ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, St 106 RUBY AVENUE SOUTH	ite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:	
City NOKOMIS	State Florida	ZIP Code 34275	Company NAIC Number	
SECTIO	N G - COMMUNITY INF	ORMATION (OPTIONAL)		
The local official who is authorized by law or ord Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, ent	Certificate Complete the	community's floodplain maga applicable item(s) and sig	anagement ordinance can complete n below. Check the measurement	
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 or Zone AO.	on E for a building located	d in Zone A (without a FEM	A-issued or community-issued BFE)	
G3. The following information (Items G4–0	310) is provided for com	munity floodplain managen	nent purposes.	
G4. Permit Number 20 → 10 115 B	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued	
G7. This permit has been issued for:	New Construction S	ubstantial Improvement		
G8. Elevation of as-built lowest floor (including of the building:	basement)	feet	meters Datum	
G9. BFE or (in Zone AO) depth of flooding at the	ne building site:	feet	meters Datum	
G10. Community's design flood elevation: Local Official's Name			meters Datum	
Local Official's Name	Т	itle	,	
Community Name	Т	elephone		
Signature	С	Pate		
Comments (including type of equipment and location, per C2(e), if applicable)				
			Chook have if all a large	
			☐ Check here if attachments.	

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

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

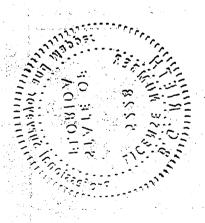
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

	TION A - PROPERTY	INFOR	MATION		<u>-</u>	JRANCE COMPANY USE
A1. Building Owner's Name STACY ANN HASKETT					Policy Nu	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 106 RUBY AVENUE SOUTH				nd Company	NAIC Number:	
City NOKOMIS			State Florida		ZIP Code 34275	
A3. Property Description (Lot ar LOT 22, BLK G, GENEVA HEIG	nd Block Numbers, Ta HTS, TAX ID #03861	x Parce 40061	l Number, Le	gal Description,	etc.)	
A4. Building Use (e.g., Resident	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL					
A5. Latitude/Longitude: Lat. 27	7.12549°	Long{	32.42720°	Horizor	ntal Datum: NAD	1927 × NAD 1983
A6. Attach at least 2 photograph	ns of the building if the	e Certific	ate is being i	used to obtain flo	ood insurance.	
A7. Building Diagram Number	5					
A8. For a building with a crawlsp	pace or enclosure(s):					
a) Square footage of crawls	space or enclosure(s)			0 sq ft		
b) Number of permanent floo	od openings in the cra	awispac	e or enclosur	e(s) within 1.0 fo	oot above adjacent g	rade 0
c) Total net area of flood op	enings in A8.b	_	0 sq ir	1		
d) Engineered flood opening	gs? ☐ Yes ⊠ N	lo				
A9. For a building with an attache	ed garage:					
a) Square footage of attache	ed garage		0 sq fi			
b) Number of permanent floo	od openings in the att	ached o	arage within	1 0 foot above a	idiacent grade 0	
	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade C) Total net area of flood openings in A9.b O sg in					
d) Engineered flood openings? Yes No						
SE /	CTION D. FLOOD					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name B3. State						
SARASOTA COUNTY - 125144			B2. County SARASOTA			B3. State Florida
B4. Map/Panel Number	B6. FIRM Index Date	Effective/ Revised Date		B8. Flood Zone(s)	B9. Base Flood I (Zone AO, us	Elevation(s) se Base Flood Depth)
12115C-0331 F	11-04-2016			AE	10.1'	.1'
B10. Indicate the source of the B	ase Flood Elevation (BFE) da	ata or base flo	ood depth entere	ed 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 X No						
Designation Date: CBRS OPA						

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: 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. Route and Box No. 106 RUBY AVENUE SOUTH	Policy Number:			
City State ZIP Code NOKOMIS Florida 34275	Company NAIC Number			
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY R	EQUIRED)			
C1. Building elevations are based on: Construction Drawings* Building Under 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/C Complete Items C2.a—h below according to the building diagram specified in Item A7. In Puert Benchmark Utilized: NGS BM#K723 EL: 11.09' Vertical Datum: NAVD1988 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. a) Top of bottom floor (including basement, crawlspace, or enclosure floor) b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (HAG)	uction* Finished Construction AF AR/A1_A30 AR/AH AR/A0			
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 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 Certifier's Name	Check here if attachments.			
B. GREGORY RIETH Title PSM/CFM Company Name STRAYER SURVEYING AND MAPPING, INC. Address 742 SHAMROCK BLVD City VENICE State Florida Date 05-22-2020 Telephone (941) 497-1290	Ext.			
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) FILE #19-09-07. THE OUTSIDE A/C UNIT ON THE EAST SIDE OF THE HOME WAS USED FOR SECTION C2e. SECTION A5 WAS DERIVED FROM A HAND HELD G.P.S. UNIT (GPSTEST APP - NO CONVERSION). CERTIFICATE VALID ONLY WITH ORIGINAL SIGNATURE & RAISED SEAL.				



Andrew St.

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ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding information fro	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.0 106 RUBY AVENUE SOUTH	O. Route and Box No.	Policy Number:			
City State NOKOMIS Florida	ZIP Code 34275	Company NAIC Number			
SECTION E — BUILDING ELEVATION INFORM FOR ZONE AO AND ZONE A	MATION (SURVEY NOT A (WITHOUT BFE)	REQUIRED)			
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificat complete Sections A, B,and C. For Items E1–E4, use natural grade, if availanter meters.	e is intended to support a able. Check the measure	LOMA or LOMR-F request, ment used. In Puerto Rico only,			
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 The of the transfer	feet meter	s above or below the HAG.			
b) Top of bottom floor (including basement, crawlspace, or enclosure) is		s 🔲 above or 🔲 below the LAG.			
E2. For Building Diagrams 6–9 with permanent flood openings provided in the next higher floor (elevation C2.b in					
the diagrams) of the building is E3. Attached garage (top of slab) is	feet meter				
E4. Top of platform of machinery and/or equipment	feet meter	s above or below the HAG.			
servicing the building is	feet meter				
E5. Zone AO only: If no flood depth number is available, is the top of the bo floodplain management ordinance?	ottom floor elevated in acc The local official must o	cordance with the community's certify this information in Section G.			
SECTION F - PROPERTY OWNER (OR OWNER'S	REPRESENTATIVE) CE	RTIFICATION			
The property owner or owner's authorized representative who completes Se community-issued BFE) or Zone AO must sign here. The statements in Sec	ections A, B, and E for Zortions A, B, and E are corr	ne A (without a FEMA-issued or ect to the best of my knowledge.			
Property Owner or Owner's Authorized Representative's Name					
Address City	Sta	ite ZIP Code			
Signature Date	Tel	ephone			
Comments	· · · · · · · · · · · · · · · · · · ·				
		Check here if attachments.			

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces	41		Expiration Date. November 30, 2022
Building Street Address (including 106 RUBY AVENUE SOUTH	Apt., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	FOR INSURANCE COMPANY USE Policy Number:
City NOKOMIS	State Florida	ZIP Code 34275	Company NAIC 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.

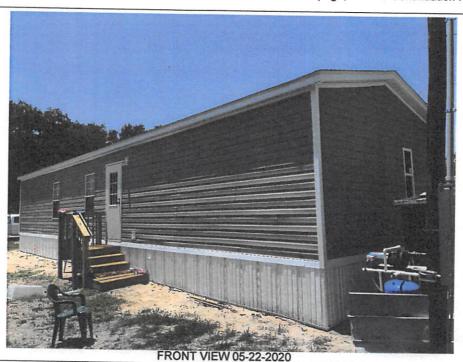


Photo One Caption

Clear Photo One



Photo Two Caption

REAR VIEW 05-22-2020

Clear Photo Two