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ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

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

		pages . e.			
SECTION A - PROPERTY INFORMATION			FOR INSURANCE COMPANY USE		
A1. Building Owner's Name NANCY L PARKER, TRUSTEE			Policy Number.		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3459 WINDING OAKS DRIVE			Company NAIC Number:		
City LONGBOAT KEY	State FL ZIP C	ode 34228			
A3. Property Description (Lot and Block Numbers, 7 UNIT 30 WINDING OAKS CONDOMINIUM	ax Parcel Number, Legal Description, etc	c.)			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Latitude/Longitude: Lat. 27 22 44.11 N Long. 82.37 21,42 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 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 in A8.b sq in c) Total net area of flood openings? Yes No Mo					
SECTION B	- FLOOD INSURANCE RATE MAP	(FIRM) INFORMATIO	N		
B1. NFIP Community Name & Community Number LONGBOAT KEY	B2. County Name MANATEE & SARASOTA		B3. State FL		
	RM Index Date 87. FIRM Panel /18/1992 Effective/Revised Date 8/15/1983	ate 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 Designation Date: □ CBRS □ OPA □ Yes ☑ No					
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. ⊠ NGVD 1929 □ NAVD 1988 □ Other/Source:					
		Check	the measurement used.		
 a) Top of bottom floor (including basement, crawls b) Top of the next higher floor c) Bottom of the lowest horizontal structural members d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment se (Describe type of equipment and location in Col 	er (V Zones only) rvicing the building	8.33	☑ feet ☐ meters ☑ feet ☐ meters		
 f) Lowest adjacent (finished) grade next to buildin g) Highest adjacent (finished) grade next to buildin h) Lowest adjacent grade at lowest elevation of de 	g (LAG) g (HAG)	10.5	⊠ feet ☐ meters ⊠ feet ☐ meters ⊠ 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 on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No					
Certifier's Name JOHN D. O'NEILL		ber PSM5233	_ 5630		
Title LAND SURVEYOR / Company Name JOHN D. O'NEILL					
Address P.O. BOX 881		ZIP Code 34264			
Signature Date 5/					
			[]		

	, copy the corresponding information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including A 3459 WINDING OAKS DR	Policy Number:	
City LONGBOAT KEY	State FL ZIP Code 34228	Company NAIC Number:
SECTIC	ON D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFIC	ATION (CONTINUED)
Copy both sides of this Elevation Ce	ertificate for (1) community official, (2) insurance agent/company, and ((3) building owner.
Comments LOWEST EQUIPMENT		
Ð	, ,	
Signature	Date 5/14/2013	
SECTION E - BUILDING EL	EVATION INFORMATION (SURVEY NOT REQUIRED) FOR	ZONE AO AND ZONE A (WITHOUT BEE
For Zones AO and A (without BFE).	complete items E1-E5. If the Certificate is intended to support a LOM	A or LOMP - Frequent complete Sections A. P.
and C. For items E1-E4, use natura	al grade, if available. Check the measurement used. In Puerto Rico on	ly, enter meters.
grade (MAG) and the lowest ac	for the following and check the appropriate boxes to show whether the diacent grade (LAG).	elevation is above or below the highest adjacen
 a) Top of bottom floor (includin 	ng basement, crawlspace, or enclosure) is feet	🗋 meters 🛄 above or 🛄 below the HAG.
D) Top of bottom floor (includin F2 For Building Diagrams & Durity	ng besement, crawlspace, or enclosure) is	meters Dehove or D below the LAC
(elevation 02.0 in the diagrams	th permanent flood openings provided in Section A Items 8 and/or 9 (section A Items 8 and/or 9 (section A Items 1 above or 1) feet 1 meters 1 above or 1) above or 1)	ee pages 8-9 of Instructions), the next higher flo
Attached garage (top of slab) is	is feet meters above or below the l	HAG
 Top or platform of machinery a Zone AO only. If no flood doct 	and/or equipment servicing the building is feet [] m	neters above or below the HAG.
ordinance? Yes No	th number is available, is the top of the bottom floor elevated in accord Unknown. The local official must certify this information in Section	ance with the community's floodplain manageme
	N F - PROPERTY OWNER (OR OWNER'S REPRESENTATI	
		and the second
Zone AO must sign here. The state	prized representative who completes Sections A, B, and E for Zone A (tements in Sections A, B, and E are correct to the best of my knowledge	without a FEMA-issued or community-issued BF
roperty Owner's or Owner's Authorit		<u> </u>
ddress		
	City	State ZIP Code
onanine.	Date	Telephone
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omments local official who is authorized by lan is Elevation Certificate. Complete th The information in Section C	SECTION G – COMMUNITY INFORMATION (OPTIO) w or ordinance to administer the community's floodplain management or applicable item(s) and sign below. Check the measurement used in its was taken from other documentation that has been signed and sealed	NAL) rdinance can complete Sections A, B, C (or E), an ems G8–G10. In Puerto Rico only, enter meters.
omments local official who is authorized by lan is Elevation Certificate. Complete th The information in Section C is authorized by law to certify A community official complete	SECTION G – COMMUNITY INFORMATION (OPTIO) w or ordinance to administer the community's floodplain management or ne applicable item(s) and sign below. Check the measurement used in its was taken from other documentation that has been signed and sealed y elevation information. (Indicate the source and date of the elevation ted Section E for a building located in Zone A (without a FEMA-issued	NAL) rdinance can complete Sections A, B, C (or E), an ams G8–G10. In Puerto Rico only, enter meters. d by a licensed surveyor, engineer, or architect w data in the Comments area below.) or community-issued BFE) or Zone AO.
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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, Sulte, and/or Bldg. No.) or P.O. Route and Box No. 3459 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.

