U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATEImportant: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official. (2) insurance agent/company, and (3) building owner

SEC	TION A - PROPERTY					RANCE COMPANY USE
A1. Building Owner's Name JERALD & RUTH AARON					Policy Nun	nber:
A2. Building Street Address (inc Box No.3560 BAYOU CIRCLE	cluding Apt., Unit, Suite	, and/o	r Bldg. No.) or P.O	. Route and	Company I	NAIC Number:
City LONGBOAT KEY			State Florida	·	ZIP Code 34228	
A3. Property Description (Lot a LOT 8, BLOCK D, BAY ISLES,			Number, Legal De	escription, etc.)		
A4. Building Use (e.g., Residen	itial, Non-Residential, A	ddition,	Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longitude: Lat. 27	7°22'46.11"N L	ong. 82	2°37'45.54"W	Horizontal Datum	: NAD	1927 × NAD 1983
A6. Attach at least 2 photograp	hs of the building if the	Certific	ate is being used to	o obtain flood insura	ince.	
A7. Building Diagram Number	7					
A8. For a building with a crawls	pace or enclosure(s):					
 a) Square footage of crawle 	space or enclosure(s)		312 sq ft			
b) Number of permanent flo	ood openings in the crav	wispace	e or enclosure(s) w	ithin 1.0 foot above	adjacent gr	rade 2
c) Total net area of flood or	penings in A8.b 768	8 s	q in			
d) Engineered flood openin	gs? ☐ Yes ⊠ No)				
A9. For a building with an attach	ned garage:					
a) Square footage of attach	ned garage520	8	sq ft			
b) Number of permanent flo	ood openings in the atta	ched g	arage within 1.0 fo	ot above adjacent g	rade	4
c) Total net area of flood op		04	sq in	,	1	
d) Engineered flood openin	-					
	CTION B - FLOOD IN	SURA	NCE RATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Community Name & C TOWN OFLONGBOAT KEY 121	-		B2. County Name SARASOTA			B3. State Florida
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	Eff	RM Panel fective/ evised Date	B8. Flood Zone(s)	(Zo	se Flood Elevation(s) ne AO, use Base
12115C 0019 F	11/04/2016	11/04/		AE	10	od Depth)
B10. Indicate the source of the B	Base Flood Elevation (B	BFE) da	ta or base flood de	pth entered in Item	B9:	
☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other/Source:						
B11. Indicate elevation datum us	sed for BFE in Item B9:	□ NO	GVD 1929 🗵 NA	VD 1988	er/Source:	
B12. Is the building located in a	Coastal Barrier Resour	ces Sys	stem (CBRS) area	or Otherwise Protec	ted Area (0	DPA)? Yes No
Designation Date:	CI	BRS	☐ OPA			

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Rout 3560 BAYOU CIRCLE	e and Box No.	Policy Number:
City State ZIP C LONGBOAT KEY Florida 3422		Company NAIC Number
SECTION C - BUILDING ELEVATION INFORMAT	ION (SURVEY RI	EQUIRED)
	ing Under Construits is complete. E), AR, AR/A, AR/A, Item A7. In Puert NGVD EE. 5. 8 12. 0 N/A 5. 83 11. 32	Check the measurement used. X Feet meters X feet meters
g) Highest adjacent (finished) grade next to building (HAG)	5. 7	
 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 	5. 0	x feet meters
SECTION D – SURVEYOR, ENGINEER, OR ARC		
This certification is to be signed and sealed by a land surveyor, engineer, or arch I certify that the information on this Certificate represents my best efforts to interp statement may be punishable by fine or imprisonment under 18 U.S. Code, Section Were latitude and longitude in Section A provided by a licensed land surveyor?	ret the data availa on 1001.	☐ Check here if attachments.
Certifier's Name License Number LAWRENCE R WEBER 30899		MED THE
Title PROFESSIONAL SURVEYOR & MAPPER Company Name WEBER ENGINEERING & SURVEYING, INC. Address 4596 ASHTON ROAD		WEBE CATE Plan Plan Here
SARASTOA Florida Signature Date	ZIP Code 34233 Telephone (941) 921-3914	SSIONAL SUR
Copy all pages of this Elevation Certificate and all attachments for (1) community office	270	
Comments (including type of equipment and location, per C2(e), if applicable) C2.e - A/C C2.h - DECK A5 - LAT/LONG FROM FEMA INTERACTIVE MAP A9.c,d - 4 Flood Vent Model 1540-420 rated for coverage of 200 sf each = 800 sf A8c - LOUVER DOORS WITH NO SCREEN NET OPENING OF LOUVERS EQU	COVETAGE	genocompany, and (3) building owner.

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IMPORTANT: In these spaces, copy the correspond	ing information from	Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and			Policy Number:
3560 BAYOU CIRCLE			
		ZIP Code 34228	Company NAIC Number
SECTION E – BUILDING EL			REQUIRED)
	E AO AND ZONE A (
For Zones AO and A (without BFE), complete Items E1 complete Sections A, B,and C. For Items E1–E4, use renter meters.	–E5. If the Certificate in atural grade, if availab	s intended to support a le. Check the measure	a LOMA or LOMR-F request, ement used. In Puerto Rico only,
E1. Provide elevation information for the following and the highest adjacent grade (HAG) and the lowest and the highest adjacent grade (HAG) and the lowest and the highest adjacent grade (HAG) and the lowest and the highest adjacent grade (HAG) and the lowest and the highest adjacent grade (HAG) and the lowest and the highest adjacent grade (HAG) and the lowest and the highest adjacent grade (HAG) and the lowest and the highest adjacent grade (HAG) and the lowest and the highest adjacent grade (HAG) and the lowest grade (HAG) an		boxes to show whether	er the elevation is above or below
 a) Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet _ mete	rs above or below the HAG.
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 		_	rs above or below the LAG.
E2. For Building Diagrams 6–9 with permanent flood of the next higher floor (elevation C2.b in the diagrams) of the building is	penings provided in Se	ection A Items 8 and/or	
E3. Attached garage (top of slab) is			rs above or below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is			rs above or below the HAG.
E5. Zone AO only: If no flood depth number is availabl floodplain management ordinance? Yes	le, is the top of the bott No Unknown.	om floor elevated in ac The local official must	ccordance with the community's certify this information in Section G.
SECTION F - PROPERTY OW	NER (OR OWNER'S R	EPRESENTATIVE) CI	ERTIFICATION
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The community-issued BFE or Zone AO must sign here.	ve who completes Section to the statements in Section	ions A, B, and E for Zons A, B, and E are cor	one A (without a FEMA-issued or rect to the best of my knowledge.
Property Owner or Owner's Authorized Representative	's Name		
Address	City	St	ate ZIP Code
Signature	Date	Te	elephone
Comments			
		R	ECEIVED
			DEC 1 9 2016
			VN OF LONGBOAT KEY ning, Zoning and Building
			☐ Check here if attachments.

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Building Street Address (including Apt., Unit, \$ 3560 BAYOU CIRCLE	Suite, and/or Bldg. No.) or P.O	Route and Box No.	Policy Number:
City LONGBOAT KEY	State Florida	ZIP Code 34228	Company NAIC Number
SECTI	ON G - COMMUNITY INFOR	MATION (OPTIONAL)	<u> </u>
The local official who is authorized by law or of Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, et	n Certificate. Complete the ap		
G1. The information in Section C was tal engineer, or architect who is authoridata in the Comments area below.)	ken from other documentation zed by law to certify elevation	that has been signed a information. (Indicate th	nd sealed by a licensed surveyor, e source and date of the elevation
G2. A community official completed Second Second AO.	tion E for a building located in	Zone A (without a FEM	A-issued or community-issued BFE)
G3. The following information (Items G4	–G10) is provided for commun	ity floodplain managem	ent purposes.
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	☐ New Construction ☐ Subs	tantial Improvement	
G8. Elevation of as-built lowest floor (includin of the building:	ng basement)	feet	meters Datum
G9. BFE or (in Zone AO) depth of flooding at	the building site:	feet	meters Datum
G10. Community's design flood elevation:		feet	meters Datum
Local Official's Name	Title		
Community Name	Tele	phone	
Signature	Date		
Comments (including type of equipment and lo	cation, per C2(e), if applicable)	
		R	ECEIVED
			DEC 1 9 2016
			WN OF LONGBOAT KEY ning, Zoning and Building
			Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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Building Street Address (including Apt., Unit, Suit 3560 BAYOU CIRCLE	Policy Number:		
City	State	ZIP Code	Company NAIC Number
LONGBOAT KEY	Florida	34228	

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.



Photo One

Photo One Caption FRONT VIEW 12/2/16

ELEVATION CERTIFICATE



Photo Two

Photo Two Caption REAR VIEW 12/2/16

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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Building Street Address (including Apt., Unit, Suit 3560 BAYOU CIRCLE	Policy Number:		
City	State	ZIP Code	Company NAIC Number
LONGBOAT KEY	Florida	34228	

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. 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.

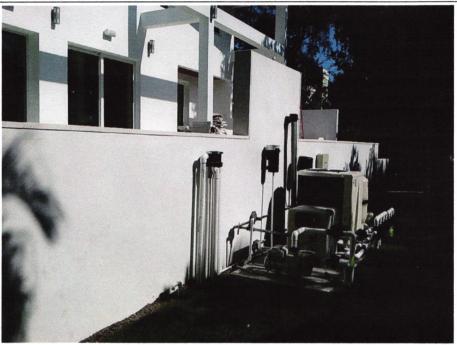


Photo One

Photo One Caption RIGHT SIDE VIEW 12/2/16



Photo Two

Photo Two Caption LEFT SIDE VIEW 12/2/16

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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In Abone annease Abone			
In these spaces, copy the corre	FOR INSURANCE COMPANY USE		
	Policy Number:		
KEY	State Florida	ZIP Code 34228	Company NAIC Number
	et Address (including Apt., Unit, So CIRCLE KEY	CIRCLE	State ZIP Code

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.



Photo One

Photo One Caption VENT 1540-520



Photo Two

Photo Two Caption LOUVERED DOOR ON ENCLOSURE