U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008 Expiration Date: July 31, 2015

SECTION A – PROPERTY INFORMATION			FOR INSURANCE COMPANY USE			
A1. Building Owner's Name Patrick Rogan Finnan & Patricia	Policy Number:					
2. Building Street Address (including Apt., Unit, Suite, and/or 1005 Bogey Lane	Company NAIC Number:					
City Longboat Key	State FL ZIP Code	34228				
Property Description (Lot and Block Numbers, Tax Parcel Lot 13, Block E, Country Club Shores, PID #0010-03-0012	Number, Legal Description, etc.)					
 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u> A5. Latitude/Longitude: Lat. <u>27.345624</u> Long. <u>82.601525</u> 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 <u>1B</u> A8. For a building with a crawlspace or enclosure(s): A9. For a building with an attached garage: a) Square footage of crawlspace or enclosure(s) b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u> c) Total net area of flood openings in A8.b d) Engineered flood openings? □ Yes ⊠ No 						
SECTION B – FLOOI	D INSURANCE RATE MAP (F		N			
B1. NFIP Community Name & Community Number Longboat Key, Town of ,125126	B2. County Name Sarasota		B3. State FL			
B4. Map/Panel Number 125126 0010 B5. Suffix B6. FIRM Index 3/17/2014 5/18/92		B8. Flood Zone(s) A13	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 11'			
B10. Indicate the source of the Base Flood Elevation (BFE) dat						
□ FIS Profile						
B11. Indicate elevation datum used for BFE in Item B9: ☑ NGVD 1929 □ 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: N/A □ CBRS □ OPA □ Yes ☑ No						
SECTION C - BUILDING	G ELEVATION INFORMATION	I (SURVEY REQUIF	(ED)			
 C1. Building elevations are based on: Construction I A new Elevation Certificate will be required when construct Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1 below according to the building diagram specified in Item A 	Drawings* Building Un Ction of the building is complete. 1–V30, V (with BFE), AR, AR/A, AR A7. In Puerto Rico only, enter meter	der Construction* R/AE, AR/A1–A30, AR/ rs.	Finished Construction			
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FEMA Form 086-0-33 (7/12)

See reverse side for continuation.

ANT HALL PRIMA

	by the corresponding information fr		A.	FOR INSURANCE COMPANY US
1005 Bogey Lane	Init, Suite, and/or Bldg. No.) or P.O. Route	and Box No.		Policy Number:
City Iongboat Key	State FL	ZIP Code	34228	Company NAIC Number:
	- SURVEYOR, ENGINEER, OR ARC	NAMES OF TAXABLE PARTY.		
	te for (1) community official, (2) insurance	agent/compa	ny, and (3) build	ing owner.
Comments C2 e: A/C EQUIPMENT ON	10	7-15 te		
SECTION E - BUILDING ELEVA	TION INFORMATION (SURVEY NOT	REQUIRE) FOR ZONE	
	plete Items E1–E5. If the Certificate is inter			
 a) Top of bottom floor (including bas b) Top of bottom floor (including bas b) Top of bottom floor (including bas for Building Diagrams 6–9 with perm (elevation C2.b in the diagrams) of the Attached garage (top of slab) is	ement, crawlspace, or enclosure) is ement, crawlspace, or enclosure) is nanent flood openings provided in Section he building is feet feet feet meters abo equipment servicing the building is aber is available, is the top of the bottom fit	A Items 8 and meters a a ove or be	feet meter feet meter Vor 9 (see pages bove or belo ow the HAG.	above or below the HAG. above or below the LAG. above or below the LAG. above of Instructions), the next higher flow the HAG.
	inclower. The local official must certify this	nformation in	Section G.	
SECTION F -	PROPERTY OWNER (OR OWNER'S epresentative who completes Sections A, s in Sections A, B, and F are correct to the	REPRESE	NTATIVE) CE	RTIFICATION
operty Owner's or Owner's Authorized Re	epresentative's Name City		Stat	e ZIP Code
operty Owner's or Owner's Authorized Re	epresentative's Name		Stat	
operty Owner's or Owner's Authorized Re ress inature	epresentative's Name City		Stat	e ZIP Code
operty Owner's or Owner's Authorized Re ress inature	epresentative's Name City		Stat	
operty Owner's or Owner's Authorized Re ress inature	epresentative's Name City		Stat	phone
operty Owner's or Owner's Authorized Re ress inature mments	City Date SECTION C COMMUNITY WEEK		Stat Tele	phone
operty Owner's or Owner's Authorized Re ress inature mments	City Date SECTION G – COMMUNITY INFOR	MATION (C	Stat Tele	phone
operty Owner's or Owner's Authorized Re ress inature mments ocal official who is authorized by law or ord s Elevation Certificate. Complete the applie	City Date SECTION G – COMMUNITY INFOR dinance to administer the community's flood cable item(s) and sign below. Check the pro-	MATION (C	Stat Tele PTIONAL) ment ordinance of	phone
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ELEVATION CERTIFICATE, page 3

Building Photographs

See Instructions for Item A6.

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. '005 Bogey Lane			FOR INSURANCE COMPANY USE Policy Number:

using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions or 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



REAR VIEW

TOWN OF LONGBOAT KEY Planning, Zoning and Building

MAR 0 6 2019

Form 086-0-33 (7/12)