is intend	ded to support a LOMA or LOMR-I	request, complete Sections A, B,
E1. Provide elevation information for the	ade, if available. Check the measurement using following and check the appropriate boxes	ed. In Puerto Rico only, enter me	lers.
grade (rind) and the lowest adjact	eni grade (LAG).		
 b) Top of bottom floor (including ba 	asement, crawl space, or enclosure) is asement, crawl space, or enclosure) is	feet meters	above or below the HAG.
E2. For Building Diagrams 6-8 with per	manent flood openings provided in Section A	Items 8 and/or 9 (see page 8 of)	nstructions), the next higher floor
(elevation C2.b in the diagrams) of E3. Attached garage (top of slab) is		meters above or below	the HAG.
E4. Top of platform of machinery and/o	or equipment servicing the building is	feet	above or below the HAG.
E5. Zone AO only: If no flood depth nu	imber is available, is the top of the bottom floo	or elevated in accordance with the	community's floodplain management
ordinance? L Yes L No L	Unknown. The local official must certify this i	information in Section G.	
SECTION F	- PROPERTY OWNER (OR OWNER'S	REPRESENTATIVE) CERTII	FICATION
The property owner or owner's authorized	representative who completes Sections A. E	B. and E for Zone A (without a FEI	
or Zone AO must sign here. The stateme Property Owner's or Owner's Authorized	ents in Sections A, B, and E are correct to the	best of my knowledge.	
	Representative's Name		
Address	City	State	ZIP Code
Signature	Date	Telepho	ne
Comments			
	SECTION C. COMMUNITY INCOM		Check here if attachmen
he local official who is authorized by law o	SECTION G - COMMUNITY INFOR or ordinance to administer the community's flo	odolain management ardinance o	an complete Sections A. R. C. (or E.)
nd Gor this Elevation Certificate. Comple	te the applicable item(s) and sign below. Che	eck the measurement used in Iten	ns G8. and G9.
The information in Section C was is authorized by law to certify elem-	taken from other documentation that has bee vation information. (Indicate the source and d	en signed and sealed by a license	d surveyor, engineer, or architect who
2. A community official completed S	ection E for a building located in Zone A (with	pare of the elevation data in the Co	vissued BEE) or Zone AO
3. The following information (Items (G4G9.) is provided for community floodplain	management purposes.	rissued bit E) of Zone AO.
04.0- 244	55. Date Permit Issued	G6. Date Certificate Of Comp	liance/Occupancy Issued
7. This permit has been issued for:	New Construction Substantial Impro	pvement	
Elevation of as-built lowest floor (included)		feet meters (P	
BFE or (in Zone AO) depth of flooding a	t the building site:	feet meters (P	R) Datum
ocal Official's Name	Tit	le	
Community Name	Te	lephone	
Signature	Da	ite	
Comments			
			Check here if attachment

Building Photographs See Instructions for Item A6.

			For Insurance Company Use:
Building Street Address (include	Policy Number		
6841 Peacock Rd.			
City Sarasota	State FL	ZIP Code 34242	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page, following.



Front View - Guest House

Rear View Guest House

