U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

13-135657 00 BI

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008 Expiration Date: July 31, 2015

S	CTION A - PRO	DEDTY INCOM	10.4.71.71		7 - 1, 20 10
A1. Building Owner's Name DAVID AND PAMELA PICOZZ	I FRE	PERTY INFOR	WATION		INSURANCE COMPANY USE
A2. Building Street Address (including Apt., Unit, Suite, and 4973 Topsail Drive	Policy Number:				
	o. Diag. 140.) (1 P.(J. Route and Box I	No.	Comp	pany NAIC Number:
City NOKOMIS	State F	L ZIP Code	34275		
A3. Property Description (Lot and Block Numbers, Tax Parc Lot 3 of BLACKBURN RIDGE SUBDIVISON AS RECORDED	el Number, Legal D	escription, etc.)			
- TOTAL NE RECORDE	D IN PB 4/ PGS 8	. 8A-8F OF PURLI	C RECORDS SARA	SOTA	СО
The Daliding Use (e.g., Residential, Non-Residential Addition		RESIDENTIAL			
			Horizontal Datun	n:	NAD 1927 ⊠ NAD 1983
A6. Attach at least 2 photographs of the building if the Certifi A7. Building Diagram Number 1B	cate is being used t	to obtain flood insu	irance.		#10 1021 M MAD 1903
A8. For a building with a crawlspace or enclosure(s):		AO E	L. No. 11		
a) Square tootage of crawispace or enclosure(a)	N/A sq ft	a) So	building with an atta Juare footage of atta	ched ga	
b) Number of permanent flood openings in the crawispa or enclosure(s) within 1.0 foot above adjacent grade		b) Nu	imber of permanent	flood or	nenings in the attack of
C) Total fiet area of flood openings in A8 h	<u>N/A</u> <u>N/A</u> sqin	****	ann i so root above a	luracent	arane a encir
d) Engineered flood openings? ☐ Yes ☒ No	<u>N/A</u> sq in	c) 10 d) En	tal net area of flood gineered flood oper	opening	
SECTION B – FLOO	DINSURANCE	PATE MAD (FID	gineered flood oper	nings?	⊠ Yes □ No
B1. NFIP Community Name & Community Number			M) INFORMATIO	N	
Sarasota County #125144(UNINCORPORATED)	B2. County Nam SARASOTA	le .		B3. Sta	
B4. Map/Panel Number B5. Suffix B6. FIRM Index				FLORI	DA .
125144 0239 B5. Suffix B6. FIRM Index D 9/3/1992		FIRM Panel e/Revised Date	B8. Flood	B9.	Base Flood Elevation(s) (Zone
	·	14 14 00 4	Zone(s) A12	} .	AO, use base flood depth)
B10. Indicate the source of the Base Flood Elevation (BFE) dat	a or base flood dep	th entered in Item	RO		EL12
- Community De	termined \square	Other/Source:	5 5.		
B11. Indicate elevation datum used for BFE in Item B9: NG	·- ·	2,000			
B12. Is the building located in a Coastal Barrier Resources System Designation Date:	tem (CBRS) area o	r Otherwise Protect	ted Area (OPA)2		П. и. в
1554—Clin (45)	□ cpi/2	□ OPA			☐ Yes
SECTION C - BUILDING	ELEVATION INI	FORMATION (S	URVEY REQUIRE	=0,	
				<u> </u>	
"A new Elevation Certificate will be required when		Building Under	Construction*	🛛 Fii	nished Construction
			AR/A1_A30 AB/A	LI ADIA	
below according to the building diagram specified in Item A7 Benchmark Utilized: SITE BM #167-E EL 8.33'			, , ,, , , , , , , , , , , , , , , , ,	п, АК/A	O. Complete Items C2.a-h
Indicate elevation datum used for the elevation	Vertical Datum:				
Indicate elevation datum used for the elevations in items a) to Datum used for building elevations must be the same as that	nrough h) below. Do not be the BEE	☑ NGVD 1929 🏻	NAVD 1988 Oth	er/Sour	ce:
	Table for the Di L				surement used.
a) Top of bottom floor (including basement, crawlspace, or en b) Top of the post births as as	nclosure floor)	<u>12.15</u>			_
o) Top of the next higher floor		N/A.	_	feet feet	☐ meters
 c) Bottom of the lowest horizontal structural member (V Zone d) Attached garage (top of slab) 	s only)	N/A		feet	☐ meters ☐ meters
e) Lowest elevation of machinery or equipment servicing the		<u>9</u> . <u>60</u>		feet	☐ meters
(*************************************	building	<u>12.12</u>		feet	☐ meters
1) Lowest adjacent (finished) grade next to building (LAG)		-			
g) rignest adjacent (finished) grade next to building (LAC)		<u>6.4</u>		feet	☐ meters
h) Lowest adjacent grade at lowest elevation of deck or stairs	including structura	9. <u>4</u> Il support N/A.	<u> </u>	feet	meters
				feet	meters
SECTION D - SURVEYOR his certification is to be signed and sealed by a lead of the sealed by a lead o					
his certification is to be signed and sealed by a land surveyor, enformation. I certify that the information on this Certificate repressunderstand that any false statement may be punishable by fine of	ngineer, or architec	t authorized by law	v to certify elevation		
understand that any false statement may be punishable by fine	or imprisonment und	to interpret the da der 18 U.S. Codo	ata available.	1	97
Check here if comments are provided on back of form. Check here if attachments	Were latitude and lo	onaitude in Section	Section 1001.		1
	icensed land surve	yor? 🛛 Yes	□ No		PLACE
ertifier's Name WALTER J. SMITH		ense Number PLS		-1.	SEAL
itle PROF SURVEYOR Company Name O			π 1 00/	-	HERE
duress 1215 MANATEE AVE WEST City BRADENTON			24205	_	000
gnature Date 09/12/2014				- 1	11/11/
1	1 616	phone 941.345.5	9451 	- A	thetel

INPORTANT: In these	spaces, copy the correspon	iding information from Sect	ion A	FOR INCUITABLE		
4973 Topsail Drive	FOR INSURANCE COMPANY USE Policy Number:					
City, NOKOMIS		State FL ZIP C	ode 34275	Company NAIC Number	er	
	SECTION D - SURVEYOR, E	NGINEER, OR ARCHITECT	CERTIFICATIO	N (CONTINUES)		
- ob) worm oracs of this Elet	ration Certificate for (1) communit	V Official (2) incurance accents				
Comments The purpose o	f this certificate is to reflect the fin for the house. Smart vents were	al completed construction and of	ovetiens of the b	ding owner.		
	for the house. Smart vents were 3.	utilized in the garage as reference	ed and treat 200 so	se and lot. The equipment re juare feet per vent. Site BM b	ferenced in pased on	
Signature	fed	Date 9/12/20				
SECTION E BUILD	ING ELEVATION INFORMAT	TON (SURVEY NOT REQUIR	REDI FOR ZONE	AO AND TONE		
For Zones AO and A (without	Of DCC)	The state of the s	CD) TOR ZONE	AU AND ZONE A (WITH	IOUT BFE)	
and C. For Items E1-E4, us	ut BFE), complete Items E1–E5. I e natural grade, if available. Chec mation for the following and shool	f the Certificate is intended to sur	port a LOMA or LO	DMR-F request, complete Sec	ctions A. R	
E1. Provide elevation infor	mation for the following and check owest adjacent grade (LAG).	k the appropriate because it	rto Rico only, enter	r meters.	stions A, D,	
grade (HAG) and the I	owest adjacent grade (LAG).	the appropriate boxes to show i	whether the elevation	on is above or below the high	est adiacent	
E2. For Building Diagrams	(including basement, crawispace,	or enclosure) is	feet I mete	ers	HAG.	
(elevation C2.b in the	diagrams) of the building is	gs provided in Section A Items 8	and/or 9 (see page	S 8-9 of Instructions) the no	s LAG. vt higher fir	
"" " " " " " " " " " " " " " " " " " "	if Slan) is 🗀 👝	· — —		W LIE LIAG.		
Top of platform of mac	hinery and/or equipment consists	er Limeters Liabove or Li	below the HAG.			
5. Zone AO only: If no flo	hinery and/or equipment servicing od depth number is available, is t	he top of the bottom flags at a con-	reet ∐ meters [☐ above or ☐ below the HA	G.	
ordinance?	od depth number is available, is t No Unknown. The local o	fficial must certify this information	o in accordance wi	th the community's floodplain	manageme	
	ECTION F - PROPERTY OW					
				RTIFICATION		
Zone AO must sign here. T	s authorized representative who cine statements in Sections A, B, a	completes Sections A, B, and E fo	or Zone A (without	a FEMA-issued or community	V-issued REE	
roperty Owner's or Owner's	Authorized Representative's Nam	The E are correct to the best of my	y knowledge.		, Journal Di C	
ddress		.e				
		City	Sta	te ZIP Code		
gnature		Date		Telephone		
omments						
	SECTION G - C	OMMUNITY INCORNATION		Check here		
local official who is authorize	d by law or ordinance to administe plete the applicable item(s) and sig	COMMUNITY INFORMATION	(OPTIONAL)			
ils Elevation Certificate. Com	o by law or ordinance to administe plete the applicable item(s) and sign ction C was taken from other docu-	n below. Check the measurement	igement ordinance	can complete Sections A, B, C	(or E), and	
☐ The information in Sec	tion Cause teles a fee			G 10. III Fuelto Rico only, ente	r meters.	
A community official of	ction C was taken from other docu certify elevation information. (Incompleted Section E for a building	licate the source and date of the	and sealed by a lice	ensed surveyor, engineer, or	architect who	
				unity issued BEEV 7	_	
	on (Items G4-G10) is provided fo	r community floodplain managen	nent purposes.	unity-issued BFE) of Zone A(J .	
. Permit Number	G5. Date Permit Issued			ompliance/Occupancy Issued		
This permit has been issued	t for:				1	
		☐ Substantial Improvement			\$-5-3-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-	
BFE or (in Zone AO) depth	floor (including basement) of the b	ouilding: le	et 🔲 meters	Datum		
Community's design a	of flooding at the building site:			Datum		
Community's design flood e	levation:			Datum		
al Official's Name						
nmunity Name		Title				
		Telephone				
nature		Date				
nments				21		
				Check here if	attachmente	
Form 000 0 or in-				☐ Check here if	attachments	
A Form 086-0-33 (7/12)				☐ Check here if Replaces all previo		

ELEVATION CERTIFICATE, page 3

Building Photographs See Instructions for Item A6.

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

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4973 Topsail Drive

FOR INSURANCE COMPANY USE

Policy Number:

City NOKOMIS

State FL

ZIP Code 34275

Company NAIC Number:

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.

Front of House:



Rear of House, Facing West:



Rear of House, Facing East:



ELEVATION CERTIFICATE, page 4

Building Photographs

Continuation Page

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

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

City NOKOMIS

State FL

ZIP Code 34275

FOR INSURANCE COMPANY USE

Policy Number:

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.

West Side of House, Front View:



West Side of House, Rear View



East Side of House, Front View:



East Side of House, Rear View:



Smart Vents, Front (2):



Smart Vents, West Side (2):



Smart Vents, West Side (1):

