# **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2018

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. 9928 Sheltering Spruce Street				Policy Num	ber:	an are see	
City Englewood	AND THE PARTY OF T	State Florida	ZIP Code 34223	er og er færte blev et	Company N	AIC Number	
	SECTI	ON G - COMMUNITY I	NFORMATION (O	PTIONAL)	BOOMER OF DEE	56	- 7
Sections A, B, C (or E used in Items G8–G10 G1.  The informat engineer, or data in the C G2.  A community or Zone AO.	s authorized by law or of and G of this Elevation of this Elevation of the	n Certificate. Complete nter meters.  ken from other docume zed by law to certify ele	the applicable iten ntation that has be vation information ated in Zone A (wit	en signed a (Indicate th	n below. Chec nd sealed by e source and A-issued or c	k the measure a licensed sur- date of the ele ommunity-issu	weyor, evation ed BFE)
G4. Permit Number	13 BI	G5. Date Permit Issu	ued		Date Certifica Compliance/C		ed
G7. This permit has b	peen issued for:	New Construction	] Substantial Impr	ovement	14 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		rache
The state of the s	uilt lowest floor (includir	Hardware To S		feet	meters.	Datum	lge. h
G9 BFF or (in Zone	AO) depth of flooding at	t the huilding site:		☐ feet	meters	Datum	- 100-1 GW
g of the Rayer of	sign flood elevation:		The Especial Co.	feet	meters	Datum	e zaz zag
Local Official's Name	1 17	same same	Title		-4 *9*i	DE 1/48/4 D	152)
Community Name	e sa ese sa race Maria e se		Telephone	REALESK H E	→ - zi	98-20 - 500 (	September 1
Signature	9900-1004 S 1864 V 11	90 miles 900 p. s	Date	-	* :	eras marine, pare	ari - 669
Comments (including t	type of equipment and lo	ocation, per C2(e), if ap	plicable)			5	
							9 2
one was as a second	Joseph T. E.				☐ Ch	eck here if atta	chments.

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding in	nformation from Sec	ction A.	FOR INSURANCE COMPANY	Y USE		
Building Street Address (including Apt., Unit, Suite, and/or B 9928 Sheltering Spruce Street	ldg. No.) or P.O. Rou	te and Box No.	Policy Number:	=		
City State Englewood Florid		Code 23	Company NAIC Number			
SECTION E BUILDING ELEVA FOR ZONE AC	TION INFORMATIO AND ZONE A (WIT		REQUIRED)	21		
For Zones AO and A (without BFE), complete Items E1–E5. complete Sections A, B, and C. For Items E1–E4, use natura enter meters.	If the Certificate is in al grade, if available.	tended to support a Check the measure	LOMA or LOMR-F request, ment used. In Puerto Rico only,			
<ul><li>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).</li><li>a) Top of bottom floor (including basement,</li></ul>						
crawlspace, or enclosure) is  b) Top of bottom floor (including basement, crawlspace, or enclosure) is		feet meter		~		
E2. For Building Diagrams 6–9 with permanent flood openii	ngs provided in Section					
the next higher floor (elevation C2.b in the diagrams) of the building is		feet meter	rs above or below the	HAG.		
E3. Attached garage (top of slab) is		feet meter	s above or below the	HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is	85	☐ feet ☐ mete	rs above or below the	HAG.		
E5. Zone AO only: If no flood depth number is available, is floodplain management ordinance? Yes No	the top of the bottom Unknown. The	floor elevated in ac e local official must	cordance with the community's certify this information in Section	n G.		
SECTION F - PROPERTY OWNER	(OR OWNER'S REP	RESENTATIVE) CI	ERTIFICATION			
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.  Property Owner or Owner's Authorized Representative's Name						
Address	City	St	ate ZIP Code			
Signature	Date	T€	elephone			
Comments						
				N		
v,						
10						
				i		

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

OMB No. 1660-0008 Expiration Date: November 30, 2018

# **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.

SECTION A - PROPERTY INFOR	FOR INSURANCE COMPANY USE	
A1. Building Owner's Name  CalAtlantic Homes	Policy Number:	
<ul> <li>A2. Building Street Address (including Apt., Unit, Suite, and/o Box No.</li> <li>9928 Sheltering Spruce Street</li> </ul>	r Bldg. No.) or P.O. Route and	Company NAIC Number:
City Englewood	State Florida	ZIP Code 34223
A3. Property Description (Lot and Block Numbers, Tax Parce Lot 6 of Keyway Place, A Replat, Plat Book 48 Pages 42 & 42		STATE OF THE STATE
A4. Building Use (e.g., Residential, Non-Residential, Addition	, Accessory, etc.) Residential /	Single Family
A5. Latitude/Longitude: Lat. 27° 0'32.53" Long	-82°22'48.25" Horizontal D	atum: NAD 1927 X NAD 1983
A6. Attach at least 2 photographs of the building if the Certific	cate is being used to obtain flood in	surance.
A7. Building Diagram Number 1B	1844 POLITARIOS W SUSCIONARIO ESTARE IN 1945.	And the second comment of the first
A8. For a building with a crawlspace or enclosure(s):	and the make all the party	An in the Physical Control
a) Square footage of crawlspace or enclosure(s)	0.00 sq ft	and the second of the second
b) Number of permanent flood openings in the crawlspace	e or enclosure(s) within 1.0 foot ab	ove adjacent grade 0
c) Total net area of flood openings in A8.b	0.00 sq in	AND VIOLENCE THE SHEET OF THE SEE
d) Engineered flood openings? Yes X No	Gride Military Control of the Contro	The state of the s
A9. For a building with an attached garage:	C SUMMOND FOREMER (	NOT-158
Square footage of attached garage	426.00 sq ft	There is a second of the secon
	250 CRAP is a filt by homest body	to all the state of the state o
b) Number of permanent flood openings in the attached of	The property of the control of the control of	ant grade 0
	sq in	1800
d) Engineered flood openings?  Yes  No		The state of the s
100 000 000 000 000 000 000 000 000 000	ANCE RATE MAP (FIRM) INFO	RMATION
B1. NFIP Community Name & Community Number	B2. County Name	B3. State
Sarasota Gounty 125144	Sarasota	Florida
Number Date Ef	fective/ Zone(s) -	9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)
B10. Indicate the source of the Base Flood Elevation (BFE) o		Item B9:
B11. Indicate elevation datum used for BFE in Item B9:	NGVD 1929 X NAVD 1988	Other/Source:
B12. Is the building located in a Coastal Barrier Resources S	System (CBRS) area or Otherwise	Protected Area (OPA)? Yes X No
Designation Date: N/A ☐ CBRS	that after the property and the	el ey lo a elgan i tar y alsavebb. Bell electro
		AND A STATE OF STATE
		A

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2018

MPORTANT: In these spaces, cop Building Street Address (including A 1928 Sheltering Spruce Street	FOR INSURANCE COMPANY USE Policy Number:				
Dity Englewood	State Florida	ZIP Code 34223	Company NAIC Number		
SECTIO	N C - BUILDING ELEVATION IN	NFORMATION (SURVEY	REQUIRED)		
C2. Elevations - Zones A1-A30,	vill be required when construction o AE, AH, A (with BFE), VE, V1–V30 v according to the building diagram	f the building is complete. , V (with BFE), AR, AR/A, A	R/AE, AR/A1–A30, AR/AH, AR/AO.		
D	I for the elevations in items a) throu AVD 1988	igh h) below.			
a) Top of bottom floor (included) Top of the next higher floor (b) Top of the next higher floor (c) Bottom of the lowest horized) Attached garage (top of slee) Lowest elevation of machi (Describe type of equipment) Lowest adjacent (finished) g) Highest adjacent (finished) h) Lowest adjacent grade at structural support  SECTION  This certification is to be signed ar I certify that the information on this statement may be punishable by five the statement may be given by the statement	ing basement, crawlspace, or encloser ontal structural member (V Zones of ab) nery or equipment servicing the building and location in Comments) grade next to building (LAG) lowest elevation of deck or stairs, in	ncluding  R, OR ARCHITECT CERTINATES to interpret the data available Code, Section 1001.	by law to certify elevation information. ilable. I understand that any false		
Certifier's Name Edward W. Wackerman Title Professional Land Surveyor Company Name GeoPoint Surveying, Inc. Address 1403 E. 5th Ave	License Ni PLS3696		Puoissa)oud		
City Tampa	State Florida	ZIP Code 33605	WENNES WAY		
Comments (including type of equip C2. Benchmark Utilized : Sarat C2. e) Top of Air Conditioning Pac Pictures were taken during field vis	oment and location, per C2(e), if apsota County Benchmark "485C" &"Id Elevation.	ommunity official, (2) insurance plicable) R485A"	ce agent/company, and (3) building owner		

### **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

**ELEVATION CERTIFICATE** 

IMPORTANT: In these spaces, copy the corresponding information from Section A.  Building Street Address (including Apt., Unit, Süite, and/or Bldg. No.) or P.O. Route and Box No.  9928 Sheltering Spruce Street			FOR INSURANCE COMPANY USE Policy Number:	
City	State	ZIP Code	Company NAIC Number	
Englewood	Florida	34223		

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.

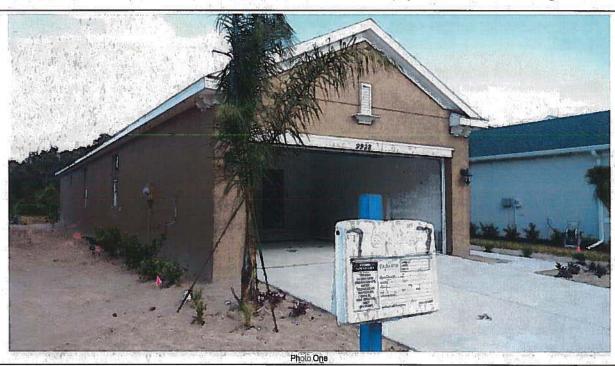


Photo One Caption FRONT VIEW

Clear Photo One



Photo Two Caption LEFT VIEW

Clear Photo Two

#### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces,	FOR INSURANCE COMPANY USE Policy Number:		
Building Street Address (including 9928 Sheltering Spruce Street			
City	State	ZIP Code	Company NAIC Number
Englewood	Florida	34223	

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. 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.



Photo Three Caption REAR VIEW

Clear Photo Three

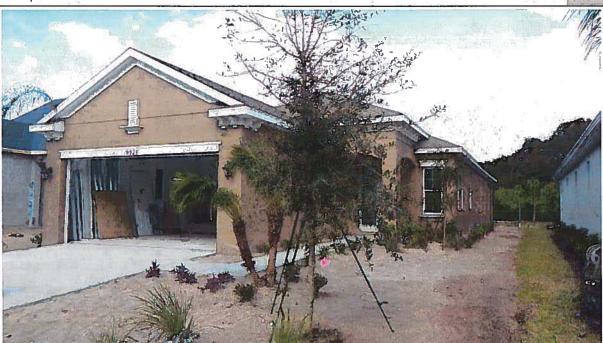


Photo Four Caption RIGHT VIEW

Clear Photo Four

Photo Four