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

OMB No. 1660-0008 Expiration Date: November 30, 2022

# **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 INSURANCE COMPANY					RANCE COMPANY USE			
				Policy Num	ber:			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2010 PREYMORE ST					Company N	AIC Number:		
City		<u> </u>		State			ZIP Code	
OSPREY				Florida			34229	
		nd Block Numbers, Ta EOF, CORDES COVE				cription, etc.)		
A4. Building Use (	e.g., Resider	itial, Non-Residential,	Addition	, Accessory,	etc.)	RESIDENTIA	L	
A5. Latitude/Longit	tude: Lat. 2	7.21032°	Long. <u>-8</u>	32.48977°		Horizontal Da	ntum: 🔲 NAD 1	927 X NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being u	sed to	obtain flood in	surance.	
A7. Building Diagra	am Number	1B						
A8. For a building	with a crawls	pace or enclosure(s):						
a) Square foot	tage of crawl	space or enclosure(s)			N/A	sq ft		
b) Number of p	ermanent flo	ood openings in the cr	awispace	e or enclosure	e(s) with	nin 1.0 foot abo	ove adjacent gra	ade N/A
c) Total net an	ea of flood op	penings in A8.b		N/A sq in				
d) Engineered	flood openin	ngs? 🗌 Yes 🗵 N	10					
A9. For a building v	vith an attach	ned garage:						
a) Square foot	age of attach	ed garage		468 sq ft				
a) Square footage of attached garage468 sq ft  b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A								
c) Total net are	c) Total net area of flood openings in A9.b N/A sq in							
d) Engineered flood openings?								
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1, NFIP Community Name & Community Number			B2. County	1		Í .		
SARASOTA COUN	ITY - 125144			SARASOTA				Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	tM Panel ective/ vised Date	B8. FI Zone(		9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
12115C-0228	F	11-04-2016	11-04-2	2016	AE	10	)'	
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)?   Yes  No								
Designation Date: CBRS _ OPA								

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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. Policy Number: 2010 PREYMORE ST Company NAIC Number ZIP Code State City 34229 **OSPREY** Florida SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) X Finished Construction Construction Drawings\* ☐ Building Under Construction\* C1. Building elevations are based on: \*A new Elevation Certificate will be required when construction of the building is complete. 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: NGS BM D-634 EL: 7.29' Vertical Datum: NAVD1988 Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 X NAVD 1988 ☐ Other/Source: Datum used for building elevations must be the same as that used for the BFE. Check the measurement used. 12.7 meters a) Top of bottom floor (including basement, crawlspace, or enclosure floor) N/A meters b) Top of the next higher floor N/A x feet meters c) Bottom of the lowest horizontal structural member (V Zones only) 12.2 |X | feet meters d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building 12.7 |X | feet meters (Describe type of equipment and location in Comments) 10.9 x feet meters f) Lowest adjacent (finished) grade next to building (LAG) 11.6 x feet □ I meters g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs, including N/A meters structural support 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 5228 **B. GREGORY RIETH** Title PSM/CFM Place Company Name BENNETT-PANFIL, INC. Address 742 SHAMROCK BLVD ZIP Code State City Florida 34293 **VENICE** Telephone Ext Date Signature 04/25/2023 (941) 497-1290 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) FILE #20-10-47. THE OUTSIDE A/C UNIT ON THE SOUTH SIDE OF THE HOME WAS USED FOR SECTION C2e. SECTION A5 WAS DERIVED FROM A HAND HELD G.P.S. UNIT (GPSTEST APP - NO CONVERSION). DATE OF FIELD SURVEY: 04/05/2023

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IMP	ORTANT: In these spaces, copy the correspondi	ng information from	Section A.	FOR INSURANCE COMPANY USE		
Buil	ding Street Address (including Apt., Unit, Suite, and 0 PREYMORE ST			Policy Number:		
City	-	tate Iorida	ZIP Code 34229	Company NAIC Number		
	SECTION E – BUILDING ELE FOR ZONE	VATION INFORMA AO AND ZONE A	TION (SURVEY NOT WITHOUT BFE)	REQUIRED)		
corr	Zones AO and A (without BFE), complete Items E1- plete Sections A, B,and C. For Items E1-E4, use na	-E5. If the Certificate atural grade, if availab	is intended to support ble. Check the measure	a LOMA or LOMR-F request, ement 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 b) Top of bottom floor (including basement,		feet _ mete	rs above or below the HAG.		
	crawlspace, or enclosure) is		feet _ mete			
E2.	For Building Diagrams 6–9 with permanent flood on the next higher floor (elevation C2.b in the diagrams) of the building is	penings provided in S	ection A Items 8 and/o			
E3.	Attached garage (top of slab) is		feet _ mete	rs above or below the HAG		
E4.	Top of platform of machinery and/or equipment servicing the building is			rs above or below the HAG.		
<b>E</b> 5.	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 OWN	ER (OR OWNER'S F	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						
Add	ress	City	S	tate ZIP Code		
Sigi	nature	Date	Т	elephone		
Con	nments					
				Check here if attachments.		

## **ELEVATION CERTIFICATE**

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IMPORTANT: In these spaces, copy the corre	esponding informa <u>ti</u> o	n from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, St 2010 PREYMORE ST	uite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
City OSPREY	State Florida	ZIP Code 34229	Company NAIC Number
SECTIO	N G - COMMUNITY I	NFORMATION (OPTIONA	AL)
The local official who is authorized by law or ord Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, enter G1.	Certificate. Complete ter meters.  en from other documer	the applicable item(s) and	sign below. Check the measurement and and sealed by a licensed surveyor,
data in the Comments area below.)			e the source and date of the elevation  EMA-issued or community-issued BFE)
G3. The following information (Items G4-	G10) is provided for co	ommunity floodplain manaç	gement purposes.
G4. Permit Number	G5. Date Permit Issu	ued G	Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	_	Substantial Improvement	
G8. Elevation of as-built lowest floor (including of the building:	basement) ——		feet meters Datum
G9. BFE or (in Zone AO) depth of flooding at t	he 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 loc	ation, per C2(e), if app	olicable)	
			Check here if attachments,

### **BUILDING PHOTOGRAPHS**

## **ELEVATION CERTIFICATE**

See Instructions for Item A6.

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City	State	ZIP Code	Company NAIC Number
OSPREY	Florida	34229	

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

Clear Photo One

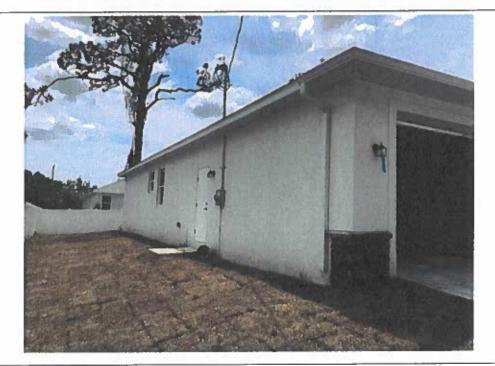


Photo Two Caption

Clear Photo Two

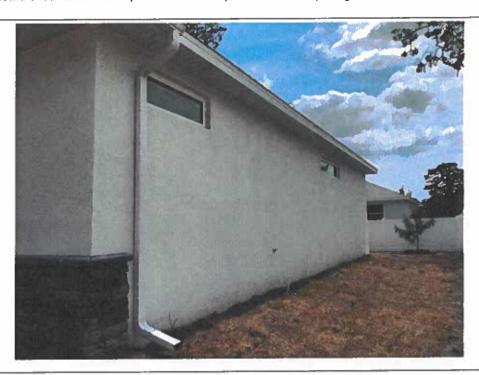
## **BUILDING PHOTOGRAPHS**

**Continuation Page** 

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IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE Policy Number:		
Building Street Address (including Ap 2010 PREYMORE ST			
City OSPREY	State Florida	ZIP Code 34229	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 Three Caption** 

**ELEVATION CERTIFICATE** 

Clear Photo Three



**Photo Four Caption** 

Clear Photo Four