

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name DAVID & MICHELLE BALOT	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. 7351 PERWINKLE DRIVE	Company NAIC Number
City SARASOTA State FL ZIP Code 34229	

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
LOT 12, BLOCK C, CORAL COVE, UNIT 3

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL

A5. Latitude/Longitude: Lat. N.27°14'46.7" Long. W. 82°31'01.4"

Horizontal Datum:  NAD 1927  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 1

A8. For a building with a crawl space or enclosure(s), provide

- a) Square footage of crawl space or enclosure(s) N/A sq ft  
 b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade N/A  
 c) Total net area of flood openings in A8.b N/A sq in

A9. For a building with an attached garage, provide:

- a) Square footage of attached garage 654 sq ft  
 b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade N/A  
 c) Total net area of flood openings in A9.b N/A sq in

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number SARASOTA 125144		B2. County Name SARASOTA		B3. State FL	
B4. Map/Panel Number 125144 0236	B5. Suffix D	B6. FIRM Index Date MAY 1, 1984	B7. FIRM Panel Effective/Revised Date SEPTEMBER 3, 1992	B8. Flood Zone(s) A12	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 11.0

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 (Describe) \_\_\_\_\_

Indicate elevation datum used for BFE in Item B9:  NGVD 1929  NAVD 1988  Other (Describe) \_\_\_\_\_

Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Yes  No  
 Designation Date N/A  CBRS  OPA

## 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-g below according to the building diagram specified in Item A7.

Benchmark Utilized \*\*SEE COMMENTS Vertical Datum NGVD 1929

Conversion/Comments \_\_\_\_\_

Check the measurement used.

- a) Top of bottom floor (including basement, crawl space, or enclosure floor) 12.7  feet  meters (Puerto Rico only)  
 b) Top of the next higher floor 26.2  feet  meters (Puerto Rico only)  
 c) Bottom of the lowest horizontal structural member (V Zones only) N/A  feet  meters (Puerto Rico only)  
 d) Attached garage (top of slab) 12.3  feet  meters (Puerto Rico only)  
 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) 12.3  feet  meters (Puerto Rico only)  
 f) Lowest adjacent (finished) grade (LAG) 11.6  feet  meters (Puerto Rico only)  
 g) Highest adjacent (finished) grade (HAG) 12.7  feet  meters (Puerto Rico only)

## 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.

Check here if comments are provided on back of form.

Surveyor's Name WILLIAM J. MCALLISTER	License Number 5283
Title PRESIDENT	Company Name DARRELL E. GERKEN PSM, INC.
Address 5730A JASON LEE PLACE	City SARASOTA State FL ZIP Code 34233
Signature <i>William J. McAllister</i>	Date 08/17/07 Telephone (941)-924-7465

*William J. McAllister*  
#5283  
08/17/07