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.

| Si | ECTION A - PROPERTY | INFORI | MATION | | | RANCE COMPANY USE |
|--|--|--|------------------|----------------------|----------------------------------|-------------------------------------|
| A1. Building Owner's Name SUNNYSIDE PROPERTIES | OF SARASOTA, INC. | | 1 | | Policy Num | ber: |
| A2. Building Street Address Box No.5201 BAHIA VISTA STREET | | te, and/o | r Bldg. No.) o | r P.O. Route an | d Company N | NAIC Number: |
| City SARASOTA | | | State Florida | | ZIP Code 34232 | |
| A3. Property Description (Lo PID: 0050-09-0005 / LANDS | t and Block Numbers, Ta DESCRIBED IN ORB 12 | ax Parcel 279/ PG | Number, Le | gal Description, | etc.) | |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) NON-RESIDENTIAL / MEDICAL | | | | | | CAL |
| A5. Latitude/Longitude: Lat | 27.32401 | Long. 82 | 2.46537 | Horizon | tal Datum: NAD | 1927 X NAD 1983 |
| A6. Attach at least 2 photog | raphs of the building if the | e Certific | ate is being ι | sed to obtain flo | ood insurance. | |
| A7. Building Diagram Number | er <u>1A</u> | | | | | |
| A8. For a building with a cra | wispace or enclosure(s): | | | | | |
| a) Square footage of cr | awispace or enclosure(s) | · | | 0.00 sq ft | | |
| b) Number of permanen | t flood openings in the cr | awispace | e or enclosur | s(s) within 1.0 fo | ot above adjacent gr | ade 0 |
| c) Total net area of floor | d openings in A8.b | | 0.00 sq ir | | | |
| d) Engineered flood ope | enings? Yes X | No | | | | |
| A9. For a building with an att | ached garage: | | | | | |
| a) Square footage of att | | | 0.00 sa fi | | | |
| | | | | | | |
| b) Number of permanen | | tached g | | | djacent grade U | - |
| c) Total net area of floor | | | 0.00 sq | in . | | |
| d) Engineered flood ope | nings? ☐ Yes 区 N | No | | | | |
| | SECTION B - FLOOD | INSURA | NCE RATE | MAP (FIRM) IN | FORMATION | |
| B1. NFIP Community Name | | | B2. County | | . Oldination | B3. State |
| SARASOTA COUNTY / 125 | 144 | | SARASOTA | | | Florida |
| B4. Map/Panel B5. Suff | B6. FIRM Index Date | B7. FIRM Panel Effective/ Revised Date | | B8. Flood Zone(s) | B9. Base Flood E (Zone AO, us | Elevation(s) e Base Flood Depth) |
| 12115C0154 F | 11-04-2016 | 11-04-2 | | X, A | NA | |
| B10. Indicate the source of t | he Base Flood Elevation | (BFF) da | ata or base fl | ood depth enter | ed in Item RO: | |
| | M | | | | od in team oo. | |
| B11. Indicate elevation datu | m used for BFE in Item B | 89. 🔲 N | GVD 1929 | × NAVD 1988 | Other/Source: | |
| D40 In the building least of | in a Coastal Barrier Reso | ources Sv | stem (CRRS |) area or Others | vise Protected Area (| OPAN2 TO Van TO Na |
| D 12. IS the building located | | :: U) | COULT (CD) | | nac Linierien Vigg (| uranı i res ixi No |
| B12. Is the building located Designation Date: | 152 | CBRS | ПОРА | | | |

ELEVATION CERTIFICATE

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

| 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. 5201 BAHIA VISTA STREET | | | | Policy Number: | |
| | | | | <u> </u> | |
| City State SARASOTA Flori | | Code 232 | Company NAI | C Number | |
| SECTION C - BUILDING ELE | EVATION INFORMA | TION (SURVEY RI | EQUIRED) | | |
| C1. Building elevations are based on: Construction | | ilding Under Constru | uction* 🔀 Fir | nished Construction | |
| *A new Elevation Certificate will be required when co | | | _ | | |
| 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. Benchmark Utilized: SARASOTA COUNTY BM 50-G Vertical Datum: NGVD 1929 | | | | | |
| Indicate elevation datum used for the elevations in ite | | | | - | |
| ☐ NGVD 1929 🗵 NAVD 1988 ☐ Other/S | | | | | |
| Datum used for building elevations must be the same | e as that used for the | BFE. | Chack the | measurement used. | |
| a) Top of bottom floor (including basement, crawlsp. | ace, or enclosure floo | r) | 21.58 X fee | | |
| b) Top of the next higher floor | | | N/A 🗍 fee | | |
| c) Bottom of the lowest horizontal structural membe | r (V Zones only) | | N/A fee | t meters | |
| d) Attached garage (top of slab) | | | N/A fee | t meters | |
| Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Com | ricing the building ments) | | 21.75 × fee | t meters | |
| f) Lowest adjacent (finished) grade next to building (LAG) | | | 21.03 X fee | t meters | |
| g) Highest adjacent (finished) grade next to building (HAG) | | | 21.55 X fee | t meters | |
| h) Lowest adjacent grade at lowest elevation of decistructural support | k or stairs, including | | N/A _ fee | t meters | |
| SECTION D - SURVEYOR, | ENGINEER, OR AR | CHITECT CERTIF | ICATION | | |
| 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. | | | | | |
| Were latitude and longitude in Section A provided by a lic | | | Check h | ere if attachments. | |
| Certifier's Name | License Number | | 11111 | whill have | |
| HAROLD E. NOON, JR. | LS6568 | | _ NINE | JOENE NEW | |
| PRINCIPAL PROFESSIONAL SURVEYOR AND MAPPER | | | | | |
| Company Name GEOSURV, LLC | | | | | |
| Address 5707 19TH STREET W | | | 1/1/200 | STATE OF FLORIDA | |
| City BRADENTON | State Florida | ZIP Code 34207 | de la | STATE OF FLORIDA AND THE PROPERTY OF THE PROPE | |
| Signature | Date 10-28-2019 | Telephone (877) 407-3734 | Ext. | 18.1 | |
| Copy all pages of this Elevation Certificate and all attachme | nts for (1) community | official, (2) insurance | agent/company, | and (3) building owner. | |
| Comments (including type of equipment and location, per CERTIFICATE OF NEW ADDITION ON PORTION TO EXPORTION OF STRUCTURE LYING WITHIN A ZONE IS NAVD 88 VALUES CONVERTED FROM NGVD 1929, US | C2(e), if applicable) KISTING BUILDING (APPROXIMATELY 4. | ONLY. 567 Sq. Ft. +/- BAS | ED ON FIELD S | | |
| REFERENCE PROJECT NUMBER 110602 NOT VALID UNLESS EMBOSSED BY PROFESSIONAL | SEAL. GEOSURV, L | _C COPYRIGHT 201 | 19, ALL RIGHT | RESERVED | |

OMB No. 1660-0008 **ELEVATION CERTIFICATE** Expiration Date: November 30, 2018 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: **5201 BAHIA VISTA STREET** City State ZIP Code Company NAIC Number SARASOTA Florida 34232 SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) 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. 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). a) Top of bottom floor (including basement, crawlspace, or enclosure) is feet meters above or below the HAG. b) Top of bottom floor (including basement, crawlspace, or enclosure) is feet meters above or below the LAG. E2. 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 feet meters above or below the HAG. E3. Attached garage (top of slab) is feet meters above or below the HAG. E4. Top of platform of machinery and/or equipment servicing the building is feet meters above or below the HAG. 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 REPRESENTATIVE) CERTIFICATION 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. Property Owner or Owner's Authorized Representative's Name Address City State ZIP Code Signature Date Telephone Comments

Check here if attachments.

ELEVATION CERTIFICATE

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| IMPORTANT: In these spaces, copy the corresponding information from Section A. | | | | FOR INSURANCE COMPANY USE | | |
|--|---|--------------------|--------|---|--|--|
| Dutilities Observe Andrew Control III. And the transfer of the control of the con | | | | Policy Number: | | |
| City SARASOTA | State Florida | ZIP Code 34232 | | Company NAIC Number | | |
| SECTION | N G - COMMUNITY | INFORMATION (OPTIO | NAL) | | | |
| 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 Rico only, enter meters. | | | | | | |
| G1. 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.) | | | | | | |
| G2. A community official completed Section or Zone AO. | G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO. | | | | | |
| G3. The following information (Items G4–G10) is provided for community floodplain management purposes. | | | | | | |
| G4. Permit Number | G5. Date Permit Iss | sued | | Date Certificate of compliance/Occupancy Issued | | |
| G7. This permit has been issued for: New Construction Substantial Improvement | | | | | | |
| 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: | | 21 5 | feet | meters Datum | | |
| Local Official's Name | | Title | | | | |
| Community Name | | Telephone | _ | | | |
| Signature | | Date | | | | |
| Comments (including type of equipment and loc | cation, per C2(e), if a | pplicable) | | | | |
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BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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| IMPORTANT: In these spaces, o | FOR INSURANCE COMPANY USE Policy Number: | | |
|--|--|-------------------|---------------------|
| Building Street Address (including 5201 BAHIA VISTA STREET | | | |
| City SARASOTA | State Florida | ZIP Code 34232 | 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.

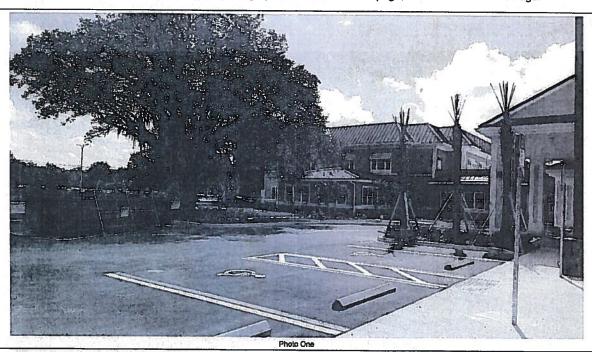


Photo One Caption North face of building addition

Clear Photo One

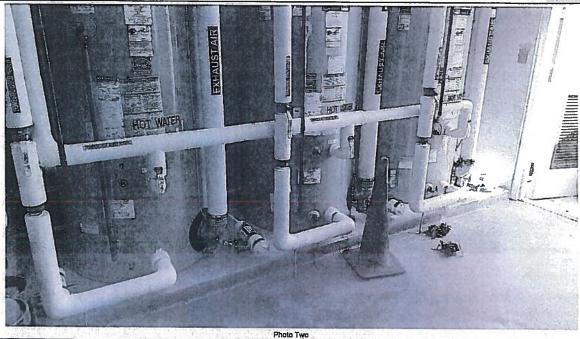


Photo Two Caption lowest machinery servicing building addition water heater closet, on elevated slab

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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| IMPORTANT: In these spaces, cop | FOR INSURANCE COMPANY USE | | |
|---|--|-------------------------|---|
| Building Street Address (including A 5201 BAHIA VISTA STREET | pt., Unit, Suite, and/or Bldg. No.) or | P.O. Route and Box No. | Policy Number: |
| City SARASOTA | State Florida | ZIP Code 34232 | Company NAIC Number |
| with taken, Front view a | an will fit on the preceding page, and "Rear View"; and, if required, and with representative examples o | "Right Side View" and " | aphs below. Identify all photographs Left Side View." When applicable, s, as indicated in Section A8. |
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