Û.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 INSURANCE COMPANY USE
A1. Building Owner's Name Mark McGrath	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 511 Blackburn Blvd.	Company NAIC Number:
City North Port Florida	ZIP Code 34287
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc. Unit 327, Harbor Cove Mobile Home Park, Sarasota, County, Florida	Brever M. See Green, I
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential	al (Mobile Home)
A5. Latitude/Longitude: Lat. 27°02'19.6" N. Long. 082°16'13.4" W. Horizontal	Datum: ☐ NAD 1927 ☒ NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood	insurance.
A7. Building Diagram Number 6	no recordado a la como de transcer por
A8. For a building with a crawlspace or enclosure(s):	to vestillario a social della feriore della
-> Colling City and County and Colling County and	i ser ing a Wiles
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot	above adjacent grade 17
c) Total net area of flood openings in A8.b 1836 sq in	s over the time transfer on the state of the
d) Engineered flood openings?	a cross
care the last religious and application and the control of the Archael of the careful of the	of the first of th
b) Number of permanent flood openings in the attached garage within 1.0 foot above adja	cent grade 2
c) Total net area of flood openings in A9.b 130 sq in	Man can a a 2
d) Engineered flood openings? Yes No	The Secret Consider & Magden
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFO	RMATION
B1. NFIP Community Name & Community Number Sarasota County 125144 B2. County Name Sarasota	B3. State Florida
B4. Map/Panel B5. Suffix B6. FIRM Index Date Effective/Revised Date 11/04/2016 B7. FIRM Panel Effective/Revised Date 11/04/2016 A	(Zone AO, use Base
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered	BUT H. W. NO. STATE OF THE PARTY OF THE PART
☐ FIS Profile ☑ FIRM ☐ Community Determined ☐ Other/Source:	u ad ad gorden er and a Tracilis (p.) er tengelig af ynod gold fan ar annodd
	8 Other/Source:
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise	ANDLE - 1 - 70 - 1711 - 1811 - 1811 - 1811 - 1811 - 1811 - 1811 - 1811 - 1811 - 1811 - 1811 - 1811 - 1811 - 18
Designation Date: CBRS ☐ OPA	-1-01 v0.00

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corresponding information from Section	FOR INSURANCE COMPANY		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route 511 Blackburn Blvd.	and Box No.	Policy Number:	
	Code	Company NAIC Number	
North Port Florida	34287		
SECTION C - BUILDING ELEVATION INFORMATION	ON (SURVEY REC	(UIRED)	
C1. Building elevations are based on: Gonstruction Drawings* Building	Under Construction*	*	
*A new Elevation Certificate will be required when construction of the building is	s complete.		
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE Complete Items C2.a–h below according to the building diagram specified in I	E). AR. AR/A. AR/AE	AR/A1-A30, AR/AH, AR/AO.	
Benchmark Utilized N.G.S. Havoline 2 Vertical Dat		aco only, enter meters.	
Indicate elevation datum used for the elevations in items a) through h) below.			
☐NGVD 1929 ☑ NAVD 1988 ☐ Other/Source: Datum used for building elevations must be the same as that used for the BFE		. 12.	
Datum used for building elevations must be the same as that used for the Dr. L.		Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>5 · 7</u>	☐ feet ☐ meters	
b) Top of the next higher floor	<u>8.9</u>	☐ feet ☐ meters	
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N . A</u>	☐ feet ☐ meters	
d) Attached garage (top of slab)	<u>N . A</u>	feet meters	
 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 	9.2	☐ feet ☐ meters	
f) Lowest adjacent (finished) grade next to building (LAG)	<u>5.1</u>		
g) Highest adjacent (finished) grade next to building (HAG)	<u>5.7</u>	☑ feet ☐ meters	
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>5.1</u>	☑ feet ☐ meters	
SECTION D – SURVEYOR, ENGINEER, OR ARCH	ITECT CERTIFIC	ATION	
This certification is to be signed and sealed by a land surveyor, engineer, or archite I certify that the information on this Certificate represents my best efforts to interprestatement may be punishable by fine or imprisonment under 18 U.S. Code, Section	ect authorized by lavet the data available.	w to certify elevation information.	
Were latitude and longitude in Section A provided by a licensed land surveyor?	☑ Yes ☐ No	☐ Check here if attachments.	
Certifier's name License Number			
Alan K. Fish, PSM LS 39 Title	141		
Professional Surveyor & Mapper	L = =! !! ii. ii.		
Company Name	5 - 57 - 1243	Place	
Van Buskirk / Fish & Associates, Inc.	The or A Fat is	Seal	
Address 12450 Tamiami Trail	E 11 = 15	Here	
City State North Port Florida	ZIP Code 34287		
Signature Date	Telephone		
Man () 39 (08/18/17		426-0681	
Copy all pages of this Elevation Certificate and all attachments for (1) community official	اله, (2) insurance ager	nt/company, and (3) building owner.	
Comments (including type of equipment and location, per C2(e), if applicable) Elevation In item C2 e). is the A/C Unit. Item A9. refers to the 10' x 12', (120 Square roof. The Enclosure has two Flow Through Vents totaling 130 Square inches. The his skirting "is not" part of the building foundation system. The home is elevated on pos Certificate is based on the building conditions at time of survey. Any building revision require an updated Elevation Certificate.	nome has Decorative st / piers. Information	e brick skirting on all four sides the provided in this Elevation	
JOB# 16-1421			

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy			FOR INSURANCE COMPANY USE
Building Street Address (including Apt 511 Blackburn Blvd.	., Unit, Suite, and/or Bldg. No.) or	r P.O. Route and Box No.	Policy Number:
City North Port	State Florida	ZIP Code 34287	Company NAIC Number
SECTION E	BUILDING ELEVATION INFO		required)
For Zones AO and A (without BFE), co- complete Sections A, B,and C. For Iter enter meters.	emplete Items E1-E5. If the Certif	ficate is intended to support	a LOMA or LOMR-F request, ement used. In Puerto Rico only,
E1. Provide elevation information for the highest adjacent grade (HAG)	he following and check the appro and the lowest adjacent grade (L	priate boxes to show whether AG).	er the elevation is above or below
a) Top of bottom floor (including l crawlspace, or enclosure) is	basement, <u>N</u> . <u>A</u>	☐ feet ☐ meters	s 🔲 above or 🔝 below the HAG.
b) Top of bottom floor (including I crawlspace, or enclosure) is	pasement, <u>N</u> . <u>A</u>	feet meters	s 🔲 above or 📋 below the LAG.
E2. For Building Diagrams 6–9 with pe	ermanent flood openings provided	d in Section A Items 8 and/or	r 9 (see pages 1–2 of Instructions),
the next higher floor (elevation C2. the diagrams) of the building is	b in <u>N</u> · A	☐ feet ☐ meters	s 🔲 above or 🔲 below the HAG.
E3. Attached garage (top of slab) is	<u>N . A</u>	☐ feet ☐ meters	s above or below the HAG.
E4. Top of platform of machinery and/o servicing the building is	or equipment <u>N</u> . <u>A</u>	☐ feet ☐ meters	above or ☐ below the HAG.
E5. Zone AO only: If no flood depth nu floodplain management ordinance	mber is available, is the top of the ?	e bottom floor elevated in ac	cordance with the community's certify this information in Section G.
SECTION F - P	ROPERTY OWNER (OR OWNE	R'S REPRESENTATIVE) CE	ERTIFICATION
The property owner or owner's authorized community-issued BFE) or Zone AO m Property Owner or Owner's Authorized Address	ust sign here. The statements in	Sections A, B, and E are con	rect to the best of my knowledge. State ZIP Code
A-m d Calaba syle a vin	en a sole i la complé an		Florida
Signature	Date		Telephone
Comments	3.47		cutterpic)
en and an in a maje	THE WINDOW	Sales San Talepo (en la co	e New York to the Market
			Tager and the same
JOB# 16-1421			☐ Check here if attachments.

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.			F	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, S 511 Blackburn Blvd.	uite, and/or Bldg. No.) or I	P.O. Route and Box	No.	Po	olicy Nur	nber:	10 10 10 10 10 10 10 10 10 10 10 10 10 1
City North Port	State Florida	ZIP Code 34287		Co	ompany	NAIC Numb	er
SECTION	ON G - COMMUNITY INF	ORMATION (OPTIC	NAL)	-		w =	
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	community's floodpl applicable item(s) a	ain ma nd sig	anage n belo	ment or ow. Chec	dinance can ck the meas	complete urement
G1. The information in Section C was take engineer, or architect who is authoriz data in the Comments area below.)	en from other documentati ed by law to certify elevati	on that has been sig on information. (Indi	ned a cate th	nd se ne sou	aled by a urce and	a licensed so date of the	urveyor, elevation
G2. A community official completed Sect or Zone AO.	ion E for a building located	I in Zone A (without	a FEN	IA-iss	ued or c	ommunity-is	sued BFE)
G3. The following information (Items G4-	G10) is provided for comm	nunity floodplain mar	agem	ent p	urposes.		
G4. Permit Number	G5. Date Permit Issued		G6.		Certifica pliance/0	ate of Occupancy I	ssued
G7. This permit has been issued for:	☐ New Construction	Substantial Im	prove	ment			
		₹ <u>11</u>	•			1. 4	
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	the building site:] feet		meters	Datum	
G10. Community's design flood elevation:] feet		meters	Datum	
Local Official's Name		Title			2 3 5 5 5 5		
							ne de la
Community Name		Telephone	= 11			=======================================	1 - 1 HE
Signature		Date					- 1
Comments (including type of equipment and loc	cation, per C2(e), if applica	ble)					
							_ = n+*
							7-
JOB# 16-1421						Check here it	attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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

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:

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 511 Blackburn Blvd.

City North Port

ELEVATION CERTIFICATE

State Florida

ZIP Code

34287

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.

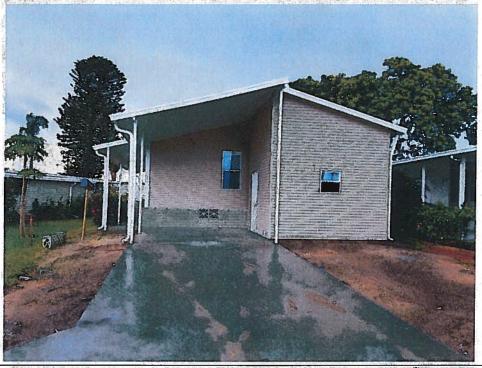


Photo One Caption

Front View

Date Taken 08/18/17

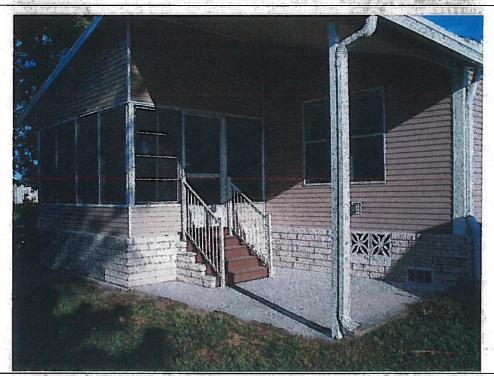


Photo Two Caption

Rear View

Date Taken 08/18/17

JOB# 16-1421

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

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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. 511 Blackburn Blvd.			FOR INSURANCE COMPANY USE		
			Policy Number:		
City North Port	State	ZIP Code 34287	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.

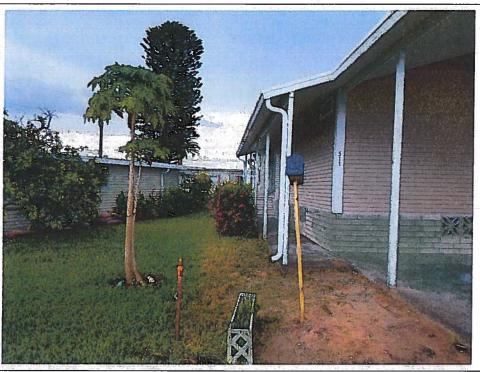


Photo One Caption

Left View

Date Taken 08/18/17



Photo Two Caption

Right View

Date Taken 08/18/17

JOB# 16-1421

BUILDING PHOTOGRAPHS

Continuation Page

Florida

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:

511 Blackburn Blvd. City

North Port

State

ZIP Code

34287

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.

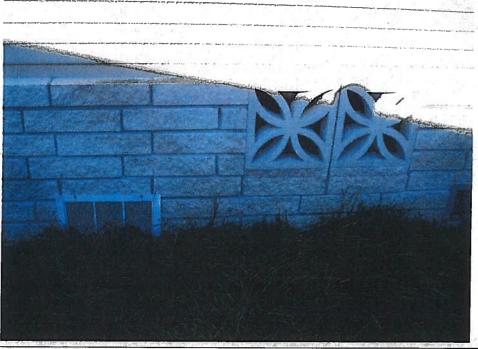


Photo One Caption

Typ. Flow thru vent in brick Brick Skirting surrounding Mobile Home Date Taken 08/18/17



Photo Two Caption

Two 8"x16" Flow Thru vents in Storage Bldg. Walls

Date Taken 08/18/17

JOB# 16-1421

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		11-3 -
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