

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name ROBERT J. LEWIS A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4021 GULF OF MEXICO DRIVE City LONGBOAT KEY State FL ZIP Code 34228	For Insurance Company Use:
	Policy Number
	Company NAIC Number

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
TAX PARCEL NUMBER #0002-05-0003 (SARASOTA COUNTY)

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL

A5. Latitude/Longitude: Lat. 27°23'13" Long. 82°38'26" 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 1

A8. For a building with a crawl space or enclosure(s), provide:
 a) Square footage of crawl space or enclosure(s) _____ sq ft
 b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____
 c) Total net area of flood openings in A8.b _____ sq in

A9. For a building with an attached garage, provide:
 a) Square footage of attached garage 1321 sq ft
 b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade 0
 c) Total net area of flood openings in A9.b 0 sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number TOWN OF LONGBOAT KEY 125126		B2. County Name SARASOTA COUNTY		B3. State FL	
B4. Map/Panel Number 125126-0005	B5. Suffix D	B6. FIRM Index Date 5-18-92	B7. FIRM Panel Effective/Revised Date 5-18-92	B8. Flood Zone(s) A13	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 (Describe) _____

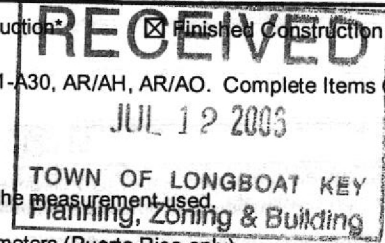
B1. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
 Designation Date _____ CBRS OPA

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-g below according to the building diagram specified in Item A7.
 Benchmark Utilized SEE COMMENTS Vertical Datum NGVD 1929
 Conversion/Comments NO CONVERSION



a) Top of bottom floor (including basement, crawl space, or enclosure floor) 12.0 feet meters (Puerto Rico only)
 b) Top of the next higher floor 23.0 feet meters (Puerto Rico only)
 c) Bottom of the lowest horizontal structural member (V Zones only) 21.0 feet meters (Puerto Rico only)
 d) Attached garage (top of slab) 12.0 feet meters (Puerto Rico only)
 e) Lowest elevation of machinery or equipment servicing the building * 12.0 feet meters (Puerto Rico only)
 (Describe type of equipment in Comments) *** See Comments**
 f) Lowest adjacent (finished) grade (LAG) 10.9 feet meters (Puerto Rico only)
 g) Highest adjacent (finished) grade (HAG) 11.8 feet meters (Puerto Rico only)

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.

Surveyor's Name LEO MILLS, Jr. License Number 3513
 Title PROFESSIONAL SURVEYOR & MAPPER Company Name LEO MILLS & ASSOCIATES, INC.
 Address 620 8TH AVENUE WEST City PALMETTO State FL ZIP Code 34221
 Signature [Signature] Date 6-28-06 Telephone 941-722-2460



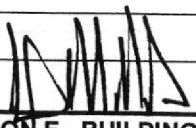
IMPORTANT: In these spaces, copy the corresponding information from Section A.	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4021 GULF OF MEXICO DRIVE	Policy Number
City LONGBOAT KEY State FL ZIP Code 34228	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

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

Comments C2: BENCH MARK USED: TOP OF DEP A-02 BRASS DISK IN WALK - ELEVATION = 10.43 NGVD 1929

C3(e): ELEVATION SHOWN IS FOR A/C SLAB.

Signature  Date 6-28-06 Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
 a) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the HAG.
 b) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the LAG.

E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 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 meters above or below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.

E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. *The statements in Sections A, B, and E are correct to the best of my knowledge.*

Property Owner's or Owner's Authorized Representative's Name _____

Address _____ City _____ State _____ ZIP Code _____

Signature _____ Date _____ Telephone _____

Comments _____

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8. and G9.

G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. The following information (Items G4.-G9.) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
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G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters (PR) Datum _____

G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments _____

Check here if attachments

Building Photographs

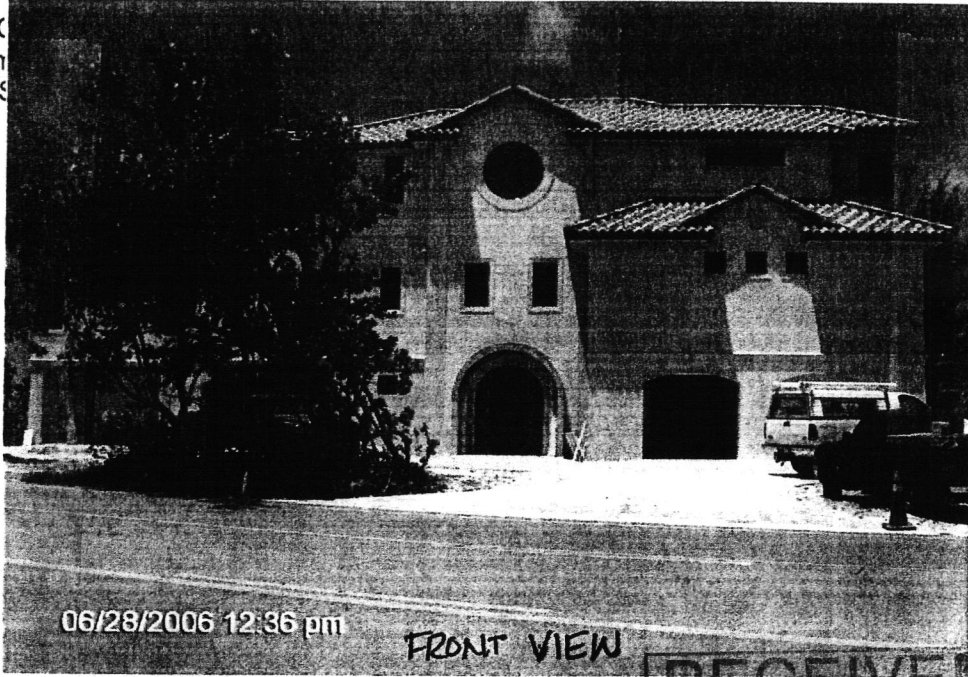
See Instructions for Item A6.

4625

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4021 GULF OF MEXICO DRIVE			For Insurance Company Use: Policy Number
City LONGBOAT KEY	State FL	ZIP Code 34228	Company NAIC Number

If using the Elevation ()
the instructions for Item
"Side View" and "Left S
following.

below according to
, if required, "Right
Continuation Page,



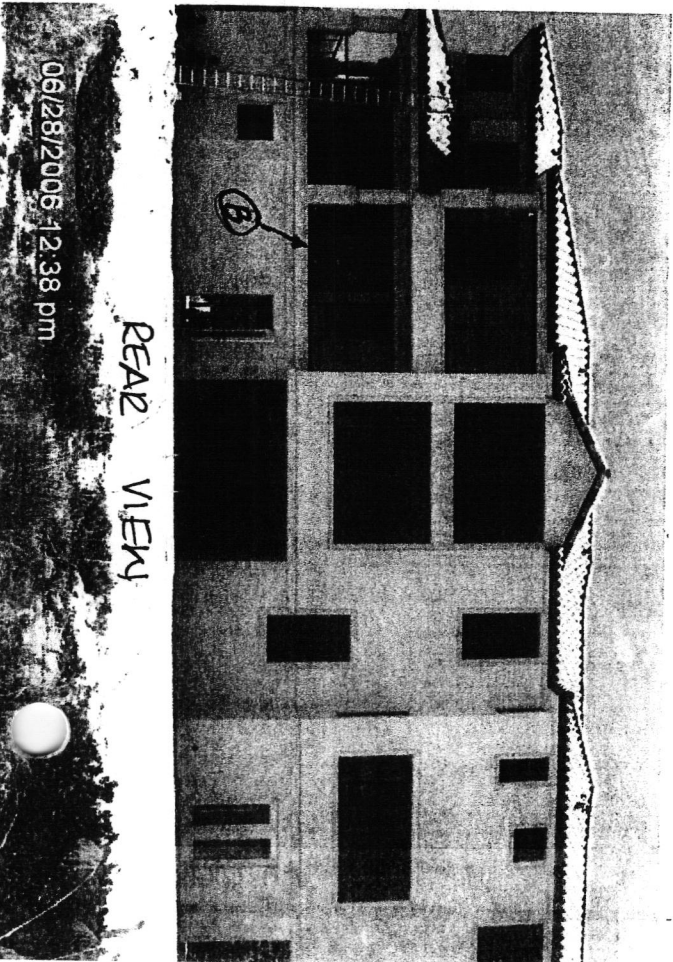
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FRONT VIEW

RECEIVED

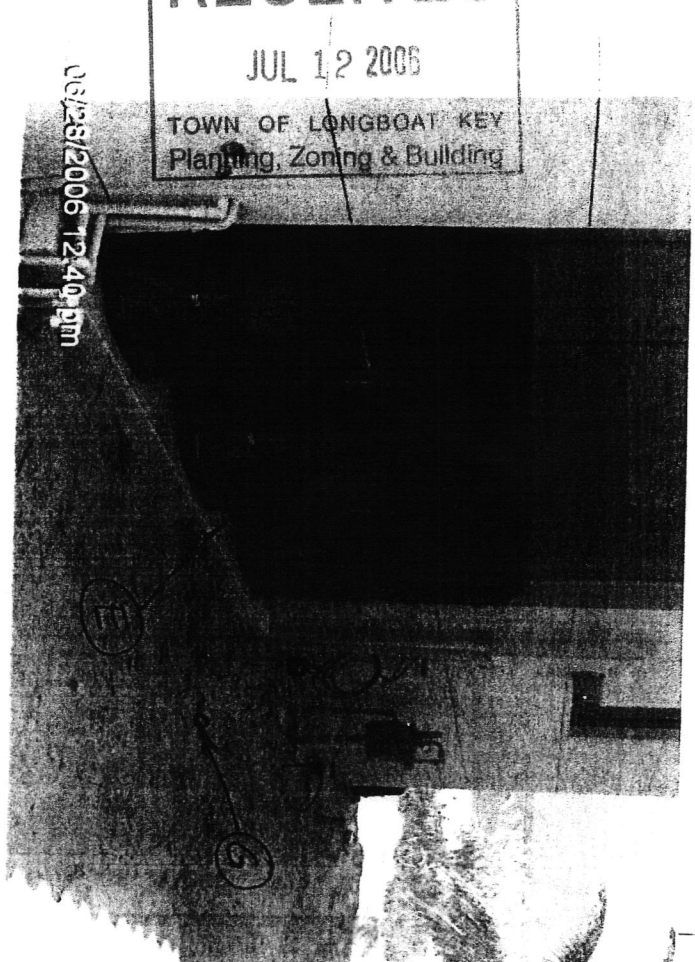
JUL 12 2006

TOWN OF LONGBOAT KEY
Planning, Zoning & Building



06/28/2006 12:38 pm

REAR VIEW



06/28/2006 12:40 pm

FROM : Bill Gray, P.E.

PHONE NO. : 941+383 2613

JUL. 14 2006 10:35PM P4



DE ~~P~~ ~~Zone~~ Building Design and Performance Certificate

For New Construction, Substantial Improvements, and the repair of Substantially Damaged structures in ~~Coastal Special Flood Hazard Area (Zone V)~~ *Seaward of the CCL*

Section 1: Structure Location and Ownership Information

To be completed by a Registered Professional Engineer or Architect

Structure Owner ROBERT LEWIS

Mailing Address 1344 FIFTH AVE

City PITTSBURGH State PA Zip Code 15219

Structure Location 4021 GULF OF MEXICO DRIVE

Latitude _____ Longitude _____
County SARASOTA

Other Legal Description SECTION 6, TWP 36 SOUTH, RANGE 17 EAST

Within City Limits? Y N Coastal Barriers Resource Act (CBRA) Zone Y N

Section 2: Flood Insurance Rate Map (FIRM) Data

NOTE: This Certificate is NOT a substitute for an Elevation Certificate.

Community Name _____ Community ID Number _____ FIRM Panel Number 125126-0005-D
DATED 5/18/92

Panel Suffix _____ FIRM Zone _____ Date of FIRM Panel _____ Date of Index _____

Section 3: Elevation Information

Record elevations to one tenth of a foot.

Elevation of the bottom of the Lowest Horizontal Structural Member.....21.0' feet

Base Flood Elevation (BFE).....11.0' feet

Elevation of Lowest Adjacent Grade (LAG).....10.9' feet

Elevation of Highest Adjacent Grade (HAG).....11.8' feet

Foundation type: Piling Post Pier Column Fill Shear Wall Enclosed Wall

Foundation Description: PRESTRESSED DRIVEN CONCRETE PILES

FROM : Bill Gray, P.E.

PHONE NO. : 941+383 2613

JUL. 14 2006 10:36PM P5

Elevation at Bottom of Foundation -10.0' feet
 Approximate depth of scour/erosion used for foundation design..... 1.8' feet
 Embedment depth of pilings or foundation below LAG..... 20.9' feet
 Datum used: NGVD 29 NAVD 88 Other _____
 Date of Construction / / Improvement/Repair (to existing Bldg) New Building

DEP

Section 4: ~~DEP~~ Certifying Statement

I certify that I have developed or reviewed the structural design, plans, and specifications for construction and that the proposed design and methods of construction are in accordance with accepted standards of practice for meeting the following provisions:
 The bottom of the lowest horizontal structural member of the lowest floor (including piles and columns) is elevated to above the BFE; and
 The pile or column foundation and structure attached thereto are anchored to resist floatation, collapse, lateral movement, or other structural damage from the effects of wind and water loads acting simultaneously on all structure components. Water loading values used are those associated with the base flood. Wind loading values used are those required by the applicable state or local building code. The potential for scour and erosion at the foundation has been anticipated for conditions associated with the base flood, including wave action.

Section 5: Breakaway Wall Certifying Statement

I certify that I have developed or reviewed the structural design, plans, and specifications for construction and that the proposed design and methods of construction are in accordance with accepted standards of practice for meeting the following provisions:
 Breakaway walls shall collapse from a water load no more than that which would occur during the base flood;
 The elevated portion of the building and supporting foundation system shall not be subject to collapse, displacement, or other structural damage due to the effects of wind and water loads acting simultaneously on all structure components; and
 The space below the lowest floor is designed to be used solely for parking of vehicles, building access, and/or storage.

Section 6: Certification

Check one: Section 4 Section 5 Section 4 & 5

Name (please print) Bill M. Gray
 Title P.E. License number FL 46172
 Phone Number (941) 383-2613 EMAIL N/A
 Representing Bill M. Gray, P.E.
 Address 542 Ranger Lane
 City Longboat Key State FL Zip Code 34228

