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.

		TION A - PROPERTY	INFOR	MATION		FOR INSUI	RANCE COMPANY USE
A1. Building Owner BAYSHORE NOK		NGS, LLC				Policy Num	ber:
Box No.		cluding Apt., Unit, Suite	, and/c	or Bldg. No.) or P.O.	Route and	Company N	NAIC Number:
2501 BAYSHORE	ROAD - MAIR	1 HOUSE					
City NOKOMIS				State Florida	<u></u>	ZIP Code 34275	
A3. Property Desc METES & BOUND		nd Block Numbers, Tax 0161050007	Parce	il Number, Legal De	scription, etc.)		
A4. Building Use (e.g., Residen	tial, Non-Residential, A	\ddition	, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longit	tude: Lat. 27	7.09293°	Long. <u>-</u>	82.28441°	Horizontal Datum		1927 × NAD 1983
A6. Attach at least	2 photograph	ns of the building if the	Certific	cate is being used to	o obtain flood insura	ince.	
A7. Building Diagra	m Number	1B					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawls	space or enclosure(s)	114	sq ft			
b) Number of	permanent flo	ood openings in the cra	wispac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade 2
		enings in A8.b 400		sq in		• -	
d) Engineered				_			
A9. For a building v				4 No.			
a) Square foot	age of attach	ed garage		sa ft			
		od openings in the atta			ot ahove adiacent c	irada	
		enings in A9.b			ot above adjacent g		
d) Engineered				sq in			
u) Engineered	nood obermi	gs? 🗶 Yes 🗌 No)				
	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Communi	ty Name & Co			B2. County Name			B3. State
SARASOTA COUN	TY - 125144			SARASOTA			Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E	IRM Panel ffective/	B8. Flood Zone(s)	(Zoı	se Flood Elevation(s) ne AO, use Base
125144-0236	D	09/03/1992		evised Date /1984	A12	11' & 13	od Depth) 3'
B10. Indicate the se	ource of the E	Base Flood Elevation (E	RFF) d	ata or hase flood de	onth entered in Item	PO.	
		Community Determ			pur entered in item		
B11. Indicate eleva	tion datum us	sed for BFE in Item B9	: 🗵 N	GVD 1929 🔲 NA	.VD 1988 ☐ Oth	ner/Source:	
B12. Is the building	located in a	Coastal Barrier Resou	rces Sy	ystem (CBRS) area	or Otherwise Prote	cted Area (C	DPA)? ☐ Yes ☒ No
Designation D	ate:		BRS	☐ OPA			
							2

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the cor			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, S 2501 BAYSHORE ROAD - MAIN HOUSE	duite, and/or Bldg. No.) or P.O. Rout	e and Box No.	Policy Number:
City NOKOMIS	State ZIP (Florida 3427		Company NAIC Number
SECTION C - BUI	LDING ELEVATION INFORMAT	ION (SURVEY RI	EQUIRED)
C1. Building elevations are based on:	Construction Drawings*	ling Under Constru	
*A new Elevation Certificate will be requi			
C2. Elevations – Zones A1–A30, AE, AH, A Complete Items C2.a–h below according Benchmark Utilized: SAR CO. BM#160	to the building diagram specified in	n Item A7. In Puert	AE, AR/A1-A30, AR/AH, AR/AO. Rico only, enter meters.
Indicate elevation datum used for the ele			
NGVD 1929 ☐ NAVD 1988		/.	
Datum used for building elevations must	be the same as that used for the Bl	FE.	Observation of the state of the
a) Top of bottom floor (including baseme	ent, crawispace, or enclosure floor)	8, 5	Check the measurement used.
b) Top of the next higher floor	on a mopular of choosing hoof	14 2	
c) Bottom of the lowest horizontal struct	ural member (V Zones only)	N/A	X feet meters
d) Attached garage (top of slab)	drai member (v Zones only)	N/A	X feet meters meters
e) Lowest elevation of machinery or equ	ipment servicing the building	14. 2	X feet meters meters
(Describe type of equipment and loca	tion in Comments)	0.3	
f) Lowest adjacent (finished) grade nex		8.3	X feet meters
g) Highest adjacent (finished) grade nex	- ' '	12. 3	X feet meters
h) Lowest adjacent grade at lowest elev structural support	ation of deck or stairs, including	8. 3	X feet meters
SECTION D - SU	IRVEYOR, ENGINEER, OR ARC	HITECT CERTIFI	CATION
This certification is to be signed and sealed be a certify that the information on this Certificate statement may be punishable by fine or imprison.	represents my best efforts to intern	ret the dete eveile	law to certify elevation information. ble. I understand that any false
Were latitude and longitude in Section A prov		⊠Yes □No	☐ Check here if attachments.
Certifier's Name B. GREGORY RIETH	License Number 5228		
Title			- Start Start Start
PSM/CFM			11/1/20
Company Name STRAYER SURVEYING & MAPPING, INC.		1	Plade
Address 742 SHAMROCK BLVD		,,	Place 578 Seath 198
City	State	ZIP Code	- 5 C T Q W
VENICE	Florida	34293	26, 25 (1)
Signature G TZ44	Date	Telephone	
Copy all pages of this Elevation Certificate and	all attachments for (1) community offi	cial, (2) insurance a	gent/company, and (3) building owner.
Comments (including type of equipment and long File # 13-11-48. PARCEL LIES IN ZONES A 114 SQUARE FOOT TACKLE ROOM, ELEVATION 24.2'. SECTION A5 WAS DERIVICENTIFICATE NOT VALID WITHOUT RAISE	.12, 11 AND 13, STRUCTURE LIES ATION 8.50', WITH TWO SMART V 'ED FROM A HAND HELD G.P.S. U	ENTS (MODEL #1	540-520, THIRD FLOOR
			1 =

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	nformation from Secti		FOR INSURANCE	COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or E 2501 BAYSHORE ROAD - MAIN HOUSE	Bidg. No.) or P.O. Route	and Box No.	Policy Number:	
City State NOKOMIS Florid			Company NAIC Nur	mber
SECTION E – BUILDING ELEVA FOR ZONE AC	TION INFORMATION AND ZONE A (WITH	(SURVEY NOT OUT BFE)	REQUIRED)	
For Zones AO and A (without BFE), complete Items E1–E5 complete Sections A, B, and C. For Items E1–E4, use natural enter meters.	. If the Certificate is inte al grade, if available. Ch	nded to support a eck the measure	LOMA or LOMR-F rement used. In Puerto	equest, Rico only,
E1. Provide elevation information for the following and cher the highest adjacent grade (HAG) and the lowest adjacent	ck the appropriate boxes ent grade (LAG).	s to show whether	r the elevation is abo	ve or below
 a) Top of bottom floor (including basement, crawlspace, or enclosure) is 	[☐ feet ☐ meter	s above or	below the HAG.
b) Top of bottom floor (including basement, crawispace, or enclosure) is	[feet meter		
E2. For Building Diagrams 6–9 with permanent flood opening the next higher floor (elevation C2.b in				Instructions),
the diagrams) of the building is	[☐ feet ☐ meter	s above or	below the HAG.
E3. Attached garage (top of slab) is	· [feet meter	s above or	below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is	[feet meter	s above or	below the HAG.
E5. Zone AO only: If no flood depth number is available, is floodplain management ordinance? Yes No	the top of the bottom flo	or elevated in according to the control of the cordinate	cordance with the cor	mmunitv's
SECTION F - PROPERTY OWNER	(OR OWNER'S REPRE	SENTATIVE) CE	RTIFICATION	
The property owner or owner's authorized representative with community-issued BFE) or Zone AO must sign here. The st	no completes Sections	B and F for Zo	ne A (without a FEM)	A-issued or
	,	_,	out to the boot of thy	
Property Owner or Owner's Authorized Representative's Na	me			ougo.
Property Owner or Owner's Authorized Representative's Na Address	City	Sta	ate Z	ZiP Code
			ate Z ephone	
Address	City			
Address Signature	City			

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corresponding information from Section	n A. FOR INSURANCE COMPA	ANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route 2501 BAYSHORE ROAD - MAIN HOUSE	and Box No. Policy Number:	
City State ZIP Co NOKOMIS Florida 34275	company / in the / telliber	
SECTION G - COMMUNITY INFORMATION	(OPTIONAL)	
The local official who is authorized by law or ordinance to administer the community Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable used in Items G8–G10. In Puerto Rico only, enter meters.	's floodplain management ordinance can con item(s) and sign below. Check the measuren	nplete nent
G1. The information in Section C was taken from other documentation that hat engineer, or architect who is authorized by law to certify elevation information that hat engineer, or architect who is authorized by law to certify elevation information that hat engineer, or architect who is authorized by law to certify elevation information.	s been signed and sealed by a licensed surve tion. (Indicate the source and date of the elev	eyor, vation
G2. A community official completed Section E for a building located in Zone A or Zone AO.	·	d BFE)
G3. The following information (Items G4–G10) is provided for community floor	plain management purposes.	
G4. Permit Number G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issue	ed
G7. This permit has been issued for: New Construction Substantial In	nprovement	
G8. Elevation of as-built lowest floor (including basement) of the building:	feet meters	
G9. BFE or (in Zone AO) depth of flooding at the building site:	feet	
G10. Community's design flood elevation:	feet _ meters	
Local Official's Name Title		
Community Name Telephone		
Signature Date		
Comments (including type of equipment and location, per C2(e), if applicable)		•
	☐ Check here if attack	hments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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IMPORTANT: In these spaces, o	copy the corresponding information	on from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including 2501 BAYSHORE ROAD - MAIN	g Apt., Unit, Suite, and/or Bidg. No.) HOUSE	or P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
NOKOMIS	Florida	34275	

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.



FRONT VIEW 7/27/16

Photo One Caption



REAR VIEW 7/27/16

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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	opy the corresponding information		FOR INSURANCE COMPANY USE
	Apt., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
2501 BAYSHURE RUAD - MAIN	HOUSE		a .
2501 BAYSHORE ROAD - MAIN City	HOUSE	ZIP Code	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.

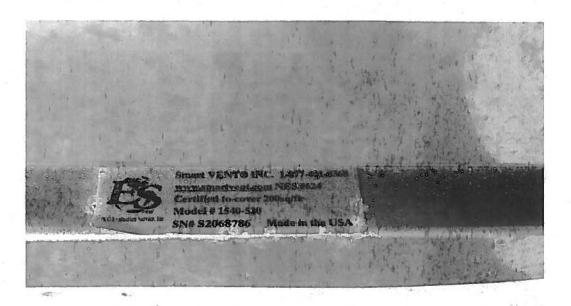


Photo One Caption



VENTS 7/27/16

Photo Two Caption