

ATTN Marty  
L/C 03-03-12 FINAL

05441-243 B1  
FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077  
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

05441-243 B1

**SECTION A - PROPERTY OWNER INFORMATION**

BUILDING OWNER'S NAME <b>ROGER P. &amp; MARIANNE MATHES</b>	For Insurance Company Use Policy Number
BUILDING STREET ADDRESS (Including Apt, Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <b>#1620 THOMAS STREET</b>	Company NAIC Number
CITY <b>ENGLEWOOD</b>	STATE <b>FL</b>
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>5 1/2 Lot 11, THOMAS HEASLEY SUB. 1 TAX PARCEL # 0478-04-0003</b>	ZIP CODE <b>34229</b>
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) <b>RESIDENTIAL</b>	
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-##"##" or ##.#####)	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983
	SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____

**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <b>SARASOTA COUNTY 125144</b>	B2. COUNTY NAME <b>SARASOTA</b>	B3. STATE <b>FLORIDA</b>
B4. MAP AND PANEL NUMBER <b>125144 0344</b>	B5. SUFFIX <b>E</b>	B6. FIRM INDEX DATE <b>9-3-92</b>
B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S) <b>"AE"</b>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <b>+12.00 FEET</b>

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.  
 FIS Profile  FIRM  Community Determined  Other (Describe): \_\_\_\_\_

B11. Indicate the elevation datum used for the BFE in B9:  NGVD 1929  NAVD 1988  Other (Describe): \_\_\_\_\_

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\*  Finished Construction  
 \*A new Elevation Certificate will be required when construction of the building is complete.

C2. 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, ARIA, AR/AE, ARIA1-A30, ARIA/H, AR/AO  
 Complete items C3.-4 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 \_\_\_\_\_ Conversion/Comments **SEE COMMENTS**

Elevation reference mark used  Does the elevation reference mark used appear on the FIRM?  Yes  No

- a) Top of bottom floor (including basement or enclosure) **14.4 ft**
- b) Top of next higher floor **N/A ft**
- c) Bottom of lowest horizontal structural member (V zones only) **N/A ft**
- d) Attached garage (top of slab) **12.7 ft**
- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) **12.7 ft**
- f) Lowest adjacent (finished) grade (LAG) **12.0 ft ±**
- g) Highest adjacent (finished) grade (HAG) **13.7 ft ±**
- h) No. of permanent openings (flood vents) within 1 ft above adjacent grade **N/A**
- i) Total area of all permanent openings (flood vents) in C3 h) **N/A SQ. IN. ±**

STATE OF FLORIDA  
 P.S.M. # 2909  
  
 DATE SIGNED: 11/21/06

License Number, Embossed Seal, Signature, and Date


**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: **DANIEL E. LEMONDE** LICENSE NUMBER: **# 2909**

COMPANY NAME: **LEMONDE & CO. SURVEYORS LLC**

ADDRESS: **4821 BONITA ROAD** CITY: **VENICE** STATE: **FL.** ZIP CODE: **34293**

SIGNATURE:  DATE: **11/21/06** TELEPHONE: **(941) 493-8000**