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

ELEVATION CERTIFICATE

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

	important: Re	ad the instructions o	n pages 1–9.	Expira	ation Date. July 31, 2016		
	FOR IN	SURANCE COMPANY USE					
SECTION A - PROPERTY INFORMATION A1. Building Owner's Name MANUELLA NEWELL					Number:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3437 WINDING OAKS DRIVE					ny NAIC Number:		
City LONGBOAT KEY		State FL ZIP C	ode 34228				
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) UNIT 19 WINDING OAKS CONDOMINIUM							
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Latitude/Longitude: Lat. 27 22 41.06 N Long. 82 37 19.46 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 1B 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) Sq ft a) Square footage of attached garage 420 sq ft							
 b) Number of permanent flood opening or enclosure(s) within 1.0 foot abo 	ngs in the crawispace) Number of permanen	t flood op	enings in the attached garage		
or enclosure(s) within 1.0 foot above adjacent grade within 1.0 foot above adjacent grade 0 sq in							
SEC	TION B - FLOOD II	NSURANCE RATE MAP	(FIRM) INFORMATIO	N			
B1. NFIP Community Name & Community LONGBOAT KEY		B2. County Name MANATEE & SARASOTA		B3. Stat	е		
B4. Map/Panel Number B5. Suffix 1251260010	B6. FIRM Index Da 5/18/1992	te B7. FIRM Panel Effective/Revised D 8/15/1983	B8. Flood Zone(s) A 13	B9. E	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 B11. Indicate elevation datum used for BFE	Community Deter		Delign (chire.)				
B12. Is the building located in a Coastal 8a Designation Date:	mer Resources System	CBRS) area of Otherwise			☐ Yes		
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: GPS READINGS (1000) Vertical Datum: NGVD 1929 VERTCON							
Indicate elevation datum used for the el	evations in Items a) thr	ough h) below. M NGVD 19	929 NAVD 1988 C	Other/Sour	rce:		
Datum used for building elevations mus	t be the same as that u	ised for the BFE.	Chec	k the mea	surement used.		
a) Top of bottom floor (including baseme	ent, crawispace, or enc	iosure floor)	11.0		☐ meters		
 b) Top of the next higher floor 			N.A	⊠ feet	meters		
 c) Bottom of the lowest horizontal struct 	ural member (V Zones	only)	N-A		meters		
d) Attached garage (top of slab)			<u>8.33</u>		meters		
 e) Lowest elevation of machinery or equ (Describe type of equipment and local 		illaing	11.0	⊠ feet	meters		
f) Lowest adjacent (finished) grade next	to building (LAG)		<u>8.0</u>		☐ meters		
g) Highest adjacent (finished) grade nex			<u>10.5</u>	✓ feet	meters		
h) Lowest adjacent grade at lowest elevi	ation of deck or stairs, i	including structural support	8.0	⊠ feet	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 elevation 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 of Check here if attachments.		Vere latitude and longitude in censed land surveyor?	n Section A provided by a ☐ Yes ☐ No	a	PSM 5233		
Certifier's Name JOHN D. O'NEILL			ber PSM5233		5233		
Title LAND SURVEYOR	Company Name JO						
Address P.O. BOX 881	City ONECO	State FL	ZIP Code 34264				
Signature	Date 5/14/2013	Telephone 9	941-345-5726				
you	***						

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IMPORTANT: In these spaces, copy the corresponding information from Section A.					NSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3437 WINDING OAKS DR					Number:	
City LONGBOAT KEY State FL ZIP Code 34228					any NAIC Number:	
SECTION	ON D - SURVEYOR, ENGINEER	R, OR ARCHITECT	CERTIFICATIO	N (CONTIN	IUED)	
Copy both sides of this Elevation Co	ertificate for (1) community official, (2) insurance agent/cor	npany, and (3) buil	ding owner.		
Comments LOWEST EQUIPMENT						
Jul 1						
Signature /		Date 5/14/2	013			
SECTION E - BUILDING EL	LEVATION INFORMATION (SUI	RVEY NOT REQUI	RED) FOR ZON	E AO AND	ZONE A (WITHOUT BFE)	
For Zones AO and A (without BFE),	, complete Items E1-E5. If the Certifi	icate is intended to su	pport a LOMA of L	OMR-F regu	est, complete Sections A. B.	
and C. For Items E1-E4, use nature	al grade, if available. Check the mea	surement used. In Pu	erto Rico only, ente	er meters.		
 Provide elevation information grade (HAG) and the lowest a 	for the following and check the appro-	opriate boxes to show	whether the eleva-	tion is above	or below the highest adjacent	
 a) Top of bottom floor (including) 	ng basement, crawlspace, or enclosu	ire) is	☐ feet ☐ me	ters 🗌 abov	ve or Delow the HAG.	
b) Top of bottom floor (including basement, crawlspace, or enclosure) is						
E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is feet meters above or below the HAG.						
E3. Attached garage (top of slab)	is feet I me	eters above or	below the HAG.			
E4. Top of platform of machinery	and/or equipment servicing the buildi	ng is[☐ feet ☐ meters	above of	below the HAG.	
E5. Zone AO only: If no flood dep ordinance? ☐ Yes ☐ No	th number is available, is the top of t Unknown. The local official mus	he bottom floor elevat t certify this information	ed in accordance von in Section G.	with the com	munity's floodplain management	
	N F - PROPERTY OWNER (OF			ERTIFICA	TION	
The property owner or owner's author	orized representative who completes	Sections A, B, and E	for Zone A (withou	rt a FEMA-is	sued or community-issued BFE)	
or zone AO must sign nere. The start Property Owner's or Owner's Author	tements in Sections A, B, and E are	correct to the best of i	ny knowledge.			
	200 Toprosonauro o Harrie				····	
Address		City	S	itate	ZIP Code	
Signature		Date	Т	elephone		
Comments						
					Charleton Your	
	SECTION O COMMI				Check here if attachmen	
ne local official who is authorized by la	SECTION G - COMMU aw or ordinance to administer the com			Ce can comp	late Sections A. R. C (or E) and (
this Elevation Certificate. Complete to	he applicable item(s) and sign below.	Check the measurement	ent used in Items G	8-G10. In P	uerto Rico only, enter meters.	
 The information in Section C is authorized by law to certif 	was taken from other documentation yelevation information. (Indicate the	n that has been signed source and date of the	d and sealed by a	licensed sur	veyor, engineer, or architect who	
	ted Section E for a building located in					
	ems G4-G10) is provided for commu			ininumiky-1990	ed BrE) of Zorie AO.	
34. Permit Number	G5. Date Permit Issued	· · · · · · · · · · · · · · · · · · ·		Campliana	e/Occupancy Issued	
	OU. Date I cirrin 1990ed	G0.	Date Certificate C	Compliano	s/Occupancy issued	
This permit has been Issued for.		Substantial Improvem	ent			
Elevation of as-built lowest floor ((including basement) of the building:		feet meters	Datur	n	
BFE or (in Zone AO) depth of floor	oding at the building site:	□	feet 🔲 meters	8 <u>22</u> 01000	n	
 Community's design flood elevati 	on:		feet meters	Datur	n	
ocal Official's Name		Title				
ommunity Name	***************************************	Telephone	:	•		
ignature		Date				
comments					· · · · · · · · · · · · · · · · · · ·	
					Chack hom if attack	
					Check here if attachments	

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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. No. 3437 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.

