FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FL'OOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires July 31, 2002

Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: Policy Number BUILDING OWNER'S NAME **BOB HOWARD** BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 504 SOUTH SHORE DRIVE STATE ZIP CODE CITY **FLORIDA NOKOMIS** PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 32, BLOCK E, SORRENTO SHORES, UNIT FIVE, PLAT BOOK 17, PAGE 34 & 34A, PUBLIC RECORDS OF SARASOTA COUNTY, FLORIDA BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): USGS Quad Map Other: (##° - ##' - ##.##" or ##.####") □ NAD 1927 □ NAD 1983 SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME** B3. STATE SARASOTA FI ORIDA CITY OF SARASOTA - 125144 **B7. FIRM PANEL** B9. BASE FLOOD ELEVATION(S) **B5. SUFFIX B4. MAP AND PANEL** B8. FLOOD ZONE(S) **B6. FIRM INDEX DATE** EFFECTIVE/REVISED DATE (Zone AO, use depth of flooding) NUMBER +11.0" 125144-0236 n 9/9/92 5-1-84 A12 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. **⊠** FIRM Community Determined Other (Describe): FIS Profile B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe): B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes 🛛 No Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) □ Finished Construction ■ Building Under Construction* C1. Building elevations are based on: Construction Drawings* *A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) C3. 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 3600-2002 dns Complete Items C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion. Datum NGVD 1929 Conversion/Comments N/A Elevation reference mark used CTY BM Does the elevation reference mark used appear on the FIRM? Yes No 15. 42 ft.(m) o a) Top of bottom floor (including basement or enclosure) Embossed Seal o b) Top of next higher floor 25.42 ft.(m) Date o c) Bottom of lowest horizontal structural member (V zones only) N . A ft.(m) and o d) Attached garage (top of slab) 11. 96 ft.(m) o e) Lowest elevation of machinery and/or equipment License Number, Signature, servicing the building (Describe in a Comments area) 14.5ft(m) o f) Lowest adjacent (finished) grade (LAG) 10.6 ft.(m) o g) Highest adjacent (finished) grade (HAG) 13. 5 ft.(m) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade NA LS 2915 5/25/04 o i) Total area of all permanent openings (flood vents) in C3.h NA sq. in. (sq. cm) 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 in Sections A, B, and C 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. CERTIFIER'S NAME: CALVIN J. REED LICENSE NUMBER: LS 2915 TITLE: PROFESSIONAL LAND SURVEYOR COMPANY NAME: CALVIN REED SURVEYING, INC. CITY: SARASOTA STATE: FLORIDA ZIP CODE: 34234 ADDRESS: 4600 TRI-PAR DRIVE DATE: May 25, 2004 TELEPHONE: 941-351-2317 SIGNATURE

IMPORTANT: In these spaces, copy the o		For Insura	ance Company Use:	
BUILDING STREET ADDRESS (Including Apt., Ur 504 SOUTH SHORE DRIVE	nit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX	(NO.	Policy Nu	mber
CITY NOKOMIS	STATE FLORIDA	ZIP CODE	Company	NAIC Number
SE	CTION D - SURVEYOR, ENGINEER, OR ARCH	HITECT CERTIFICATION (CONTINUE	ED)	
Copy both sides of this Elevation Certificate for	or (1) community official, (2) insurance agent/com	npany, and (3) building owner.		(
COMMENTS				
				*
			☐ Cher	k here if attachment
SECTION E - BUILDING	ELEVATION INFORMATION (SURVEY NOT	REQUIRED) FOR ZONE AO AND ZO	-	
	elete Items E1 through E4. If the Elevation Certific			
Section C must be completed.	2	77		
	ilding diagram most similar to the building for whic	ch this certificate is being completed - s	see pages 6 and 7. I	f no diagram accuratel
represents the building, provide a sketch of	r photograph.)		10.00	
2. The top of the bottom floor (including baser	ment or enclosure) of the building isft.(m) _	_in.(cm) 🔲 above or 🔲 below (chec	k one) the highest ac	fjacent grade. (Use
natural grade, if available).				
	see page 7), the next higher floor or elevated floor	r (elevation b) of the building isft.(n	n)in.(cm) above t	he highest adjacent
grade. Complete items C3.h and C3.i on f				
	er is available, is the top of the bottom floor elevat		floodplain managen	nent ordinance?
	cal official must certify this information in Section (
SE	CTION F - PROPERTY OWNER (OR OWNER'S	S REPRESENTATIVE) CERTIFICATION	ON	
10 A) Te	presentative who completes Sections A, B, C (Iter	(Fig. 1)	A (without a FEMA-	issued or community-
	e statements in Sections A, B, C, and E are corre	ect to the best of my knowledge.		
PROPERTY OWNER'S OR OWNER'S AUTHOR	IZED REPRESENTATIVE'S NAME			
ADDRESS		CITY	STATE Z	IP CODE
SIGNATURE		DATE	TELEPHONE	***************************************
COMMENTS				
			Chec	k here if attachment
	SECTION G - COMMUNITY INFO	RMATION (OPTIONAL)		
The local official who is authorized by law or or	dinance to administer the community's floodplain	management ordinance can complete	Sections A, B, C (or	E), and G of this Eleva
Certificate. Complete the applicable item(s) an	d sign below.			
	n from other documentation that has been signed	Maria Charles and		ect who is authorized b
	formation. (Indicate the source and date of the el			
	n E for a building located in Zone A (without a FE		or Zone AO.	
33. L. The following information (Items G4-G	(9) is provided for community floodplain managem	nent purposes.		
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF	COMPLIANCE/OCCU	JPANCY ISSUED
G7. This permit has been issued for: New	Construction Substantial Improvement			
G8. Elevation of as _E built lowest floor (including basement) of the building is:		ft.(m)	I	Datum:
G9. BFE or (in Zone AO) depth of flooding at the building site is:		ft.(m)	1	Datum:
LOCAL OFFICIAL'S NAME		TITLE		
COMMUNITY NAME		TELEPHONE		
SIGNATURE		DATE		#0 */
COMMENTS				
			Choo	k here if attachmen
				n nere ii allaGiinen