ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.	rresponding information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Su 9840 WINGOOD DRIVE	Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. 9840 WINGOOD DRIVE	Policy Number:
City VENICE	State ZIP Code 34292	Company NAIC Number
SECT	SECTION G - COMMUNITY INFORMATION (OPTIONAL)	
The local official who is authorized by law or Sections A, B, C (or E), and G of this Elevations of the section only, or section is terms G8-G10. In Puerto Rico only, or section of the s	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 Ricc only, enter meters.	nagement ordinance can complete n below. Check the measurement
G1. The information in Section C was ta engineer, or architect who is author data in the Comments area below.)	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.)	nd sealed by a licensed surveyor, ne source and date of the elevation
G2. A community official completed Se or Zone AO.	A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.	A-issued or community-issued BFE)
G3. The following information (Items G	The following information (Items G4–G10) is provided for community floodplain management purposes	ent purposes.
G4. Permit Number	G5. Date Permit Issued G6.	Date Certificate of Compliance/Occupancy Issued
18-164552-00-B1		
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:	at the building site:	t meters Datum
G10. Community's design flood elevation:	feet	t meters Datum
Local Official's Name	Title	
Community Name	Telephone	and the second s
Signature	Date	
Comments (including type of equipment and location, per C2(e), if applicable)	location, per C2(e), if applicable)	
		Check here if attachments.

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

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	MATION		FOR INSUR	FOR INSURANCE COMPANY USE
A1. Building Owner's Name LENNAR HOMES, LLC			Policy Number:	YOT.
A2. Building Street Address (including Apt., Unit, Suite, and/or Box No.	Bidg. No.) o	Suite, and/or Bldg. No.) or P.O. Route and	Company NAIC	AIC Number:
9840 WINGOOD DRIVE				
City VENICE	Stațe Florida	To company	ZIP Code	34292
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 24, WATERCREST, UNIT 1, PLAT BOOK 50, PAGES 31 THRU 31K	Number, Leg AT BOOK 5	Tax Parcel Number, Legal Description, etc.) UNIT 1, PLAT BOOK 50, PAGES 31 THRU	31K	, 9
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)	Accessory,	tc.) RESIDENTIAL	AL	
A5. Letitude/Longitude: Lat. N 27°06'14.89" Long. V	Long. W 82°22'48,66"	Horizontal Datum:	etum: NAD 1927	927 X NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance	ate is being u	sed to obtain flood in	nsurance.	
A7. Building Diagram Number 1B				N.
A8. For a building with a crawispace or enclosure(s):				
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	or endosure	e(s) within 1.0 foot at	oove adjacent gra	de N/A
c) Total net area of flood openings in A8.b	N/A sq in			12 12 13
d) Engineered flood openings? ☐ Yes 区 No				
A9. For a building with an attached garage:				
a) Square footage of attached garage	420.00 sq ft			.1.
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade	arage within	1.0 foot above adjace	ent grade 0	
c) Total net area of flood openings in A9.b	0.00 sq in	ä		
d) Engineered flood openings? Yes X No				
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	NCE RATE	MAP (FIRM) INFO	RMATION	: :
B1. NFIP Community Name & Community Number SARASOTA COUNTY 125144	B2. County Name	Name SARASOTA		B3. State Florida
B4. Map/Panel B5. Suffix B6. FIRM Index B7. FIR Language	B7. FIRM Panel Effective/	B8. Flood Zone(s)	39. Base Flood El (Zone AO, use	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)
12115C0332 F 11-04-2016 11-04-2016	2016	Æ		10.7
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:	data or base flood Other/Source:	ood depth entered in	Item B9:	8
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929		X NAVD 1988 □] Other/Source:	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?	stem (CBRS) area or Otherwise	Protected Area (C	PA)? ☐ Yes 🗓 No
Designation Date:	☐ OPA			

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30,

	Expiration Date: November 30, 2018
Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No.	Policy Number:
City State ZIP Code VENICE Florida 34292	Company NAIC Number
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	EQUIRED)
C1. Building elevations are based on: Construction Drawings* Building Under Construction* A new Elevation Certificate will be required when construction of the building is complete.	uction* 区 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, AC Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter Benchmark Utilized: NGS F 697 Vertical Datum: ELEV=8.55' (NAVD88)	/AE, AR/A1-A30, AR/AH, AR/AO. to Rico only, enter meters.
Indicate elevation datum used for the elevations in items a) through h) below.	
☐ NGVD 1929 🔀 NAVD 1988 ☐ Other/Source:	
	neck the measur
d) Attached garage (top of slab)	13.70 X feet meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	13.60 X feet meters
f) Lowest adjacent (finished) grade next to building (LAG)	13.10 X feet meters
g) Highest adjacent (finished) grade next to building (HAG)	13.60 X feet meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	N/A feet meters
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION	ICATION
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify ele- I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.	y law to certify elevation information. blie. I understand that any false
Certifier's Name RICHARD M RITZ RICHARD M RITZ RICHARD M RITZ RLS 4009	Digitally signed by Richard M. Ritz, R.L.S.
Title REGISTERED LAND SURVEYOR	using an SHA-1 authentication code.
Company Name BANKS ENGINEERING	
Address 10511 SIX MILE CYPRESS PARKWAY	SHALl authentication and authentication on any electronic
City State ZIP Code State SIP Code 33966	copies. Date: 2019.05.23 09:32:29-0400
Signature Date Telephone (239) 939-5490	Ext
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, as	agent/company, and (3) building owner.
Comments (including type of equipment and location, p/r C2(e), if applicable) 1. Latitude & Longitude were obtained from Real Time GPS Observations. 2. C2e: Is the bottom of an air conditioner unit located on the right side of the structure.	à

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

Check here if attachments.			2
			, a
			20
			Comments
Telephone	Tele	Date	Signature
te ZIP Code	State	City	Address
7		Representative's Name	Property Owner or Owner's Authorized Representative's Name
RTIFICATION ne A (without a FEMA-issued or ect to the best of my knowledge.	EPRESENTATIVE) CER	SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION owner's authorized representative who completes Sections A, B, and E for Zone A (without a c) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best	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 community-Issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best
ordance with the community's ertify this information in Section G.	om floor elevated in according floor elevated in according floor f	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?	E5. Zone AO only: If no flood depth nun floodplain management ordinance?
above or below the HAG.	_ ☐ feet ☐ meters	requipment	E4. Top of platform of machinery and/or equipment servicing the building is
above or below the HAG.	_ Geet meters		E3. Attached garage (top of slab) is
9 (see pages 1–2 of Instructions), □ above or □ below the HAG.	ction A Items 8 and/or 9 _ ☐ feet ☐ meters	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	E2. For Building Diagrams 6–9 with per the next higher floor (elevation C2.the diagrams) of the building is
∃ above or ☐ below the LAG.	_ feet meters	sement,	 b) Top of bottom floor (including basement, crawispace, or enclosure) is
the elevation is above or below Babove or below the HAG.	boxes to show whether the control of	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	 E1. Provide elevation information for the following the highest adjacent grade (HAG) and the load of the load of
LOMA or LOMR-F request, nent used. In Puerto Rico only,	s intended to support a te. Check the measurem	plete Items E1–E5. If the Certificate is s E1–E4, use natural grade, if availabl	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.
REQUIRED)	TON	SECTION E – BUILDING ELEVATION INFORMATION (SURVEY FOR ZONE AO AND ZONE A (WITHOUT BFE)	SECTION E - I
Company NAIC Number	ZIP Code 34292	State Z Florida	City VENICE
Policy Number:	Box No.	Unit, Suite, and/or Bldg. No.) or P.O. F	Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. 9840 WINGOOD DRIVE
TOB INCLIBANCE COMBANIZ LISE		to corresponding information from t	IMPORTANT: In these spaces conv th

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

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

Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. VENICE 9840 WINGOOD DRIVE Florida State ZIP Code 34292 Company NAIC Number Policy Number: FOR INSURANCE COMPANY USE

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.

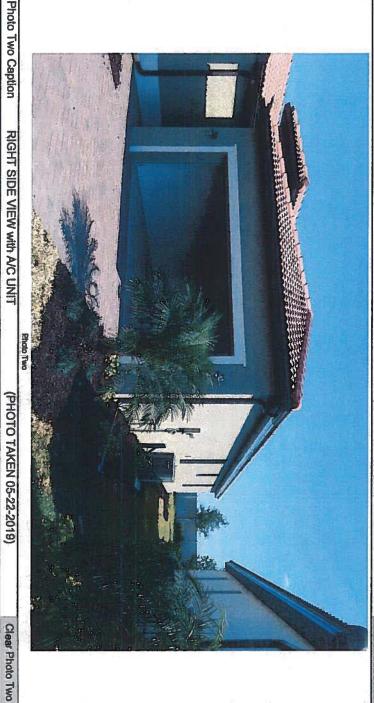


Photo One Caption

FRONT VIEW

(PHOTO TAKEN 05-22-2019)

Clear Photo One



BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

Q₽ V Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. IMPORTANT: In these spaces, copy the corresponding information from Section A. VENICE 9840 WINGOOD DRIVE Florida State ZIP Code 34292 Company NAIC Number Policy Number: FOR INSURANCE COMPANY USE

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 Caption REAR VIEW (PHOTO TAKEN 05-22-2019) Clear Photo Three

Photo Four Caption LEFT SIDE VIEW (PHOTO TAKEN 05-22-2019) Clear Photo Four