FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077

Expires December 31, 2005 RUPZ003 - 20526 For Insurance Company Use: Policy Number Company NAIC Number ZIP CODE USGS Quad Map Other._ B3. STATE FLORIDA B9. BASE FLOOD ELEVATION(S) **B8. FLOOD ZONE(S)** (Zone AO, use depth of flooding) A13 11

Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION BUILDING OWNER'S NAME VINCENT KEBER BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 3906 SHELL ROAD STATE CITY SARASOTA FL PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 12, BLOCK 41, REVISED PLAT OF SIESTA BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): □ NAD 1927 ☒ NAD 1983 (##° - ##' - ##.##" or ##.####") SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME** SARASOTA SARASOTA COUNTY **B4. MAP AND PANEL B7. FIRM PANEL B5. SUFFIX B6. FIRM INDEX DATE** EFFECTIVE/REVISED DATE NUMBER 125144 0141 D 09/29/96 05/01/84 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. Community Determined Other (Describe): FIS Profile ☐ NAVD 1988 ☐ Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 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) C1. Building elevations are based on: Construction Drawings* ☐ Building Under Construction* *A new Elevation Certificate will be required when construction of the building is complete. Building Diagram Number (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 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 Conversion/Comments Elevation reference mark used P-12 Does the elevation reference mark used appear on the FIRM? \square Yes \square No. o a) Top of bottom floor (including basement or enclosure) 6 .3 ft.(m) Seal 16.6fL(m) o b) Top of next higher floor Embossed and Clate o c) Bottom of lowest horizontal structural member (V zones only) o d) Attached garage (top of slab) o e) Lowest elevation of machinery and/or equipment Number, 13.1 ft(m) A/C UNIT servicing the building (Describe in a Comments area) 4.7ft(m) 5.9ft(m) o f) Lowest adjacent (finished) grade (LAG) o g) Highest adjacent (finished) grade (HAG) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 20 i) Total area of all permanent openings (flood vents) in C3.h sq. in. (sq. cm) 2,560 Sq. INCHES 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 ROBERT G. BRUCE

LICENSE NUMBER 4519

TITLE OWNER COMPANY NAME RED STAKE SURVEYORS INC. ZIP CODE DRESS CITY STATE 7123 PROCTOR ROAD SARASOTA 34241 UT DE MOR SIGNATURE DATE TELEPHONE 02/15/2005 941-923-9997

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SECTION D - SURVIVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED) Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner. COMMENTS SECTION B - FLOOD INSURANCE RATE MAP (FRM) INFORMATION TO BE VERFIED AT LOCAL F.E.M. A FLOOD CONTROL OFFICE. FLE # 02030383 Check the Sull Library (FRM) INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) AT ZONE AO and Zone A (without BFE), complete librare E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMFLY, ection or must be completed. Building Diagram Number (_Solect 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 stolect or photograph.) The typ of the boilum to provide a stolect or photograph.) The typ of the boilum to provide a stolect or photograph. The typ of the boilum for clading bearment or excitosure) of the building for which this certificate is being completed—see pages 6 and 7. If no diagram accurately represents the building, provide a stolect or photograph. The typ of the boilum for (including beamment or excitosure) of the building for which this certificate is being completed—see pages 6 and 7. If no diagram accurately represents the building provide a stolect or photograph. The typ of the boilum for direction in the contract of the building for the building		ng Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUT	E AND BOX NO.		Policy I	Number
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PERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME ADDRESS CITY STATE ZIP CODE SIGNATURE DATE TELEPHONE Check here if attachments SECTION G - COMMUNITY INFORMATION (OPTIONAL) he local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevatrificate. Complete the applicable Item(s) and sign below. It The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.) It The following information (Items G4-G9) is provided for community floodplain management purposes. G4. PERMIT NUMBER G5. DATE PERMIT ISSUED G6. DATE CERTIFICATE OF COMPLIANCE/CCCUPANCY ISSUED F7. This permit has been issued for: New Construction Substantial Improvement 8. Elevation of as-built lowest floor (Including basement) of the building is:	SI	ECTION F - PROPERTY OWNER (OR C	WNER'S REPRI	SENTATIVE) CERTIFICA	ATION	
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