## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires July 31, 2002

## **ELEVATION CERTIFICATE** Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: BUILDING OWNER'S NAME Policy Number MARALEX, INC. BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 510 HARBOR POINT DRIVE ROOM STATE ZIP CODE LONGBOAT KEY FLORIDA 34228 PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 53, BAY ISLES, UNIT 1, PLAT BOOK 23, PAGES 35-35B, PUBLIC RECORDS OF SARASÓTA COUNTY, FLORIDA BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL LATITUDE/LONGITUDE (OPTIONAL) SOURCE: GPS (Type): HORIZONTAL DATUM: ( ##° - ##' - ##.##" or ##.####") □ NAD 1927 □ NAD 1983 USGS Quad Map Other: SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME B3 STATE** TOWN OF LONGBOAT KEY - 125126 SARASOTA **FLORIDA** B4. MAP AND PANEL **B5. SUFFIX** B7. FIRM PANEL B9. BASE FLOOD ELEVATION(S) NUMBER **B6. FIRM INDEX DATE** EFFECTIVE/REVISED DATE B8. FLOOD ZONE(S) (Zone AO, use depth of flooding) 125126-0010 В 05/18/92 08/15/83 A13 +11' & +12" B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. Community Determined Other (Describe): B11, Indicate the elevation datum used for the BFE in 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 SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: Construction Drawings\* ☐ Building Under Construction\* \*A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) C3. 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 C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion. Datum NGVD 1929 Conversion/Comments N/A Elevation reference mark used COBM Does the elevation reference mark used appear on the FIRM? Yes No o a) Top of bottom floor (including basement or enclosure) 12. 42 ft (m) Seal o b) Top of next higher floor N. Aft(m) sed o c) Bottom of lowest horizontal structural member (V zones only) N. Aft(m) o d) Attached garage (top of slab) 9. 26 ft.(m) o e) Lowest elevation of machinery and/or equipment Signature, Number servicing the building (Describe in a Comments area) 12.36 ft (m) o f) Lowest adjacent (finished) grade (LAG) 5.9ft(m) o g) Highest adjacent (finished) grade (HAG) 9. 0ft.(m) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 20 o i) Total area of all permanent openings (flood vents) in C3.h 576 sq. in. (sq. cm) LS 2915 . 06/03/02 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 in Sections A, B, and C on this certificate represents my best efforts to interpret the data available. SAME YOUR TAN I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. CERTIFIER'S NAME: CALVIN J. REED LICENSE NUMBER: LS 2915 TITLE: PROFESSIONALLAND SURVEYOR COMPANY NAME: CALVIN REED SURVEYING, INC. ADDRES CITY: SARASOTA STATE: FLORIDA ZIP CODE: 34234 SIGNA DATE: June 03, 2002 TELEPHONE: 941-351-2317

IMPORTANT: In these spaces, copy the corresponding information from Section A.			For I	nsurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit	, Suite, and/or Bidg. No.) OR P.O. ROUTE AND BOX NO	S	Polic	y Number
510 HARBOR POINT DRIVE	STATE	ZIPCC	ODE Com	pany NAIC Number
LONGBOAT KEY	FLORIDA			
	TION D - SURVEYOR, ENGINEER, OR ARCHITE		TINUED)	
	r (1) community official, (2) insurance agent/compar	ıy, and (3) building owner.		346
COMMENTS THIS PROPERTY LIES IN FEMA ZONE A13 WITH	TWO (2) BFE'S (A13, BFE +11' & A13, BFE +12') AS SH	IOWN ON SURVEY DONE BY C	CALVIN REED SURVEY	ING, INC. ORIGINALLY
DATED JUNE 24, 1999. FOR INFORMATION ONL	Y THE ELEVATION OF THE POOL EQUIPMENT SERV	CING THE POOL AREA IS +7.5	54'. IN SECTION C, TH	E LOWEST ELEV. OF
MACH/EQUIP. IS A/C UNIT SERVICING THE BUI	LDING.		1	Asserting and the second
	-			Check here if attachments
	ELEVATION INFORMATION (SURVEY NOT RE tele Items E1 through E4. If the Elevation Certificate			
natural grade, if available).  3. For Building Diagrams 6-8 with openings (some second conference of the second conferenc	nent or enclosure) of the building isft.(m)in.i ee page 7), the next higher floor or elevated floor (e	levation b) of the building is in accordance with the comm	ft.(m)in.(cm) ab nunity's floodplain man	ove the highest adjacent nagement ordinance?
issued BFE) or Zone AO must sign here. The	e statements in Sections A, B, C, and E are correct	to the best of my knowledge.		
PROPERTY OWNER'S OR OWNER'S AUTHORI			OTATE	710,000
ADDRESS	СП		STATE	ZIP CODE
SIGNATURE	DA	ſΕ	TELEPHONE	Water and the second
COMMENTS				a property
			П	Check here if attachmen
2	SECTION G - COMMUNITY INFORM	IATION (OPTIONAL)		Lucia de Astron
Certificate. Complete the applicable item(s) an G1. The information in Section C was taken state or local law to certify elevation in G2. A community official completed Section	dinance to administer the community's floodplain m d sign below. n from other documentation that has been signed a formation. (Indicate the source and date of the elev n E for a building located in Zone A (without a FEM 9) is provided for community floodplain manageme	nd embossed by a licensed station data in the Comments a A-issued or community-issued	urveyor, engineer, or area below.)	
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFIC	CATE OF COMPLIANCE	E/OCCUPANCY ISSUED
G7. This permit has been issued for: New G8. Elevation of as-built lowest floor (including G9. BFE or (in Zone AO) depth of flooding at the	basement) of the building is:		ft.(m) _ft.(m)	Datum: Datum:
LOCAL OFFICIAL'S NAME	1	TITLE		
COMMUNITY NAME		TELEPHONE		
SIGNATURE		DATE		
COMMENTS				
				Check here if attachmen