#### 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   |   |                            | FOR INSUF            | RANCE COMPANY USE |                          |  |
|--|---|----------------------------|----------------------|-------------------|--------------------------|--|
| A1. Building Owner's Name  |   |                            |                      | Policy Num        | ber:                     |  |
| Duane V Mountain and Cathy Wilson Mountain FN 15040226 (GAFAGE)  |   |                            |                      |                   |                          |  |
| A2. Building Street Address (including   | Apt., Suite, and/or B   | ildg. No.) or P. O. Rout   | te or Box No.        | Company N         | AIC Number:              |  |
| 5207 Turtle Creek Lane   | 5207 Turtle Creek Lane  |                            |                      |                   |                          |  |
| City   |   | State                      |                      | ZIP Code          |                          |  |
| Sarasota   |   | FL                         |                      | 34232             |                          |  |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Sarasota Property ID 0051090002 Lot 7 Turtle Creek Pb 24 Pgs 26/26A |   |                            |                      |                   |                          |  |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential   |   |                            |                      |                   |                          |  |
| A5. Latitude/Longitude: Lat. 27°19'0   | 5.42"N Long   | 82°28'03.79"W              | Horizontal Datum     | □ NAD 1           | 927 🕱 NAD 1983           |  |
| A6. Attach at least 2 photographs of the   | A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. |                            |                      |                   |                          |  |
| A7. Building Diagram Number  | <u> </u>  |                            |                      |                   |                          |  |
| A8. For a building with a crawispace o   | r enclosure(s):   |                            |                      |                   |                          |  |
| a) Square footage of crawispace  | or enclosure(s)   | 1170, sqft                 |                      |                   |                          |  |
| b) Number of permanent flood op-   | enings in the crawlsp   | pace or enclosure(s) w     | ithin 1.0 foot above | adjacent gra      | ade <i>O</i>             |  |
| c) Total net area of flood openings  | s in A8.b   | _sq in                     |                      |                   |                          |  |
| d) Engineered flood openings?  | ☐ Yes ☐ No  |                            |                      |                   |                          |  |
| A9. For a building with an attached garage:  |   |                            |                      |                   |                          |  |
| a) Square footage of attached gar  | rage NIA  | sq ft                      |                      |                   |                          |  |
| b) Number of permanent flood ope   | enings in the attache   | ed garage within 1.0 for   | ot above adjacent g  | rade r            | هاد                      |  |
| c) Total net area of flood openings  | يرابر A9.b ا  | sq in                      |                      |                   |                          |  |
| d) Engineered flood openings?  | Yes No  | _                          |                      |                   |                          |  |
|  |   |                            |                      |                   |                          |  |
| SECTION  | B-FLOOD INSU  | RANCE RATE MAP             | (FIRM) INFORMA       | rion              |                          |  |
| B1. NFIP Community Name & Commu  | nity Number   | ·                          | B2. County Name      |                   | B3. State                |  |
| Sarasota County 125144 Sarasota  |   |                            |                      | FL 🔽              |                          |  |
| B4. Map/Panel B5. Suffix B6.   | FIRM Index B7   | . FIRM Panel               | B8. Flood Zone(s)    |                   | e Flood Elevation(s)     |  |
|  | ate   | Effective/<br>Revised Date |                      |                   | ne AO, use Base od Depth |  |
| 12115C 0154 F 11/0   | 04/2016   | 11/04/2016                 | AF                   | Floc              | 18.0                     |  |
| DdO Indiana the control of   |   |                            |                      |                   |                          |  |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:  |   |                            |                      |                   |                          |  |
| FIS Profile FIRM Community Determined Other/Source   |   |                            |                      |                   |                          |  |
| 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)? Tyes X No                                      |   |                            |                      |                   |                          |  |
| Designation Date: CBRS OPA   |   |                            |                      |                   |                          |  |
|  |   |                            |                      |                   |                          |  |
|  |   | <u> </u>                   |                      |                   |                          |  |

### **ELEVATION CERTIFICATE**

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

| IMPORTANT: In these spaces, copy the corresponding information from Section   | FOR INSURANCE COMPANY USE |                                |  |  |  |  |
|---|---------------------------|--------------------------------|--|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route   | Policy Number:            |                                |  |  |  |  |
| 5207 Turtle Creek Lane  |                           |                                |  |  |  |  |
| City State ZIP Co<br>Sarasota FL  | ode<br>232                | Company NAIC Number            |  |  |  |  |
| SECTION C - BUILDING ELEVATION INFORMATIO   | N (SURVEY RE              | QUIRED)                        |  |  |  |  |
| C1. Building elevations are based on:   Construction Drawings*   Building   | ig Under Constru          | ction* 📝 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.  Benchmark Utilized: Lour Bu EAF Vertical Datum: NATO 19.88  Indicate elevation datum used for the elevations in items a) through h) below.   |                           |                                |  |  |  |  |
| Datum used for building elevations must be the same as that used for the BFE  | ≣.                        |                                |  |  |  |  |
|   | 1010                      | Check the measurement used.    |  |  |  |  |
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) _   | 19,2                      |                                |  |  |  |  |
| b) Top of the next higher floor   | NA_                       | X feet    meters               |  |  |  |  |
| c) Bottom of the lowest horizontal structural member (V Zones only)   | N <u>A_</u>               | X feet  meters                 |  |  |  |  |
| d) Attached garage (top of slab)  | NA                        | X feet  meters                 |  |  |  |  |
| e) Lowest elevation of machinery or equipment servicing the building     (Describe type of equipment and location in Comments)  | <u> </u>                  | 🗓 feet 📋 meters                |  |  |  |  |
| f) Lowest adjacent (finished) grade next to building (LAG)  | 186                       | X feet  meters                 |  |  |  |  |
| g) Highest adjacent (finished) grade next to building (HAG)   | 189                       | X feet meters                  |  |  |  |  |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including _     structural support  | 14.14                     | X feet meters                  |  |  |  |  |
|   | ITECT CERTIE              | CATION                         |  |  |  |  |
| 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 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 licensed land surveyor?  |                           | Check here if attachments.     |  |  |  |  |
| Certifier's Name License Number Robert O Drake 5965   |                           |                                |  |  |  |  |
| Title   |                           | 7 /                            |  |  |  |  |
| Project Manager   |                           |                                |  |  |  |  |
| Company Name  |                           | Place                          |  |  |  |  |
| Red Stake Surveyors, Inc  |                           | ittere AN                      |  |  |  |  |
| Address 6389 Tower Lane, Level II   |                           | - Seart No                     |  |  |  |  |
| City State Z  | ZIP Code                  |                                |  |  |  |  |
| Sarasota FL 💌   | 34240                     | 1 1                            |  |  |  |  |
| Signature That Orly 1/29/20   | Telephone<br>941-923-9997 |                                |  |  |  |  |
| Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.   |                           |                                |  |  |  |  |
| Comments (including type of equipment and location, per C2(e), if applicable) Section B Flood insurance rate map (FIRM) information to be verified at local F.E.M.A. control office   |                           |                                |  |  |  |  |
| A5: MELSHEED KITH A GPS.  |                           |                                |  |  |  |  |
| C2: ÉLEVATIONS BASED ON MAID 1929 AND CORPCON CONVERGED TO NAVO 1988 C20:   |                           |                                |  |  |  |  |
|   |                           |                                |  |  |  |  |

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| IMPORTANT: In these spaces, copy the corresponding inform  | FOR INSURANCE COMPANY USE                         |                                      |  |  |  |  |
|--|---|--------------------------------------|--|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. 5207 Turtle Creek Lane  | Policy Number:                                    |                                      |  |  |  |  |
| City State Sarasota FL   | ZIP Code  | Company NAIC Number                  |  |  |  |  |
| SECTION E - BUILDING ELEVATION<br>FOR ZONE AO ANI  | NINFORMATION (SURVEY NO<br>DIZONE A (WITHOUT BFE) | T REQUIRED)                          |  |  |  |  |
| 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.         |   |                                      |  |  |  |  |
| <ul> <li>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).</li> <li>a) Top of bottom floor (including basement,</li> </ul> |   |                                      |  |  |  |  |
| b) Top of bottom floor (including basement, crawlspace, or enclosure) is   |   |                                      |  |  |  |  |
| E2. For Building Diagrams 6–9 with permanent flood openings p<br>the next higher floor (elevation C2.b in  |   | r 9 (see pages 1–2 of Instructions), |  |  |  |  |
| the diagrams) of the building is  E3. Attached garage (top of slab) is   |   |                                      |  |  |  |  |
| E4. Top of platform of machinery and/or equipment servicing the building is  | [feet   | _                                    |  |  |  |  |
| E5. Zone AO only: If no flood depth number is available, is the to floodplain management ordinance? Yes No   | op of the bottom floor elevated in a              | ccordance with the community's       |  |  |  |  |
| SECTION F - PROPERTY OWNER (OR (   | OWNER'S REPRESENTATIVE) C                         | ERTIFICATION                         |  |  |  |  |
| 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 S  | tate ZIP Code                        |  |  |  |  |
| Signature  | Date To   | elephone                             |  |  |  |  |
| Comments   |   |                                      |  |  |  |  |
|  |   |                                      |  |  |  |  |
|  |   | ×                                    |  |  |  |  |
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|  |   |                                      |  |  |  |  |

### **ELEVATION CERTIFICATE**

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| 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. 5207 Turtle Creek Lane   |   |          | Policy Number:                                 |  |  |  |  |
| City<br>Sarasota   | State ZIP Code<br>FL ☑ 34232                    |          | Company NAIC Number                            |  |  |  |  |
| SECTION  | SECTION G - COMMUNITY INFORMATION (OPTIONAL)    |          |  |  |  |  |  |
| 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 Sect or Zone AO.  | ion E for a building located in Zone A (without | t a FEMA | A-issued or community-issued BFE)              |  |  |  |  |
| G3. The following information (Items G4-   | -G10) is provided for community floodplain ma   | anageme  | ent purposes.                                  |  |  |  |  |
| G4. Permit Number<br>19 12420800 BA  | G5. Date Permit Issued                          |          | late 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:   | g 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:   |   | ☐ feet   | meters Datum                                   |  |  |  |  |
| Local Official's Name  | Title   |          |  |  |  |  |  |
| Community Name   | Telephone                                       |          |  |  |  |  |  |
| Signature  | Date  |          |  |  |  |  |  |
| Comments (including type of equipment and location, per C2(e), if applicable)  |   |          |  |  |  |  |  |
|  |   |          |  |  |  |  |  |
|  |   |          |  |  |  |  |  |
|  |   |          |  |  |  |  |  |
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|  |   |          |  |  |  |  |  |
|  |   |          | Check here if attachments.                     |  |  |  |  |

### **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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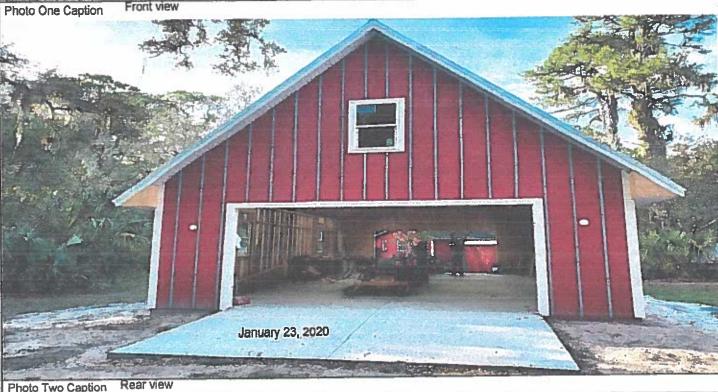
**ELEVATION CERTIFICATE** 

Sarasota

FOR INSURANCE COMPANY USE 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. Policy Number: 5207 Turtle Creek Lane State ZIP Code Company NAIC Number City 34232

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.





### **BUILDING PHOTOGRAPHS**

OMB No. 1660-0008

**ELEVATION CERTIFICATE** Continuation Page 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: 5207 Turtle Creek Lane City State ZIP Code Company NAIC Number Sarasota FL 34232 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 **Photo One Caption** Photo Two

**Photo Two Caption**