

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

<b>SECTION A - PROPERTY OWNER INFORMATION</b>			For Insurance Company Use
BUILDING OWNER'S NAME DONALD L. NOLT AND DONNA L. NOLT			Policy Number
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 2212 WEAVER BIRD LANE			Company FIRM Number
CITY VENICE	STATE FL	ZIP CODE 34285	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 1521, STONEYBROOK AT VENICE, UNIT 1.			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL			
LATITUDE/LONGITUDE (OPTIONAL) (#° - #° - #°.#° or #°.#°#°#°)		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1983 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: <u>N/A</u>
N/A			

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

B1. FIRM COMMUNITY NAME & COMMUNITY NUMBER SARASOTA 12514		B2. COUNTY NAME SARASOTA		B3. STATE FL	
B4. MAP AND PANEL NUMBER 125140075	B5. SUFFIX D	B6. FIRM INDEX DATE 05/1/91	B7. FIRM PANEL EFFECTIVE/REMOVED DATE 00/0/92	B8. FLOOD ZONE(S) A-8	B9. BASE FLOOD ELEVATION(S) (Zone A0, use depth of flooding) 8.0

B11. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth indicated in B1.  
 FIS Profile  FIRM  Community Determined  Other (Describe):  
 B11. Indicate the elevation datum used for the BFE in B1:  NGVD 1929  NAVD 1983  Other (Describe):  
 B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Yes  No Designation Date: N/A

**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 5 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), AF, AR, AR1, AR2, AR3, AR4, AR5, AR6, AR7, AR8, AR9, AR10

Complete items C3-a-f 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: NGVD 1929 Comments: N/A

Elevation reference mark used: N/A Does the elevation reference mark used appear on the FIRM?  Yes  No

- a) Top of bottom floor (including basement or enclosure) 12.50 ft (m)
- b) Top of next higher floor N/A ft (m)
- c) Bottom of lowest horizontal structural member (V zones only) N/A ft (m)
- d) Attached garage (top of slab) 12.0 ft (m)
- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 12.1 ft (m)
- f) Lowest adjacent (finished) grade (LAG) 11.5 ft (m)
- g) Highest adjacent (finished) grade (HAG) 11.7 ft (m)
- 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 C3h) N/A sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

*Will J. McAllister*  
#5283  
05/23/05

DONALD L. NOLT

**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: WILLIAM J. McALLISTER

LICENSE NUMBER: 5283

TITLE: PRESIDENT

COMPANY NAME: DARRELL E. GERKEN

ADDRESS: 5700 JASON LEE PLACE

CITY: SARASOTA

STATE: FL

ZIP CODE: 34233

SIGNATURE: *Will J. McAllister*

DATE: 05/23/05

TELEPHONE: (813) 824-7495