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ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

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

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SEC	OR INSURANCE COMPANY USE							
A1. Building Owner's Name MERRILL & SHELIA ZINDER	Policy Number.							
A2. Building Street Address (including Apt., Unit, Suite, and/o 3431 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 16 WINDING OAKS CONDOMINIUM								
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Latitude/Longitude: Lat. <u>27 22 39,03 N</u> Long. <u>82 37 20.07 W</u> 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): a) Square footage of crawlspace or enclosure(s): b) Number of permanent flood openings in the crawlspace b) Number of permanent flood openings in the crawlspace c) Total net area of flood openings? c) Total net area of flood openings? c) Total net area of flood openings?								
SECTION B - FLOO	D INSURANCE RATE MAP (F	IRM) INFORMATION						
B1. NFIP Community Name & Community Number LONGBOAT KEY	B2. County Name MANATEE & SARASOTA	1	i3. State L					
B4. Map/Panel Number 1251260010 B5. Suffix B6. FIRM Index 5/18/1992		B8. Flood Zone(s) A 13	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 11					
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 □ NAVD 1988 □ Other/Source: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? □ Yes ⊠ No □ CBRS □ OPA □ PA								
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)								
 C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished 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 Rico only, enter meters. Benchmark Utilized: <u>GPS READINGS (1000)</u> Vertical Datum: <u>NGVD 1929 VERTCON</u> Indicate elevation datum used for the elevations in Items a) through h) below. X NGVD 1929 INAVD 1988 Other/Source: 								
A new Elevation Certificate will be required when construct C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1- below according to the building diagram specified in Item A Benchmark Utilized: <u>GPS READINGS (1000)</u> Indicate elevation datum used for the elevations in Items a)	Drawings ☐ Building Un- tion of the building is complete. –V30, V (with BFE), AR, AR/A, AR 7. In Puerto Rico only, enter meter Vertical Datum: <u>NGVD 1929</u> (through h) below. ⊠ NGVD 1929	der Construction* /AE, AR/A1-A30, AR/AF s. <u>VERTCON</u>	 Finished Construction AR/AO. Complete Items C2.a-h 					
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ELEVATION CERTIFICATE				
IMPORTANT: In these space	s, copy the corresponding informa	tion from Section A		FOR INSURANCE COMPANY USE
Building Street Address (including 3431 WINDING OAKS DR	Apt., Unit, Suite, and/or Bldg. No.) or P.O.	. Route and Box No.		Policy Number:
City LONGBOAT KEY	Stat	e FL ZIP Code 3	4228	Company NAIC Number;
SECTI	ON D - SURVEYOR, ENGINEER, O	R ARCHITECT CER	TIFICATION (C	ONTINUED)
Copy both sides of this Elevation C	ertificate for (1) community official, (2) ins	surance agent/company	and (3) building	owner.
Comments LOWEST EQUIPMEN				
- A				
Signature		Date 5/14/2013		
SECTION E - BUILDING E	LEVATION INFORMATION (SURVE	TY NOT REQUIRED)	FOR ZONE AC	AND ZONE A (WITHOUT BEE)
), complete items E1-E5. If the Certificate			
and C. For Items E1-E4, use nature	ral grade, if available. Check the measure	ment used. In Puerto R	co only, enter me	eters.
grade (HAG) and the lowest	for the following and check the appropria adjacent grade (LAG). ing basement, crawlspace, or enclosure) i			s above or below the highest adjacent
 b) Top of bottom floor (includ E2. For Building Diagrams 6–9 w 	ing basement, crawispace, or enclosure) i ith permanent flood openings provided in	is Items 8 and/	feet i meters or 9 (see pages 8	above or below the LAG.
E3. Attached garage (top of slab)	ns) of the building is [] find the	feet [_] meters [_] abo s [_] above or [_] beio	we or below in the HAG	ine HAG.
E4. Top of platform of machinery	and/or equipment servicing the building is	s [] feet	🗌 meters 🔲 a	bove or 🗌 below the HAG.
E5. Zone AO only: If no flood dep	oth number is available, is the top of the b	ottom floor elevated in a	accordance with t	he community's floodplain manageme
	Unknown. The local official must cer	and the second	and the second	
SECTIO	ON F - PROPERTY OWNER (OR O)	WNER'S REPRESEN	TATIVE) CER	TIFICATION
he property owner or owner's auth	orized representative who completes Sec	tions A B and E for 7c	ne A (without a E	FMA-issued or community-issued BEE
r Zone AO must sign here. The sta	itements in Sections A, B, and E are corre	ect to the best of my kno	wledge.	Entressed of conknamy-issued bire
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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.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bi 3431 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.

