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 BETTY KEIL	Policy Number:						
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3407 WINDING OAKS DRIVE	Company NAIC Number:						
City LONGBOAT KEY State FL ZIP Code 34228							
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) UNIT 4 WINDING OAKS CONDOMINIUM							
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Latitude/Longitude: Lat. 27 22 37.29 B Long. 82 37 24.28 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 1B A8. For a building with a crawlspace or enclosure(s): 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 c) Total net area of flood openings in A8.b d) Engineered flood openings? Yes No SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Community Name & Community Number B2. County Name NANATEE & SARASOTA	B3. State FL						
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date 1251260010 B5. Suffix B6. FIRM Index Date 5/18/1992 B7. FIRM Panel Effective/Revised Date 8/15/1983 A 13	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)						
FIS Profile FIRM Community Determined Other/Source: 1. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source 1. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source 1. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 1. Designation Date: OPA	☐ Yes ☑ No						
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQU	IRED)						
C1. Building elevations are based on: Construction Drawings* Building Under Construction* *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 Ricc only, enter meters. Benchmark Utilized: GPS READINGS (1000) Vertical Datum: NGVD 1929 VERTCON 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. Check the measurement used.							
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 11.0	⊠ feet						
b) Top of the next higher floor N.A	⊠ feet ☐ meters						
c) Bottom of the lowest hortzontal structural member (V Zones only)	⊠ feet ☐ meters						
d) Attached garage (top of slab) 8.33	☑ feet ☐ meters						
e) Lowest elevation of machinery or equipment servicing the building 11.0 (Describe type of equipment and location in Comments)	☑ feet ☐ meters						
f) Lowest adjacent (finished) grade next to building (LAG) 8.0	☑ feet ☐ meters						
g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 8.0	☐ feet ☐ meters ☐ meters						
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 eleva-							
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. Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by Check here if attachments.	Dom						
Certifier's Name JOHN D. O'NEILL License Number PSM5233	- 5233						
Title LAND SURVEYOR Company Name JOHN D. O'NEILL							
Address P.O. BOX 881 City ONECO State FL ZIP Code 34264							
Signature Date 5/14/2013 Telephone 941-345-5726	-						

IMPORTANT: In these spaces, copy the corresponding information from Section A.					FOR IN	SURANCE COMPANY US
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3407 WINDING OAKS DR					Policy N	lumber:
City LONGBOAT KEY		State FL	ZIP Code 34	4228	Compar	ny NAIC Number:
SI	CTION D - SURVEYOR, ENGINE	ER, OR ARCHI	TECT CERT	TIFICATION (C	ONTINU	JED)
Copy both sides of this Elevat	tion Certificate for (1) community official,	(2) insurance age	ent/company,	and (3) building	owner.	
Comments LOWEST EQUIF	PMENT IS A/C UNIT					
Signature		Date	5/14/2013			
SECTION E - BUILDIN	NG ELEVATION INFORMATION (S	URVEY NOT R	EQUIRED)	FOR ZONE AC	AND Z	ONE A (WITHOUT BEI
and C. For Items E1–E4, use E1. Provide elevation inform grade (HAG) and the logal Top of bottom floor (in b) Top of bottom floor	BFE), complete items E1-E5. If the Ceinatural grade, if available. Check the monation for the following and check the appreciation for the following basement, crawispace, or enck including basement, crawispace, or enck is 9 with permanent flood openings provi	easurement used propriate boxes to sure) is bsure) is Ided in Section A	In Puerto Ri show wheth	co only, enter me er the elevation is feet Interes [feet Interes	sters. s above o ☐ above ☐ above –9 of Instr	or below the highest adjace or below the HAG. or below the LAG. ructions), the next higher fi
(elevation C2,b in the di E3. Attached garage (top of	agrams) of the building is	☐ feet ☐ meters ☐ above	eters 🔲 abo	ove or 🔲 below t	he HAG.	
	inery and/or equipment servicing the bui				bove or [below the HAG
E5. Zone AO only: If no floo	od depth number is available, is the top o	of the bottom floor	elevated in a	accordance with the		
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ELEVATION CERTIFICATE, page 3

Building Photographs

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE		
Building Street Address (Including Apt., Unit, Suite, and/or Bldg. N 3407 WINDING OAKS DR.	Policy Number:		
City LONGBOAT KEY	State FL	ZIP Code 34228	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.

