

ELEVATION CERTIFICATE
IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16

OMB Control Number 1660-0008
 Expiration 11/30/2018

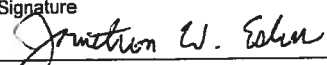
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION		FORM INSURANCE COMPANY USE	
A1. Building Owner's Name Judy Weisser		Policy Number	
A2. Building Street Address (including Apt. Unit Suite and/or Bldg No.) or P.O. Route and Box No. 228 Van Gogh Drive		Company NAIC Number	
City Osprey	State FL Florida	Zip Code 34229	
A3. Property Description (Lot and Block Numbers Tax Parcel Number Legal Description etc.) Lot 11, SORRENTO SHORES, Unit 1 (PID #0160-14-0018 Sarasota County, Fla.)			
A4. Building Use (e.g. Residential Non-Residential Addition Accessory etc.) Residential			
A5. Latitude/Longitude. Lat. N.82°09.704 Long. W.82°28.625 Horizontal Datum: <input type="radio"/> NAD 1927 <input checked="" type="radio"/> 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 1A			
A8. For a building with a crawlspace or enclosure(s)		A9. For a building with an attached garage	
a) Square footage of crawlspace or enclosure(s) 0 sq ft	a) Square footage of attached garage 460 sq ft		
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 0	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 4		
c) Total net area of flood openings in A8.b 0 sq in	c) Total net area of flood openings in A9.b 800 sq in		
d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No	d) Engineered flood openings? <input checked="" type="radio"/> Yes <input type="radio"/> No		

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number Sarasota County / 125144			B2. County Name SARASOTA Sarasota		B3. State FL
B4. Map/Panel Number 125144 / 0236	B5. Suffix D	B6. FIRM Index Date 9-3-92	B7. FIRM Panel Effective/ Revised Date 5-1-84	B8. Flood Zone(s) A-12	B9. Base Flood Elevation(s) (Zone AO use base flood depth) 11 feet
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9 <input type="radio"/> FIS Profile <input checked="" type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other/Source _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input type="radio"/> Other/Source _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="radio"/> Yes <input checked="" type="radio"/> No Designation Date <input type="radio"/> CBRS <input type="radio"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)			
C1. Building elevations are based on <input type="radio"/> Construction Drawings* <input type="radio"/> Building Under Construction* <input checked="" type="radio"/> Finished Construction			
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. * A new Elevation Certificate will be required when construction of the building is complete.			
Benchmark Utilized Sarasota County BM 160 Elevation = 12.08 Vertical Datum _____			
Indicate elevation datum used for the elevations in items a) through h) below. <input checked="" type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input type="radio"/> 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)	11.0	<input checked="" type="radio"/> feet	<input type="radio"/> meters
b) Top of the next higher floor	N/A	<input checked="" type="radio"/> feet	<input type="radio"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A	<input checked="" type="radio"/> feet	<input type="radio"/> meters
d) Attached garage (top of slab)	10.6	<input checked="" type="radio"/> feet	<input type="radio"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	11.0	<input checked="" type="radio"/> feet	<input type="radio"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	9.9	<input checked="" type="radio"/> feet	<input type="radio"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	10.0	<input checked="" type="radio"/> feet	<input type="radio"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs including structural support	N/A	<input checked="" type="radio"/> feet	<input type="radio"/> meters

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SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION			
<p>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.</p>			
<input checked="" type="checkbox"/> Check here if attachments.		<p>Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="radio"/> Yes <input type="radio"/> No</p>	
Certifier's Name Jonathon W. Esber		License Number 4483	
Title Licensed Surveyor		Company Name Sole Proprietor	
Address 3712 75th Drive East		City Sarasota	State FL
		Zip Code 34243	
Signature 		Date 9-8-16	Telephone (941) 351-4198
<p>Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.</p>			
<p>Comments (including type of equipment and location, per C2(e), if applicable)"</p> <p>Elevation for C2.e is Hot Water Heater in Garage (10-8-15 Revision 8-9-16 A9.b Smart vents Photo page 5 Revision 9-8-16 A9.b Smart Vent Photo page 6</p>			
Signature			Date
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)			
<p>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.</p>			
<p>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).</p>			
<p>a) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ - _____ <input checked="" type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.</p>			
<p>b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ - _____ <input checked="" type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the LAG.</p>			
<p>E2. For Building Diagrams 6 -9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8 -9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ - _____ <input checked="" type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.</p>			
<p>E3. Attached garage (top of slab) is _____ - _____ <input checked="" type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.</p>			
<p>E4. Top of platform of machinery and /or equipment servicing the building is _____ - _____ <input checked="" type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.</p>			
<p>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? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown. The local official must certify this information in Section G.</p>			
SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION			
<p>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.</p>			
Property Owner or Owner's Authorized Representative's Name:			
Address		City	State
		ZIP Code	
Signature		Date	Telephone
Comments			
<input type="checkbox"/> Check here if attachments.			

Building Photographs

See Instructions for Item A6.

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.
226 Van Gogh Drive

Policy Number:

City Osprey

State FL

ZIP Code 34229

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 VIEW

10-08-15



Building Photographs

Continuation Page

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.

Policy Number:

228 Van Gogh Drive

City
Osprey

State
FL

ZIP Code
34229

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.



SOUTH SIDE VIEW GARAGE

8-9-16

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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. 228 Van Gogh Drive			Policy Number:	
City Osprey	State Florida	ZIP Code 34229	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.



NORTH SIDE VIEW GARAGE

9-8-16