U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL: EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

H 115205 00 BA

FILE NO.: 11-02-02

OMB No. 1660-0008 Expiration Date: July 31, 2015

			1122110 1	1-02-02				
A1 Building Owner's Non	DAVID CARDE			OPERTY INFO	RMATION			ANCE COMPANY USE
A1. Building Owner's Name DAVID CARDELL FILE NO.: 11-02-02 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.						Policy	Numb	er:
A2. Building Street Addre- 5107 SAINT ALBANS AVE City SARASOTA	ss (including Apt., U NUE (DETACHED	Init, Suite, and/or in GARAGE)				Comp	any N	AIC Number:
			State		e 34242			
A3. Property Description (L A PART OF LOT 1 AND LO	ot and Block Number FS 2 & 19, BLOCK	ers, Tax Parcel Nu 26, BLOCK 26, SI	imber, Legal I ESTA BEACH	Description, etc.) I SUB. SARASC	TA COUNTY PARCI	EL ID # 00	81100	057.
A4. Building Use (e.g., Res			ccessory, etc.					Accessor
A5. Latitude/Longitude: Lat					Horizontal Datu	m: 🗆 N	AD 192	7 × NAD 1983
A6. Attach at least 2 photog A7. Building Diagram Numb	raphs of the buildin	g if the Certificate	is being used	to obtain flood in	surance.			
A8. For a building with a cra		ıre(s):		A9. For	a building with an att	ached as	man.	
a) Square footage of c	rawispace or enclos	sure(s)	WA sq ft		Square footage of at			<u>595</u> sq ft
 b) Number of permane or enclosure(s) with 	nt flood openings in	the crawispace	1/4	b)	Number of permaner	nt flood op	enings	in the attached garage
c) Total net area of flo	od openings in A8.b		<u>WA</u> WA sqin		within 1.0 foot above Total net area of floo			4).b <u>512</u> sq in
d) Engineered flood op					Engineered flood ope			Yes No
	SECTIO	ON B - FLOOD	INSURANC		FIRM) INFORMAT			
B1. NFIP Community Name	& Community Nur	nber	B2. County N	ame		B3. St	ate	
SARASOTA COUNTY 125	144		SARASOTA			FLORI		
B4. Map/Panel Number 125144 0143	B5. Suffix E	9-03-92		7. FIRM Panel tive/Revised Date 9-03-92	B8. Flood Zone(s) AE	B9		Flood Elevation(s) (Zonuse base flood depth)
B10. Indicate the source of	the Base Flood Ele	vation (BFE) data	or base flood					10.00
☐ FIS Profile	⊠ FIRM □	Community Dete		Other/Sour				
B11. Indicate elevation data				☐ NAVD 1988				
B12. Is the building located	in a Coastal Barrier	Resources Syste		ea or Otherwise F	rotected Area (OPA)	?		Yes 🛛 No
Designation Date:	-		☐ CBRS	☐ OPA				
	SECTION	C - BUILDING I	ELEVATION	INFORMATIO	N (SURVEY REQ	JIRED)		
C1. Building elevations are	based on:	Construction Dra	wings*	Building U	nder Construction*		Finishe	d Construction
*A new Elevation Certific	ate will be required	when construction	n of the build	ng is complete.				
C2. Elevations – Zones A1– below according to the I	ouilding diagram spe	ecified in Item A7.	/30, V (with B In Puerto Ric	FE), AR, AR/A, A o only, enter met	R/AE, AR/A1—A30, A ers	R/AH, AR	VAO. C	omplete Items C2.a-h
Benchmark Utilized: SA	R. CO. B.M. NO. 8	1 B	Vertical Da	tum: N.G.V.D. E	LEVATION = 5.59'			
Indicate elevation datum	used for the elevat	tions in items a) th	rough h) belo	w. X NGVD 192	29 NAVD 1988	Other/S	ource:	
Datum used for building	elevations must be	the same as that	used for the E	BFE.	Chr	ack the me		ment used.
a) Top of bottom floor (in	ichiding basement	oroudonaca ar an	alaawaa Aasa					
b) Top of the next higher		crawispace, or en	ciosure iloor)		<u>6.8</u>	⊠ feet □ feet		meters
c) Bottom of the lowest horizontal structural member (V Zor			e only)		<u>N/A</u>			meters
d) Attached garage (top of slab)			s Orny)		<u>N/A</u>	feet feet		meters
e) Lowest elevation of m	•	ent servicing the h	ouildina		<u>WA</u> . <u>I1</u> .3	⊠ feet		meters
(Describe type of equ	pment and location	in Comments)	Juliania		<u>11</u> .5	en leet		meters
f) Lowest adjacent (finis	hed) grade next to !	building (LAG)			<u>3.1</u>	⊠ feet		meters
g) Highest adjacent (finis					<u>5.5</u>	⊠ feet		meters
h) Lowest adjacent grad	e at lowest elevation	n of deck or stairs,	including str	ictural support	<u>WA</u>	☐ feet		meters
	SECTION	D - SURVEYOR	R. ENGINEE	R. OR ARCHIT	ECT CERTIFICAT			
This certification is to be signed formation. I certify that the incomparation of the same false of	ed and sealed by a l	land surveyor, eng	gineer, or arch	itect authorized b	by law to certify eleva			2011 M 2 L 2 S M 2 S 2 S 2 S 2 S 2 S 2 S 2 S 2 S 2
understand that any false sta	are provided on bo						11, 1	
Check here if attachment			ensed land s		ection A provided by Yes No	a		
ertifier's Name LARRY J. Sh		110	erisen igild 8	The second secon		~		
		N. C.		License Number		d.		133
Title PROFESSIONAL SUR			Con	npany Name Sh	ARP SURVEYING, I	NC.	3	STATE STATE
ddress 485 STEWART STI		ENGLEWOOD		State FL ZIF	Code 34223			The state of the s
ignature /	Date Date	e 5-22-2014		Telephone 941	460-0036			2333110111000
			7150			_		

Building Street Address (including Apt., Unit, Suite, and/or Bldg, No.) or P.O. Route	rom Section A.		FOR INSURANCE COMPANY USE			
	IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. 5107 SAINT ALBANS AVENUE (DETACHED GARAGE)					
City SARASOTA State FL	ZIP Code 342	242	Company NAIC Number:			
SECTION D - SURVEYOR, ENGINEER, OR AR	CHITECT CERT	IFICATION (C	ONTINUED)			
opy both sides of this Elevation Certificate for (1) community official, (2) insurance a	agent/company, an	d (3) building ow	ner.			
omments C2. e) Electrical switches located 54" above finsihed floor level.						
Smart vents installed allows 200 sq. inches of flow per vent (see attachment)						
PS i phone 5						
- Color	te 5-22-2014	77177				
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NO	TREQUIRED) F	OR ZONE AO	AND ZONE A (WITHOUT BFE)			
or Zones AO and A (without BFE), complete Items E1E5. If the Certificate is intended to C. For Items E1E4, use natural grade, if available. Check the measurement use	ded to support a L(OMA or LOMR-F	request, complete Sections A, B,			
 Provide elevation information for the following and check the appropriate boxes (HAG) and the lowest adjacent grade (LAG). 						
a) Top of bottom floor (including basement, crawlspace, or enclosure) is			above or Delow the HAG.			
b) Top of bottom floor (Including basement, crawispace, or enclosure) is	feet	☐ meters ☐ a	above or below the LAG.			
 For Building Diagrams 6–9 with permanent flood openings provided in Section (elevation C2.b in the diagrams) of the building is	A Items 8 and/or 9 neters above o	(see pages 8-9	of Instructions), the next higher floor			
3. Attached garage (top of slab) is feet meters abov			TAG.			
4. Top of platform of machinery and/or equipment servicing the building is			e or Delow the HAG.			
 Zone AO only: If no flood depth number is available, is the top of the bottom floordinance? Yes No Unknown. The local official must certify this in the local official must certify this in the local official must certify the local official must certificate must be also be al	oor elevated in acc	ordance with the	community's floodplain management			
SECTION F - PROPERTY OWNER (OR OWNER	R'S REPRESENT	TATIVE) CERT	IFICATION			
ne property owner or owner's authorized representative who completes Sections A, one AO must sign here. The statements in Sections A, B, and E are correct to the bound of the	B, and E for Zone est of my knowledg	A (without a FEM je.	MA-issued or community-issued BFE) or			
operty Owner's or Owner's Authorized Representative's Name						
dress		State	ZIP Code			
gnature Date		Telepho	ne			
omments			* 1			
			Check here if attachments			
SECTION G - COMMUNITY INFO	ORMATION (OP	TIONAL)				
e local official who is authorized by law or ordinance to administer the community's fic this Elevation Certificate. Complete the applicable item(s) and sign below. Check the	odplain manageme	ent ordinance car	n complete Sections A, B, C (or E), and C			
The information in Section C was taken from other documentation that has						
is authorized by law to certify elevation information. (Indicate the source an	nd date of the eleva	tion data in the (ed surveyor, engineer, or architect who Comments area below.)			
$\mathbb{R} = \mathbb{R}$ A community official completed Section E for a building located in Zone A (v						
3. The following information (Items G4-G10) is provided for community floodp	lain management p	ourposes.				
G4. Permit Number G5. Date Permit Issued	G6. Date C	ertificate Of Con	npliance/Occupancy issued			
7. This permit has been issued for: New Construction Substantial	I Improvement					
Elevation of as-built lowest floor (including basement) of the building:	feet	meters	Datum			
	feet	☐ meters	Datum			
BFE or (in Zone AO) depth of flooding at the building site:		П.				
	Geet	☐ meters	Datum			
BFE or (in Zone AO) depth of flooding at the building site:	Title	□ meters	Datum			
O. BFE or (in Zone AO) depth of flooding at the building site: O. Community's design flood elevation:		∟ meters	Datum			
O. BFE or (in Zone AO) depth of flooding at the building site: O. Community's design flood elevation: Ocal Official's Name	Title	□ meters	Datum			
O. BFE or (in Zone AO) depth of flooding at the building site: O. Community's design flood elevation: Ocal Official's Name Community Name	Title Telephone	□ meters	Datum			

Building Photographs See Instructions for Item A6.

IMPORTANT: In these spaces, copy the correspondent	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or 5107 SAINT ALBANS AVENUE (DETACHED GARAGE		and Box No.	Policy Number:
City SARASOTA	State FL	ZIP Code 34242	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 tem 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.



FRONT VIEW 5-22-2014



REAR VIEW 5-22-20014