### 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.

	SECT	ION A - PROPERTY I	INFORM	ATION		FOR INSUF	RANCE COMPANY USE
A1. Building Owne	r's Name	Pari Lakas Estate				Policy Num	ber:
	* * * * * * * * * * * * * * * * * * * *	Bay Lakes Estate					
A2. Building Street Box No.	_ `	uding Apt., Unit, Suite,	, and/or B	ildg. No.) or P.C	). Route and	Company N	IAIC Number:
	168 Olean	der Street				9	
City	Nokomis			State	Florida	ZIP Code	34275
		d Block Numbers, Tax tates, Nokomis, Florid		umber, Legal D	escription, etc.)	-1	
A4. Building Use (e	.g., Residenti	ial, Non-Residential, Ad	ddition, A	ccessory, etc.)	Residential		
A5. Latitude/Longit	ude: Lat. 27	.071224	Long. <u>82.</u>	261300	Horizontal Datu	m: NAD 1	1927 🛛 NAD 1983
A6. Attach at least :	2 photograph:	s of the building if the (	Certificate	e is being used	to obtain flood insur	ance.	
A7. Building Diagra	am Number	5					
A8. For a building	- with a crawlsr	pace or enclosure(s):					
_		space or enclosure(s)	!	N/A sq ft	<u>t</u>		
b) Number of p	permanent flo	od openings in the crav	wispace	or enclosure(s)	within 1.0 foot above	e adiacent gra	ade N/A
c) Total net are			•			- Cangarana	
d) Engineered							
-			)				
A9. For a building v	vith an attach	ed garage:					
a) Square foot	age of attach	ed garage N/A	sc	ą ft			
b) Number of p	permanent flo	od openings in the atta	ached gar	age within 1.0 f	oot above adjacent	grade	N/A
c) Total net are	ea of flood op	enings in A9.b N//	- /A :	sq in		<del></del>	
	flood opening		-	7 %			
	SE	CTION B - FLOOD IN	NSURAN	CE RATE MA	P (FIRM) INFORM	ATION	
B1. NFIP Communi				B2. County Nan			B3. State
	ounty 12514				Sarasota		Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(	(Zoi	se Flood Elevation(s) ne AO, use Base od Depth)
12115C 0331	F	11/04/2016	11//	04/2016	7-		10.0
R10 Indicate the sc	ource of the B	lase Flood Elevation (B	RFF) data	or hase flood	denth entered in Iter	——′ n RQ∙	
		Community Determ			•	11 <b>6</b> 0.	
		sed for BFE in Item B9:	_	•		Other/Source:	Tr.
B12. Is the building	a located in a	Coastal Barrier Resou	urces Sys	tem (CBRS) ar	ea or Otherwise Pro	tected Area (C	DPA)? TYes X No
Designation D	_		•				7.17.
Dooignaac 2		⊔~	JDING L	70.7			

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The state of the s					FOR INSURANCE COMPANY USE
Buildi	ng Street Address (including Apt., Unit, Suite, and 168 Oleander Street	Vor Bldg. No.	) or P.O. Rou	te and Box No.	Policy Number:
City	Nokomis	State Florid		Code 34275	Company NAIC Number
	SECTION C - BUILDING	ELEVATION	INFORMAT	ION (SURVEY RI	EQUIRED)
C2.	Building elevations are based on: Construte A new Elevation Certificate will be required when Elevations Zones A1-A30, AE, AH, A (with BFI Complete Items C2.a-h below according to the base of the	n construction E), VE, V1–V	n of the buildi 30, V (with Bl	FE), AR, AR/A, AR/	 /AE, AR/A1-A30, AR/AH, AR/AO.
	Benchmark Utilized: SEE COMMENTS		ical Datum:	1988 NAVD	o rado diny, dindi matara.
	Indicate elevation datum used for the elevations i  NGVD 1929 X NAVD 1988 Other Datum used for building elevations must be the s	er/Source:			Check the measurement used.
	Top of bottom floor (including basement, craw	dspace, or en	closure floor)	10 - 24	
	b) Top of the next higher floor			N/A	X feet
	Bottom of the lowest horizontal structural men	nber (V Zone	s only)	N/A	To feet meters
	Attached garage (top of slab)			N/A	X feet
	Lowest elevation of machinery or equipment s (Describe type of equipment and location in Co	servicing the I omments)	building	9.29	X feet  meters
	Lowest adjacent (finished) grade next to build	ing (LAG)		4.6	X feet
	d Highest adjacent (finished) grade next to build	ling (HAG)		5.7	X feet meters
	Lowest adjacent grade at lowest elevation of o structural support	deck orstairs	, including	N/A	X feet meters
	SECTION D - SURVEYO	R, ENGINE	ER, OR ARC	HITECT CERTIFI	CATION
l cer	certification is to be signed and sealed by a land s lify that the information on this Certificate represe ment may be punishable by fine or imprisonment	nts my best	efforts to inter	pret the data availa	law to certify elevation information. ble. I understand that any false
	e latitude and longitude in Section A provided by		-		Check here if attachments.
	fier's Name Brian Yarman	License LS 6	Number 391		The state of the s
Title	PRESIDENT pany Name				Russia
	BŘIAN P. YARMAN, PSM, INC.				
Addı	ess 198 LAKESHORE DRIVE	2000			
City	NOKOMIS	State F	LORIDA	ZIP Code 34275	06/11/2018
Sign	ature	Date 0	6/11/18	Telephone (941)536-3495	
	all pages of this Elevation Certificate and all attachr			cial, (2) insurance a	gent/company, and (3) building owner.
1. The Sara Edmovertic 2. The	ments (including type of equipment and location, e Benchmark used is a NGS benchmark designa sota County, Florida. Being an Aluminum disk on ondson Road and Albee Farm Road, having a putal datum.  e bottom of the beam is at elevation 9.00 1988 Nelevation of machinery (C2e) is the A/C	a concrete n blished eleva	nD: DMS5021 nonument, at ation of 11.03	the Northeast corne feet 1988 NAVD	er of

## **ELEVATION CERTIFICATE**

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IMPORTANT: In thes	e spaces, copy the corresponding ir	formation from Sec	tion A.	FOR INSURANCE COMPANY USE			
Building Street Addre 168 Oleande	ss (including Apt., Unit, Suite, and/or B er Street	,		Policy Number:			
City Nokomis	State	ZIP ( Florida	Code 34275	Company NAIC Number			
	SECTION E - BUILDING ELEVA' FOR ZONE AO	TION INFORMATIO AND ZONE A (WIT	N (SURVEY NOT HOUT BFE)	REQUIRED)			
	(without BFE), complete Items E1–E5. B,and C. For Items E1–E4, use natura						
the highest adjact a) Top of bottom	information for the following and check cent grade (HAG) and the lowest adjact in floor (including basement,		es to show whethe	r the elevation is above or below			
crawispace, o	or enclosure) is n floor (including basement,	<del></del> ,	feet mete	rs above or below the HAG.			
	or enclosure) is	·	☐ feet ☐ mete	rs above or below the LAG.			
	rams 6–9 with permanent flood opening loor (elevation C2.b in the building is	gs provided in Section	n A Items 8 and/or ∏feet				
E3. Attached garage			☐ feet ☐ mete				
E4. Top of platform of	of machinery and/or equipment	·					
servicing the buil	_		feetmete				
floodplain manag	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?   Yes   No  Unknown. The local official must certify this information in Section G.						
	SECTION F - PROPERTY OWNER	OR OWNER'S REP	RESENTATIVE) C	ERTIFICATION			
The property owner o	or owner's authorized representative wh	o completes Sections	s A. B. and E for Z	one A (without a FEMA-issued or			
community-issued BF	E) or Zone AO must sign here. The sta	itements in Sections	A, B, and E are co	rrect to the best of my knowledge.			
community-issued BF	E) or Zone AO must sign here. The stawner's Authorized Representative's Name	tements in Sections	A, B, and E are co	rrect to the best of my knowledge.			
community-issued BF	E) or Zone AO must sign here. The sta	tements in Sections	A, B, and E are co	rrect to the best of my knowledge.			
Property Owner or Ov	E) or Zone AO must sign here. The sta	ntements in Sections A	A, B, and E are co	rrect to the best of my knowledge.			
Property Owner or Ov	E) or Zone AO must sign here. The sta	ntements in Sections Ame	A, B, and E are co	rrect to the best of my knowledge.			
Community-Issued BF Property Owner or Ov Address Signature	E) or Zone AO must sign here. The sta	ntements in Sections Ame	A, B, and E are co	rrect to the best of my knowledge.			
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IMPORTANT: In these spaces, copy the corr			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, S 168 Oleander Street	uite, and/or Bldg. No.) or P.O. Route and Box	No.	Policy Number:
City Nokomis	State ZIP Code Florida 342	75	Company NAIC Number
SECTIO	ON G - COMMUNITY INFORMATION (OPTIC	ONAL)	
· · · · · · · · · · · · · · · · · · ·			
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete the applicable item(s) a		
	en from other documentation that has been sized by law to certify elevation information. (Indi		
G2. A community official completed Sect or Zone AO.	ion E for a building located in Zone A (without	t a FEMA	N-issued or community-issued BFE)
G3. The following information (Items G4-	-G10) is provided for community floodplain ma	anageme	entpurposes.
G4. Permit Number	G5. Date Permit Issued		ate Certificate of ompliance/Occupancy Issued
G7. This permit has been issued for:	☐ New Construction ☐ Substantial Improven	nent	
G8. Elevation of as-built lowest floor (including of the building:	j basement)	feet	meters Datum
G9. BFE or (in Zone AO) depth of flooding at	the building site:	feet	meters Datum
G10. Community's design flood elevation:	<u> </u>	feet	meters Datum
Local Official's Name	Title		
Community Name	Telephone		
Signature	Date		
Comments (including type of equipment and lo	cation, per C2(e), if applicable)		
			Check here if attachments.

### **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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168 Oleander Street			
City	State	ZIP Code	Company NAIC Number
Nokomis	Florida	34275	1

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** 



### **BUILDING PHOTOGRAPHS**

**Continuation Page** 

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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.

168 Oleander Street

City

State

Volume

State

TIP Code

Nokomis

Toring Insurance Company USE

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.



Photo One Caption LEFT

**ELEVATION CERTIFICATE** 



Photo Two Caption RIGHT