

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. 13133 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 20-132888 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.

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) of B, C, D, E, and six no. 1400 STEINMATECHER LOOP

City: Florida State: ZIP Code: 34103

Company NAIC Number: Company NAIC Manual:

FOR INSURANCE COMPANY USE
Policy Number:

SECTION C - 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 appropriate form(s) and fill in the information below. Check the measurement method in Items G8-G10. In Items G9-G10, fill in the only entry method.

- 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 (which is FEMA-issued or community-issued SFE) or Zone AO.
- G3. The following information (Item G4-G10) is provided for community floodplain management purposes:

G4. Permit Number: _____

G5. Date Permit Issued: _____

G6. Date Certificate of Compliance/Company Issued: _____

G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of second lowest floor (including basement) of the building: _____ feet inches

G9. SFE or (in Zone AO) depth of flooding at the building site: _____ feet inches

G10. Community's design flood elevation: _____ feet inches

Local Official's Name: _____ Title: _____

Community Name: _____ Telephone: _____

Signature: _____ Date: _____

Comments (including type of equipment and location for SFE, if applicable): _____

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. 13133 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 766, GRAND PALM, PHASE 2Ae, PLAT BOOK 54, PAGE 97, PID #0760070034					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>27°04'11.61"N</u> Long. <u>82°19'29.91"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>687.00</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

Instructions follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments to: (1) community official; (2) insurance agent/broker and (3) building owner.

SECTION A - PROPERTY INFORMATION	
1. Building Owner's Name RESOURCE CONSERVATION OF PARASOTA LLC	2. Policy Number
3. Building Address (including apt., unit, suite, and/or bldg. no.) or P.O. Route and Box No. 107 988 GRAND PALM PHASE 02A FLAT BOOK #A PAGE 87 MID 9020070004	4. Company Name
5. City	6. State
7. Zip Code	8. Phone
9. Parcel ID, section ID and block numbers, tax parcel ID and legal description, etc. 107 988 GRAND PALM PHASE 02A FLAT BOOK #A PAGE 87 MID 9020070004	11. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL
12. Flood-origination: List of 11 811N Long 021919 811W Horizontal Datum <input type="checkbox"/> NAVD 1983 <input checked="" type="checkbox"/> MGD 1985	13. Affected portions of the building (e.g., building, roof, etc.) to obtain flood insurance
14. Building Elevation Number: 1A	15. For a building with a crawlspace or enclosure: a) Square footage of crawlspace or enclosure(s) b) Material of permanent flood opening in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade c) Total area of flood opening in A15 d) Engineered flood opening? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. For a building with an attached garage: a) Square footage of attached garage b) Total area of permanent flood opening in the attached garage within 1.0 foot above adjacent grade c) Total area of flood opening in A16 d) Engineered flood opening? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	17. For a building with an attached garage: a) Square footage of attached garage b) Total area of permanent flood opening in the attached garage within 1.0 foot above adjacent grade c) Total area of flood opening in A17 d) Engineered flood opening? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP INFORMATION				
18. ZIP Community Name & Community Number PARASOTA COUNTY 15144		19. County Name PARASOTA COUNTY		
20. Major Road Number	21. FIRM Date	22. FIRM Panel Effective Date	23. Flood Zone(s)	24. Base Flood Elevation(s) (Zone of Use Base Flood Elevation)
15140000	11-4-2016	11-04-2016	AE	
25. Indicate the source of the base flood elevation (BFE) data on which the report is based: Item B1: <input type="checkbox"/> HIS BFE <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other Source				
26. Indicate the elevation (base) used for BFE in Item B1: <input type="checkbox"/> NAVD 1983 <input checked="" type="checkbox"/> MGD 1985 <input type="checkbox"/> Other Source				
27. Is the building located in a Coastal Barrier Resources System (CBRS) area or otherwise Protected Area (OPA)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Designation Code: <input type="checkbox"/> CBRS <input checked="" type="checkbox"/> OPA				

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City VENICE	State Florida	ZIP Code 34293	Company NAIC Number	

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

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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 12/16/2020

Clear Photo One



Photo Two

Photo Two Caption REAR 12/16/2020

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 13133 STEINHATCHEE LOOP	Policy Number:		
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