

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. 13101 STEINHATCHEE LOOP			Policy Number:
City VENICE	State Florida	ZIP Code 34293	Company NAIC Number

SECTION G – COMMUNITY INFORMATION (OPTIONAL)

The 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 Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

- 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 E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4–G10) is provided for community floodplain management purposes.

G4. Permit Number 20-156364 B1	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
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- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters Datum _____
- G10. Community's design flood elevation: _____ feet meters Datum _____

Local Official's Name	Title
Community Name	Telephone
Signature	Date

Comments (including type of equipment and location, per C2(e), if applicable)

Check here if attachments.

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 INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name RESOURCE CONSERVATION OF SARASOTA, LLC				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 13101 STEINHATCHEE LOOP				Company NAIC Number:	
City VENICE	State Florida	ZIP Code 34293			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 758, GRAND PALM, PHASES 2A(d) AND 2A(e) PLAT BOOK 54, PAGE 97, PID #0760070026					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>27°04'14.51"N</u> Long. <u>82°19'33.62"W</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983					
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.					
A7. Building Diagram Number <u>1A</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>					
c) Total net area of flood openings in A8.b <u>N/A</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>627.00</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>					
c) Total net area of flood openings in A9.b <u>N/A</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number SARASOTA COUNTY 125144			B2. County Name SARASOTA COUNTY		B3. State Florida
B4. Map/Panel Number 12115C0355	B5. Suffix F	B6. FIRM Index Date 11-04-2016	B7. FIRM Panel Effective/ Revised Date 11-04-2016	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 7
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

ELEVATION CERTIFICATE

Recipient: Follow the instructions on page 1 of this certificate.

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

SECTION A - PROPERTY INFORMATION	
A1. Building Owner's Name RESOURCE CONSULTING OF SARASOTA, LLC	Policy Number:
A2. Building Street Address (including Apt. Unit, Suite, and Building No.) or P.O. Route and Box No. 19101 STANFORD LANE, LOT 60	Community NAID Number:
City: Florida State: Florida ZIP Code: 34223	
A3. Property Description (Use the lot and Block Number, Tract Number, Legal Description, and LOT, TRACT, GRAND PALLI ENHANCES 2A(D) AND PAV. PLAT BOOK 64 PAGE 67, RID W02607008)	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL	
A5. Attach at least 2 photographs of the building if the Certificate is to be used to obtain flood insurance	
A6. Building Diagram Number: 1A	
A7. For a building with a crawlspace or engineer's crawlspace:	
(a) Is there footage of a crawlspace or engineer's crawlspace? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(b) Number of permanent floor openings in the crawlspace or engineer's crawlspace within 10 feet of adjacent grade:	
(c) Total net area of floor openings in A7b: _____ sq. ft.	
(d) Engineered floor openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
A8. For a building with an attached garage:	
(a) Square footage of attached garage: _____ sq. ft.	
(b) Number of permanent floor openings in the attached garage within 10 feet of adjacent grade: _____	
(c) Total net area of floor openings in A8b: _____ sq. ft.	
(d) Engineered floor openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
SECTION B - FLOOD RISK/RATE MAP (FIRM) INFORMATION	
B1. FIRM Community Name & Community Number SARASOTA COUNTY 12819A	
B2. FIRM Panel 1212E0088	
B3. FIRM Date 11-04-2010	
B4. FIRM Panel AE	
B5. FIRM Panel AE	
B6. FIRM Panel AE	
B7. FIRM Panel AE	
B8. FIRM Panel AE	
B9. FIRM Panel AE	
B10. Indicate the source of the Base Flood Elevation (BFE) data on the Flood Data Form (FD-1) from B1:	
<input type="checkbox"/> FIRM <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other Source	
B11. Indicate elevation datum used for BFE in item B1: <input type="checkbox"/> NAVD 1988 <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> Other Source	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or a Special Protected Area (SPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Designation Date: _____	

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City VENICE	State Florida	ZIP Code 34293	Company NAIC Number

SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when 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/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: NGS B 699 Vertical Datum: NAVD 1988

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.

Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) _____ 10.9 feet meters
- b) Top of the next higher floor _____ N/A feet meters
- c) Bottom of the lowest horizontal structural member (V Zones only) _____ N/A feet meters
- d) Attached garage (top of slab) _____ 10.4 feet meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) _____ 10.4 feet meters
- f) Lowest adjacent (finished) grade next to building (LAG) _____ 10.0 feet meters
- g) Highest adjacent (finished) grade next to building (HAG) _____ 10.2 feet meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____ N/A feet meters

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 Check here if attachments.

Certifier's Name MICHAEL P ALLEN	License Number PSM6822	Place Seal Here 03-15-21	
Title OWNER			
Company Name BRIGHAM/ALLEN LAND SURVEYING			
Address 807 US 41 HIGHWAY BYPASS SOUTH, SUITE a			
City VENICE	State Florida		ZIP Code 34285
Signature 	Date 03-15-2021	Telephone (941) 493-4430	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)

A5 SOURCE OF LAT/LONG IS HAND HELD GPS USING A CONVERSION APP (GPS TEST).
C2 BENCHMARK 9.16' NAVD88 CONVERTED TO 10.27' NGVD29 USING 1.11' CONVERSION FACTOR AS PER VERTCON SOFTWARE FROM NOAA.
C2(a-h) ELEVATIONS CONVERTED FROM NGVD29 TO NAVD88 USING THE ABOVE CONVERSION FACTOR.
C2(e) AC UNIT LOCATED ON THE LEFT SIDE OF HOUSE (WEST SIDE).

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**SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED)
FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- 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 _____ feet meters above or below the HAG.
 - b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.
- E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

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	State	ZIP Code
Signature	Date	Telephone	

Comments

Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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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

Photo One Caption FRONT 03/12/2021

Clear Photo One



Photo Two

Photo Two Caption REAR 03/12/2021

Clear Photo Two

BUILDING PHOTOGRAPHS

Continuation Page

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City VENICE	State Florida	ZIP Code 34293	Company NAIC Number

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

Photo Three

Photo Three Caption

Clear Photo Three

Photo Four

Photo Four

Photo Four Caption

Clear Photo Four