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

OMB No. 1660-0008
Expiration Date: November

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: 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.

SE(TION A - PROPERTY	INFOR	MATION		FOR INSUF	RANCE COMPANY USE
A1. Building Owner's Name Policy Number: MASON MARTIN LLC						ber:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 580 BROADWAY ST [MAIN HOUSE] Company NAIC Number:						AIC Number:
City			State		ZIP Code	
LONGBOAT KEY			Florida		34228	
A3. Property Description (Lot LOT 3, LANDWIRTH 2016 SU		x Parcel	Number, Le	gal Description, et	c.)	
A4. Building Use (e.g., Reside	ntial, Non-Residential,	Addition,	Accessory,	etc.) RESIDEN	TIAL	
A5. Latitude/Longitude: Lat.	27.436328	Long8	2.683781	Horizonta	I Datum:	1927 X NAD 1983
A6. Attach at least 2 photogra	phs of the building if the	e Certific	ate is being ເ	used to obtain floo	d insurance.	
A7. Building Di ag ram Number	1B			— //⊞		
A8. For a building with a craw	space or enclosure(s):					
a) Square footage of crav	vlspace or enclosure(s)	****		N/A sq ft		
b) Number of permanent f	lood openings in the cra	awlspace	e or enclosur	e(s) within 1.0 foo	above adjacent gra	ade <u>N/A</u>
c) Total net area of flood	penings in A8.b		N/A sq ir	}		
d) Engineered flood open	ings? 🗌 Yes 🕱 N	10				
A9. For a building with an attac	ched garage:					
a) Square footage of attac	hed garage		N/A sq ft			
b) Number of permanent t	lood openings in the att	tached g	arage within	1.0 foot above adj	acent grade N/A	
c) Total net area of flood	penings in A9.b		N/A sq	in		
d) Engineered flood open	ngs?	lo				
· · ·						
	ECTION B - FLOOD I	NSURA		· · · · · · · · · · · · · · · · · · ·	ORMATION	DO 01-1-
B1. NFIP Community Name & LONGBOAT KEY-125126	Community Number		B2. County MANATEE			B3. State Florida
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	levation(s) e Base Flood Depth)
12115C-0291 E	03-17-2014	03-17-2		AE	9 FEET	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:						
☐ FIS Profile 区 FIRM	☐ FIS Profile 区 FIRM ☐ Community Determined ☐ Other/Source:					
B11. Indicate elevation datum	used for BFE in Item B	9: 🔲 N	GVD 1929		Other/Source:	<u></u>
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🔲 Yes 🗵 No						
Designation Date:		CBRS	☐ OPA			

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

IMPORTANT: In these spaces, copy the corresponding in	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or E 580 BROADWAY ST [MAIN HOUSE]	Policy Number:		
City LONGBOAT KEY Florid		Code 28	Company NAIC Number
SECTION C - BUILDING ELE	VATION INFORMAT	ION (SURVEY RE	EQUIRED)
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when cor C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), V Complete Items C2.a–h below according to the building Benchmark Utilized: "13-84-13B" Indicate elevation datum used for the elevations in ite NGVD 1929 NAVD 1988 Other/Sc Datum used for building elevations must be the same a) Top of bottom floor (including basement, crawlspand) b) Top of the next higher floor c) Bottom of the lowest horizontal structural member d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment serving (Describe type of equipment and location in Common f) Lowest adjacent (finished) grade next to building (g) Highest adjacent (finished) grade next to building (g)	Drawings*	ding Under Construction of is complete. FE), AR, AR/A, AR/ In Item A7. In Puerto NVGD 29 W. FE.	ction* Finished Construction AE, AR/A1-A30, AR/AH, AR/AO.
h) Lowest adjacent grade at lowest elevation of deck structural support	or stairs, including		4.70 ⋉ feet ☐ meters
SECTION D – SURVEYOR, I	ENGINEER, OR ARC	CHITECT CERTIF	ICATION
This certification is to be signed and sealed by a land surve of the information on this Certificate represents in statement may be punishable by fine or imprisonment under the latitude and longitude in Section A provided by a lice	eyor, engineer, or arc ny best efforts to inter ler 18 U.S. Code, Sec	hitect authorized by pret the data availation 1001.	v law to certify elevation information.
Certifier's Name LELAND E. BEDWELL Title REGISTERED SURVEYOR	License Number PSM 5884		A GEF TROM M
Company Name LELAND E. BEDWELL SURVEYING, INC. Address 3423 55TH DRIVE EAST City BRADENTON	State Florida	ZIP Code 34203	Digitally signed by leland e bedwell DN: C=US, o=IdenTrust ACES Business Representative, ou=LELAND E BEDWELL SURVEYING INC., cn=Ieland'e bedwell, 0.9.2342.19200300.100.13=A01097C0000 015CEABA08D400000E77 Date: 2018.01.02 12:49:06-05'00'
Signature Digitally signed by leland e bedwell Digitally signed by l	Date 12-07-2017	Telephone (941) 753-9994	Ext. NA
Copy all pages of this Elevation Certificate and all attachmen	its for (1) community o	fficial, (2) insurance	agent/company, and (3) building owner.
Comments (including type of equipment and location, per LATITUDE LONGITUDE WAS PROVIDED BY GOOGLE NOTE; (ASBUILT PEAK ELEVATION= 38.3'), EQUIPMENT SERVICING THE BUILDING BEING A ELE	EARTH ADDRESS LO		OS

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

Building Street Address (including Apt., Unit, Suite, and/o	IMPORTANT: In these spaces, copy the corresponding information from Section A.					
580 BROADWAY ST [MAIN HOUSE]	or Bldg. No.) or P.O. Rou	ite and Box No.	Policy Number:			
	ate ZIP orida 3422	Code 28	Company NAIC Number			
SECTION E – BUILDING ELE FOR ZONE	VATION INFORMATIO AO AND ZONE A (WIT		REQUIRED)			
For Zones AO and A (without BFE), complete Items E1–complete Sections A, B,and C. For Items E1–E4, use na enter meters.	tural grade, if available.	Check the measure	ment used. In Puerto Rico only,			
E1. Provide elevation information for the following and countries the highest adjacent grade (HAG) and the lowest adjacent floor (including basement	heck the appropriate boy ljacent grade (LAG).	kes to show whethe	r the elevation is above or below			
 a) Top of bottom floor (including basement, crawlspace, or enclosure) is 	N/A	feet meter	s above or below the HAG.			
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 	N/A	☐ feet ☐ meter	s above or below the LAG.			
E2. For Building Diagrams 6–9 with permanent flood op	enings provided in Section	on A Items 8 and/or	9 (see pages 1–2 of Instructions),			
the next higher floor (elevation C2.b in the diagrams) of the building is	N/A	☐ feet ☐ meter	s above or below the HAG.			
E3. Attached garage (top of slab) is	N/A	feet meter	s above or below the HAG.			
E4. Top of platform of machinery and/or equipment servicing the building is	N/A	☐ feet ☐ meter	s above or below the HAG.			
E5. Zone AO only: If no flood depth number is available floodplain management ordinance?	, is the top of the bottom No Unknown. The	floor elevated in ac local official must	cordance with the community's certify this information in Section G.			
SECTION F - PROPERTY OWN	ER (OR OWNER'S REP	RESENTATIVE) CE	ERTIFICATION			
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	who completes Section	s A. B. and E for Zo	ne A (without a FEMA-issued or			
Property Owner or Owner's Authorized Representative's N/A	Name					
Address	City	St	ate ZIP Code			
N/A	N/A		N/A			
	Date	Τε				
N/A		Τε	N/A			
N/A Signature		Τ́ε	N/A			
N/A Signature		Te	N/A			
N/A Signature		Te	N/A			
N/A Signature		Te	N/A			
N/A Signature		Te	N/A			
N/A Signature		Te	N/A			
N/A Signature		Te	N/A			
N/A Signature		Te	N/A			
N/A Signature		Te	N/A			
N/A Signature		Te	N/A			
N/A Signature Comments		Te	N/A			

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

IMPORTANT: In these spaces, copy the corre	sponding information from Se	ection A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Su 580 BROADWAY ST [MAIN HOUSE]	ite, and/or Bldg. No.) or P.O. Ro	oute and Box No.	Policy Number:
City	State ZIF	² Code	Company NAIC Number
LONGBOAT KEY		228	
SECTIO	N G – COMMUNITY INFORMA	TION (OPTIONAL)	
The local official who is authorized by law or ord Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, ent	Certificate. Complete the application		
G1. The information in Section C was take engineer, or architect who is authorized data in the Comments area below.)	ed by law to certify elevation info	ormation. (Indicate th	e source and date of the elevation
G2. A community official completed Section or Zone AO.	on E for a building located in Zor	ne A (without a FEM	A-issued or community-issued BFE)
G3. The following information (Items G4–6	G10) is provided for community	floodplain managem	ent purposes.
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued
	· · · · · · · · · · · · · · · · · · ·		
	New Construction [] Substan	tial Improvement	
G8. Elevation of as-built lowest floor (including of the building:	basement)	feet	meters Datum
G9. BFE or (in Zone AO) depth of flooding at the	he building site:	feet	meters Datum
G10. Community's design flood elevation:		feet	meters Datum
Local Official's Name	Title		
Community Name	Telepho	one	
Signature	Date		
Comments (including type of equipment and loc	ation ner C2(e) if applicable)	**************************************	
Commente (mondanty type of equipment and loc	Landing por Calon, in applicable)		
			Check here if attachments.

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt 580 BROADWAY ST [MAIN HOUSE]	o. Policy Number:		
City LONGBOAT KEY	State Florida	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.



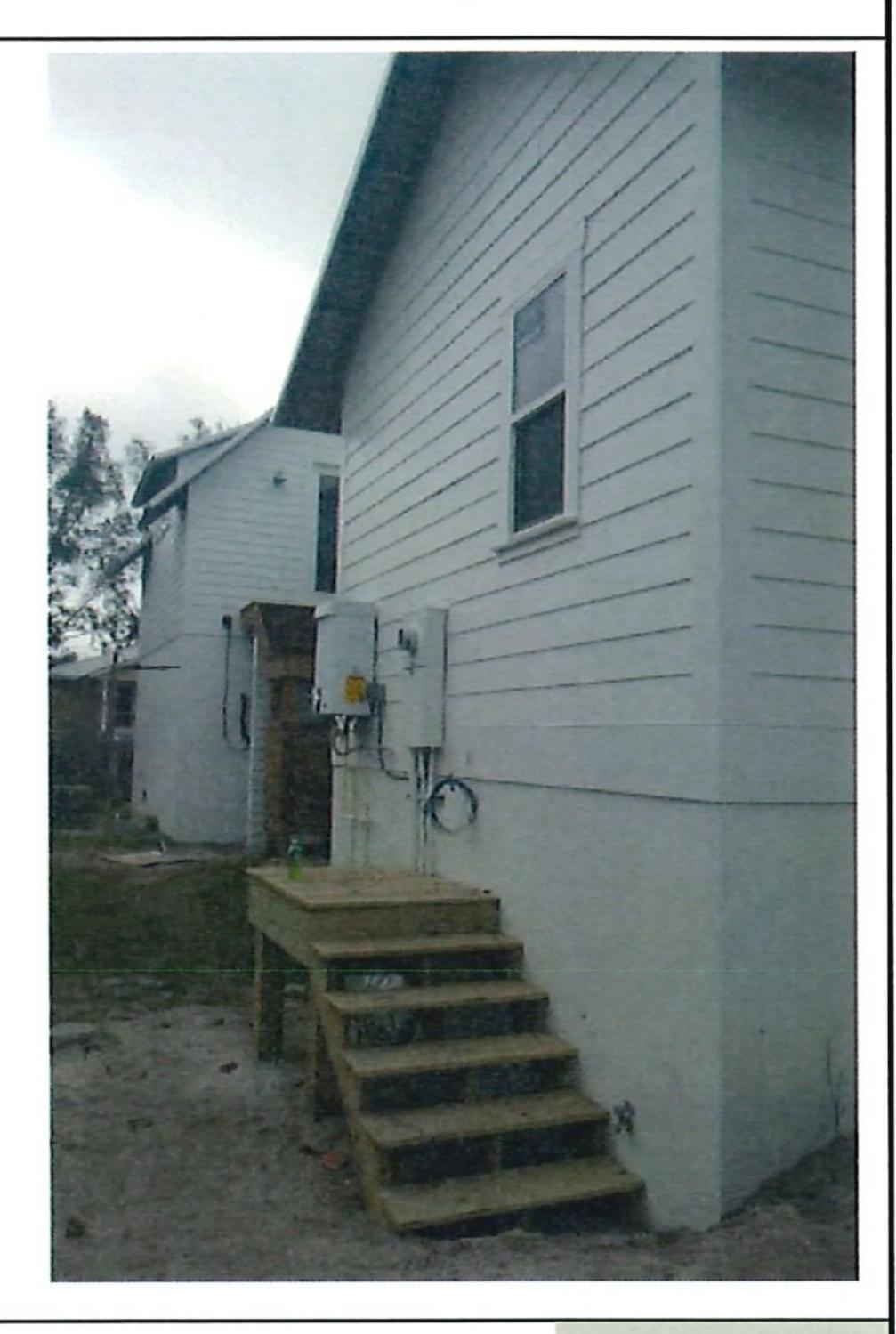


Photo One

Photo One Caption







Photo Two Caption

Clear Photo Two

Form Page 5 of 6

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the correspon			FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, ar 580 BROADWAY ST [MAIN HOUSE]			Policy Number:		
City	State	ZIP Code	Company NAIC Number		
LONGBOAT KEY	Florida	34228	The state of the s		
	. :VIIUU	<u> </u>			
If submitting more photographs than will fit on the with: date taken; "Front View" and "Rear View"; photographs must show the foundation with represe	; and, if required	d, "Right Side View" and "	"Left Side View." When applicable,		
- Who makes -	Photo 1	fhree	_ 		
	Photo Th	hree			
Photo Three Caption			Clear Photo Three		
	Photo	Four			
		~our			
Dhata Care Oanti-	Photo F	1 UUI			
Photo Four Caption			Clear Photo Four		

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

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

ELEVATION CERTIFICATE

Important: 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.

	SECT	ION A - PROPERTY	INFOR	MATION		FOR INSUF	RANCE COMPANY USE
A1. Building Owner's Name MASON MARTIN LLC						ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 580 BROADWAY ST [GUEST HOUSE] Company NAIC Number:						AIC Number:	
City LONGBOAT K	CEV			State Florida		ZIP Code 34228	
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)						
LOT 3, LANDWIR	• •		i/ i di coi	1 (OIIIIO)	, a, b o o o i i p a, o i i , o a		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL [GUEST HOUSE]							
A5. Latitude/Long	itude: Lat. 2	7.436328	Long8	2.683781	Horizonta	I Datum:	927 X NAD 1983
A6. Attach at leas	t 2 photograp	ns of the building if the	e Certific	ate is being ι	sed to obtain floo	d insurance.	
A7. Building Diagr	am N u mber	7				<u></u>	
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square for	otage of crawls	space or enclosure(s)	±1111111111111111111111111111111111111	· · · · · · · · · · · · · · · · · · ·	414.00 sq ft		
b) Number of	permanent flo	od openings in the cra	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ade 3
c) Total net a	rea of flood op	enings in A8.b	<u> v.</u>	600.00 sq in			
d) Engineere	d flood openin	gs? 🔀 Yes 🗌 N	10				
A9. For a building	with an attach	ed garage:					
a) Square foo	tage of attach	ed garage		N/A sq ft			
b) Number of	permanent flo	od openings in the at	tached g	arage within	1.0 foot above adj	acent grade N/A	<u> </u>
c) Total net a	rea of flood op	enings in A9.b		N/A sq	in		
d) Engineered	d flood openin	gs?	10				
	SE	CTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM) INF	ORMATION	
B1. NFIP Commu	•	ommunity Number		B2. County MANATEE	Name		B3. State Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	levation(s) e Base Flood Depth)
12115C-0291	E	03-17-2014	03-17-2		AE	9 FEET	
		Base Flood Elevation Community Deter				l in Item B9:	
B11. Indicate ele	vation datum ı	used for BFE in Item E	39: 🔲 N	IGVD 1929		Other/Source:	
B12. Is the buildi	ng located in a	a Coastal Barrier Reso	ources S	ystem (CBRS	S) area or Otherwi	se Protected Area (OPA)? ☐ Yes ⊠ No
Designation	Date:		CBRS	☐ OPA			

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding i	nformation from Sect	tion A.	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or E 580 BROADWAY ST [GUEST HOUSE]	3ldg. No.) or P.O. Rout	e and Box No.	Policy I	Number:		
City LONGBOAT KEY State			Compa	ny NAIC N	umber	
SECTION C – BUILDING ELE	VATION INFORMAT	ON (SURVEY RE	EQUIRE	D)		
 C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when cor C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), V Complete Items C2.a–h below according to the building Benchmark Utilized: "13-84-13B" 	nstruction of the building E, V1–V30, V (with BF	E), AR, AR/A, AR/ Item A7. In Puerto	AE, AR/	'A1–A30, A	ed Construction R/AH, AR/AO. neters.	
Indicate elevation datum used for the elevations in ite ☐ NGVD 1929 区 NAVD 1988 ☐ Other/So Datum used for building elevations must be the same	ource:					
a) Tan of battom floor (including becoment groudene	oo or onglocure floor)		5.70	eck the mea	asurement used. meters	
a) Top of bottom floor (including basement, crawlspa	ice, or enclosure noor)		17.60	X feet	meters	
b) Top of the next higher floor	0.1.7		N/A	⊠ feet	meters	
c) Bottom of the lowest horizontal structural member	(V Zones only)		N/A	✓ feet _		
d) Attached garage (top of slab)			14//	<u> </u>		
 e) Lowest elevation of machinery or equipment servi (Describe type of equipment and location in Comment 	cing the building nents)		10.00	× feet	meters	
f) Lowest adjacent (finished) grade next to building ((LAG)		4.70	× feet	meters	
g) Highest adjacent (finished) grade next to building	(HAG)		5.40	× feet	meters	
 h) Lowest adjacent grade at lowest elevation of deck structural support 	or stairs, including		N/A	× feet	meters	
SECTION D - SURVEYOR,	ENGINEER, OR ARC	HITECT CERTIF	ICATIO	N		
This certification is to be signed and sealed by a land survey of the sealed by a land sealed by a land survey of the sealed by a land survey of the sealed by a land sealed by a lan	my best efforts to interplete to the section of the	oret the data availation 1001.	law to dable. I un	certify elevand to	ation information. hat any false	
Were latitude and longitude in Section A provided by a lice	ensed land surveyor?	∐Yes ⊠No		Check here	e if attachments.	
Certifier's Name LELAND E. BEDWELL	License Number PSM 5884					
Title REGISTERED SURVEYOR				(Salapolite	Blyell	
Company Name LELAND E. BEDWELL SURVEYING, INC.				DN: c=US, o=Ide	Trust ACES Tentative, ou=LELAND	
Address 3423 55TH DRIVE EAST				E BEDWELL SURV cn=leland e fied 0.9.2342,192903 0000015CEABAG	/EYINGINÇ:; ^ well, ~ , , , , , 00.1001.1 A01097C 8D400000E77	
City BRADENTON	State Florida	ZIP Code 34203		Date: 2018.01.02	07-2017	
Signature Digitally signed by lelande bedwell DN: c=US, o=IdenTrust ACES Business Representative, ou=LELAND E BEDWELL SURVEYING INC., cn=Ieland e bedwell, 0.9.2342.19200300.100.1.1=A01097C00000015CEABA06D400 000E77 Date: 2018.01.02 12:47:43 -05'00'	Date 12-07-2017	Telephone (941) 753-9994	Ext. NA			
Copy all pages of this Elevation Certificate and all attachmen	nts for (1) community of	ficial, (2) insurance	agent/co	mpany, an	d (3) building owner.	
Comments (including type of equipment and location, per THE LOWEST MACHINERY/EQUIPMENT SERVICING TLATITUDE LONGITUDE - BY GOOGLE EARTH NOTE; Not Solven to the servicing of the suit of the servicing of the suit of the suit of the suit of the servicing of the suit of the	THE BUILDING BEING /ENTS: 414/200= MIN F FOUNDATION. ROO	F PEAK EL. = 33.9	S,THERE	FARE 3 SM	MART VENTS = CEIVED	
					AN 0 9 2018	

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding info	ormation from Section A.	FOR INSURANC	E COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bld 580 BROADWAY ST [GUEST HOUSE]	g. No.) or P.O. Route and Box	No. Policy Number:	
City LONGBOAT KEY Florida	ZIP Code 34228	Company NAIC I	Number
SECTION E – BUILDING ELEVATI FOR ZONE AO A	ON INFORMATION (SURVE)		
For Zones AO and A (without BFE), complete Items E1–E5. If complete Sections A, B,and C. For Items E1–E4, use natural center meters.	grade, if available. Check the m	easurement used. In Pue	rto Rico only,
E1. Provide elevation information for the following and check the highest adjacent grade (HAG) and the lowest adjacent a) Top of bottom floor (including basement,	nt grade (LAG).		
crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is		meters above or meters above or	
E2. For Building Diagrams 6–9 with permanent flood opening the next higher floor (elevation C2.b in the diagrams) of the building is		and/or 9 (see pages 1–2)] meters	
E3. Attached garage (top of slab) is		meters above or	
E4. Top of platform of machinery and/or equipment servicing the building is	N/A feet	meters above or	below the HAG.
E5. Zone AO only: If no flood depth number is available, is the floodplain management ordinance? Yes No			The state of the s
SECTION F - PROPERTY OWNER (C	R OWNER'S REPRESENTAT	VE) CERTIFICATION	
The property owner or owner's authorized representative who community-issued BFE) or Zone AO must sign here. The state	ements in Sections A, B, and E		
Property Owner or Owner's Authorized Representative's Name N/A	e		
Address N/A	City N/A	State	ZIP Code N/A
Signature	Date	Telephone	
Comments			
		RECE	IVED
		JAN 0	9 2018

FI EVATION CERTIFICATE

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

LLLVAIION CLIVIII ICAIL			Expiration Date: November 30, 2018
IMPORTANT: In these spaces, copy the	corresponding information	n from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Ur 580 BROADWAY ST [GUEST HOUSE]	nit, Suite, and/or Bldg. No.) o	r P.O. Route and Box No	o. Policy Number:
City LONGBOAT KEY	State Florida	ZIP Code 34228	Company NAIC Number
SE	CTION G - COMMUNITY IN	IFORMATION (OPTION	AL)
The local official who is authorized by law Sections A, B, C (or E), and G of this Elevused in Items G8–G10. In Puerto Rico only	ation Certificate. Complete t	•	
O 11 II	thorized by law to certify elev	•	ned and sealed by a licensed surveyor, ate the source and date of the elevation
G2. A community official completed or Zone AO.	Section E for a building loca	ted in Zone A (without a	FEMA-issued or community-issued BFE)
G3. The following information (Items	G4–G10) is provided for co	mmunity floodplain mana	agement purposes.
G4. Permit Number	G5. Date Permit Issu	ed	G6. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (incl	☐ New Construction ☐☐ luding basement)		16
of the building: G9. BFE or (in Zone AO) depth of flooding	na at the huilding site:		feet meters Datum
G10. Community's design flood elevation:			feet meters Datum
Local Official's Name		Title	
Local Official's Name		TILLE	
Community Name		Telephone	
Signature		Date	
Comments (including type of equipment a	nd location, per C2(e), if app	licable)	
			RECEIVED
			JAN 0 9 2018
			TOWN OF LONGBOAT K

Check here if attachments.

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the co	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, 580 BROADWAY ST [GUEST HOUSE]	Policy Number:
City LONGBOAT KEY	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.

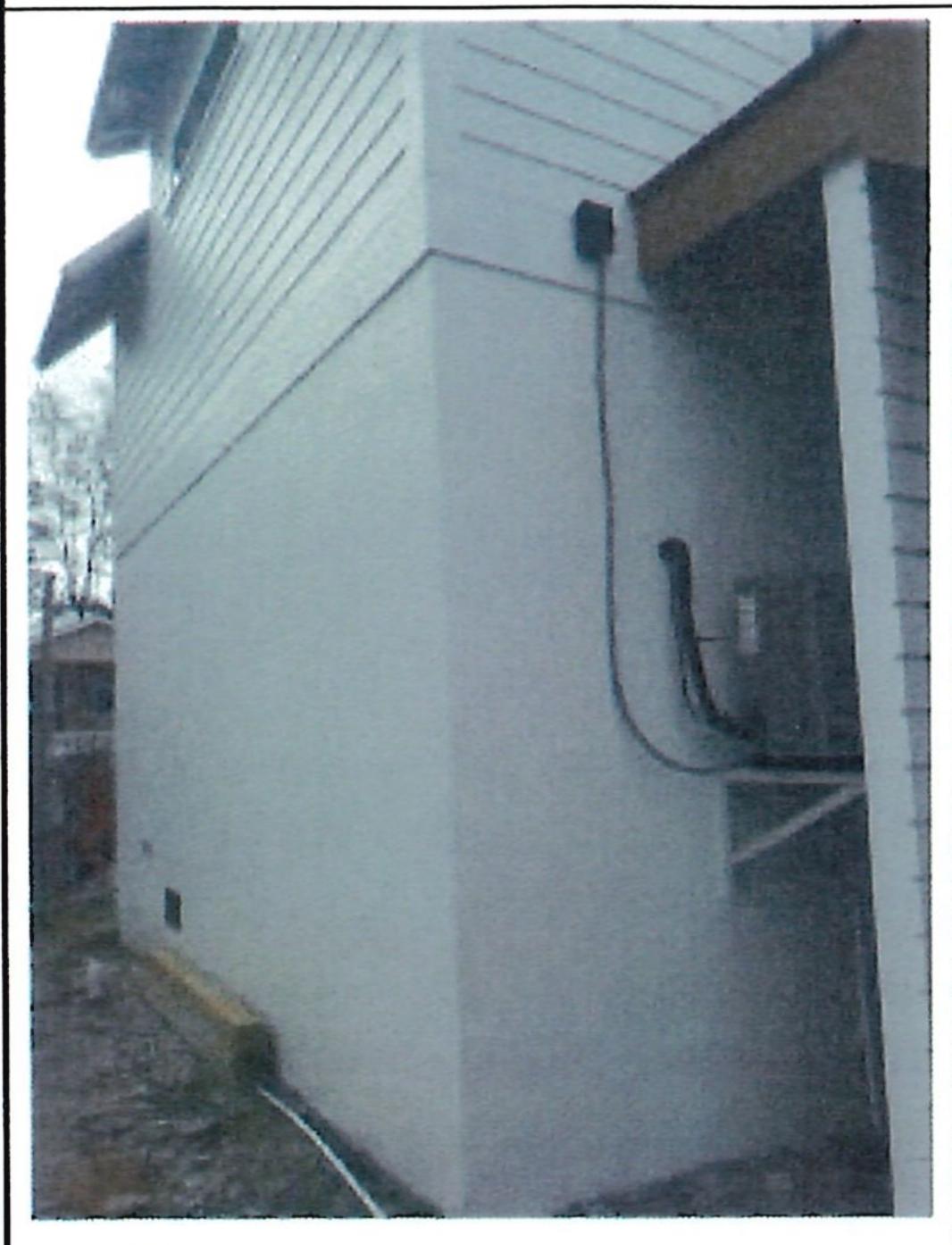






Photo One

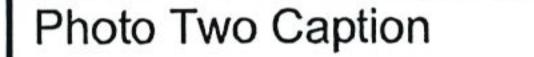
Photo One Caption

Clear Photo One

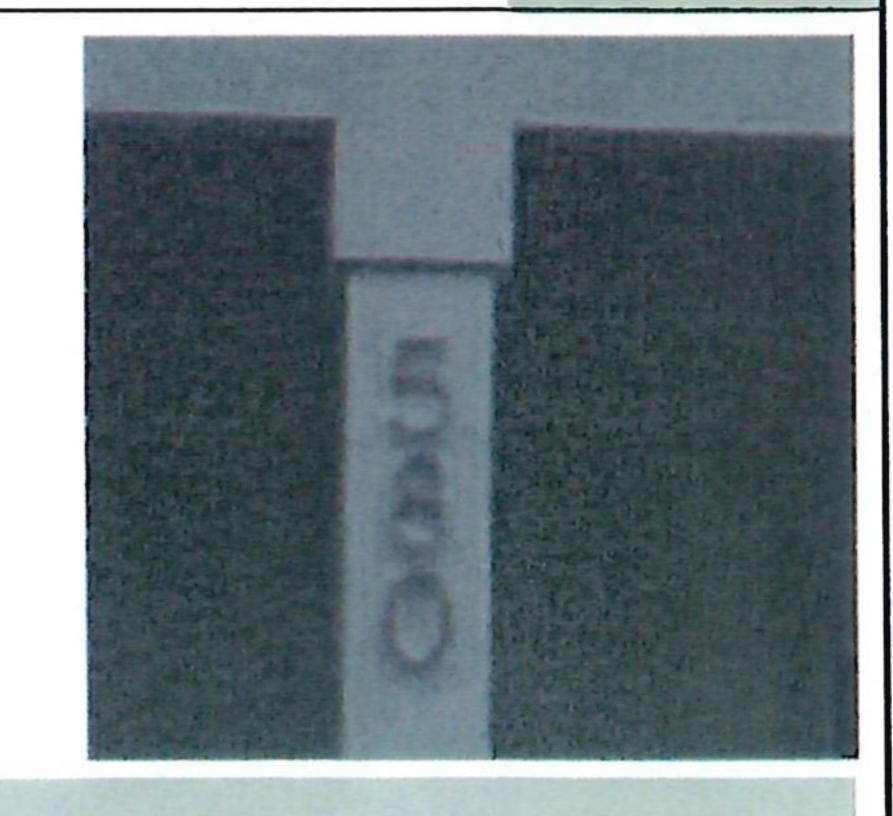




JAN 0 9 2018









Clear Photo Two

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

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IMPORTANT: In these spaces, copy the	corresponding information	from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., U 580 BROADWAY ST [GUEST HOUSE]	nit, 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
If submitting more photographs than w with: date taken; "Front View" and "Front photographs must show the foundation with the statement of the	ill fit on the preceding page, a Rear View"; and, if required,	affix the additional photograms, "Right Side View" and	"Left Side View." When applicable,
	Photo T	hree	
	Photo Thr	ee	
Photo Three Caption			Clear Photo Three
	Photo F	our	
			RECEIVED
			JAN 09 2018
	Photo Fo	our	TOWN OF LONGBOAT KEY

Photo Four Caption

Clear Photo Four