PSEMIT # 17140

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

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

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION	For Insurance Company Use:			
LDING OWNER'S NAME	Policy Number			
RICHARD & SYLVIA GILLIAM BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 560 HORNBLOWER LANE	Company NAIC Number			
CITY STATE ZIP CODE				
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	758			
LOT 3, BLOCK E, COUNTRY CLUB SHORES, UNIT 3, SECTION 2				
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary. RESIDENTIAL				
	Quad Map Other:			
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION				
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER TOWN OF LONGBOAT KEY 125126 B2. COUNTY NAME SARASOTA	B3. STATE FLORIDA			
B4. MAP AND PANEL NUMBER 0010 B5. SUFFIX DATE B B6. FIRM INDEX DATE 05/18/92 B7. FIRM PANEL EFFECTIVE/REVISED DATE 08/15/83 B8. FLOOI ZONE(S) A13				
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. ☐ FIS Profile ☐ FIRM ☐ 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 REQ	UIRED)			
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. 3uilding Diagram Number (Select the building diagram most similar to the building for which this or 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/AE, AR (Complete Items C3a-i below according to the building diagram specified in Item C2. State the dature the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field muscalculation. Use the space provided or the Comments area of Section D or Section G, as appropriate Datum NGVD Conversion/Comments — Elevation reference mark used PS Does the elevation reference mark used appear on the FIRM? o a) Top of bottom floor (including basement or enclosure) o b) Top of next higher floor o c) Bottom of lowest horizontal structural member (V zones only) o d) Attached garage (top of slab) o e) Lowest elevation of machinery and/or equipment servicing the building of) Lowest adjacent grade (LAG) of) Lowest adjacent grade (LAG) of) Highest adjacent grade (HAG) of) No. of permanent openings (flood vents) within 1 ft. above adjacent grade (DAC) of) Total area of all permanent openings (flood vents) in C3hsq. in. (sq. cm) PAD SQ. / M.	R/A1-A30, AR/AH, AR/AO m used. If the datum is different from easurements and datum conversion ate, to document the datum conversion.			
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICA				
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law I certify that the information in Sections A, B, and C on this certificate represents my best efforts to intellige	Section 1001.			
ORESS 7123 PROCTOR ROAD SIGNATURE CITY SARASOTA FL DATE TELEI				

	ne corresponding information from Section		For Insurance Company Use:
	t., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AN	ND BOX NO.	Policy Number
560 HORNBLOWER CITY LONGBOAT KEY	STATE FL	ZIP CODE	Company NAIC Number
	JRVEYOR, ENGINEER, OR ARCHITECT CER	RTIFICATION (CON	TINUED)
Copy both sides of this Elevation Certification	ate for (1) community official, (2) insurance ago RANCE RATE MAP (FIRM) INFORMATION TO BE	ent/company, and (3) building owner.
			3
			☐ Check here if attachmen
	N INFORMATION (SURVEY NOT REQUIRED	Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner,	
 information for a LOMA or LOMR-F, Section E1. Building Diagram Number(Select the pages 6 and 7. If no diagram accurated E2. The top of the bottom floor (including the highest adjacent grade. E3. For Building Diagrams 6-8 with opening ft.(m)in.(cm) above the highest 	ne building diagram most similar to the building ely represents the building, provide a sketch or basement or enclosure) of the building isfings (see page 7), the next higher floor or elevant	g for which this certion photograph.) ft.(m)in.(cm) ated floor (elevation	ficate is being completed – see above or below (check one) b) of the building is
	Yes No Unknown. The local official		
SECTION F - PF	ROPERTY OWNER (OR OWNER'S REPRESE	ENTATIVE) CERTII	FICATION
The property owner or owner's authorized community-issued BFE) or Zone AO must	d representative who completes Sections A, B st sign here.	, and E for Zone A	(without a FEMA-issued or
PROPERTY OWNER'S OR OWNER'S AUTH	ORIZED REPRESENTATIVE'S NAME		
PRESS	CITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPH	IONE
COMMENTS			
	SECTION C. COMMUNITY INFORMATION	(ODTIONAL)	Check here if attachmen
	SECTION G - COMMUNITY INFORMATION (or ordinance to administer the community's flo		
Sections A, B, C (or E), and G of this Eleving G1. The information in Section C was the engineer, or architect who is authorited elevation data in the Comments at G2. A community official completed Se Zone AO.	ation Certificate. Complete the applicable item aken from other documentation that has been orized by state or local law to certify elevation in	n(s) and sign below signed and embose information. (Indicatut a FEMA-issued of	sed by a licensed surveyor, te the source and date of the or community-issued BFE) or
G4. PERMIT NUMBER G5. (DATE PERMIT ISSUED G6. DA		F COMPLIANCE/OCCUPANCY
G7. This permit has been issued for: ☐ G8. Elevation of as-built lowest floor (inclu	New Construction Substantial Improvement ding basement) of the building is:	ft.(m)	Datum:
G9. BFE or (in Zone AO) depth of flooding		ft.(m)	Datum:
LOCAL OFFICIAL'S NAME	TITLE		Datum:
LOCAL OFFICIAL'S NAME COMMUNITY NAME	TITLE TELEPHONE		Datum:
LOCAL OFFICIAL'S NAME COMMUNITY NAME SIGNATURE	TITLE		Datum:
LOCAL OFFICIAL'S NAME COMMUNITY NAME	TITLE TELEPHONE		Datum:
LOCAL OFFICIAL'S NAME COMMUNITY NAME SIGNATURE	TITLE TELEPHONE		Datum:
LOCAL OFFICIAL'S NAME COMMUNITY NAME SIGNATURE	TITLE TELEPHONE		Check here if attachment