FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

Important: Read the instructions on pages 1-7.

O.M.B. No. 3067-0077 Expires December 31, 2005

ELEVATION CERTIFICATE

SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: BUILDING OWNER'S NAME Policy Number ROBERT KINSTLE BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bidg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 580 PUTTING GREEN LANE CITY STATE ZIP CODE LONGBOAT KEY FL PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 3 BLOCK J, COUNTRY CLUB SHORES UNIT 4 PART 2, BLOCKS E,F,G,H,J,K,L 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 ## #####) 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 B4 MAP AND PANEL B7. FIRM PANEL B9. BASE FLOOD ELEVATION(S) **B5. SLIFFIX B6. FIRM INDEX DATE** NUMBER **EFFECTIVE/REVISED DATE** B8. FLOOD ZONE(S) (Zone AO, use depth of flooding) 125126 0010 5/18/92 08/15/83 A13 11 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. **⊠ FRM** ☐ FIS Profile Community Determined Other (Describe): B11, Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Offer (Describe): 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. 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 Conversion/Comments C.C.C.L. MONUMENT Bevalion reference mark used A: 09 Does the elevation reference mark used appear on the FIRM? Yes X No. o a) Top of bottom floor (including basement or enclosure) 11. [ft.(m) o b) Top of next higher floor 21.0 ft/m) and Date o c) Bottom of lowest horizontal structural member (V zones only) ft.(m) . 7 ft.(m) o d) Attached garage (top of stab) o e) Lowest elevation of machinery and/or equipment Number, Signature, servicing the building (Describe in a Comments area) . Ottm A/C UNIT 7.4 tm) o f) Lowest adjacent (finished) grade (LAG) Cense 9.5 km o g) Highest adjacent (finished) grade (HAG) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 2 o i) Total area of all permanent openings (flood vents) in C3.h 896sq. in. (sq. cm) 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. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. CERTIFIER'S NAME ROBERT G. BRUCE LICENSE NUMBER 4519 RED STAKE SURVEYORS INC. TITLE OWNER COMPANY NAME ADDRESS STATE ZIP CODE SARASOTA 7123 PROCTOR ROAD FI 34241 SIGNATURE TELEPHONE 08/24/2005 941-923-9997

PROSTREET ADDRESS (Including Apri, Unit, Suite, and/or Bidg, No.) OR PO ROUTE AND BOXINO 20TTING GREEN LANE STATE STATE SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CC both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner. MENTS INDIN B FLOOD INSURANC RATE MAP (FIRM) INFORMATION TO BE VERIFIED AT LOCAL F.E.M.A. FLOOD CONTR (20021112305) SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO THE ADDRESS (Including Library Number (Select the building diagram most similar to the building for which this certificate is being complete Lord must be completed. Idingo Diagram Number (Select the building diagram most similar to the building for which this certificate is being complete Lord pot (1 the bottom floor (including basement or enclosure) of the building is	Check here if attachmed AND ZONE A (MITHOUT BFE) Ing information for a LOMA or LOMR-F, and – see pages 6 and 7. If no diagram accurate check one) the highest adjacent grade. (Use a ft.(m)in.(cm) above the highest adjacent check one) the highest adjacent grade. (Use nity's floodplain management ordinance?
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Yes No Unknown. The local official must certify this information in Section G. SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERT property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for ad BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge. PERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME RESS CITY WATURE DATE	
properly owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for ad BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge. PERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME RESS CITY NATURE DATE	TEICATION
AND THE STATE OF T	IFICATION
PERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME RESS CITY WATURE DATE	Zone A (without a FEMA-issued or communi
RESS CITY WATURE DATE	
VATURE DATE	
	STATE ZIP CODE
IMENTS	TELEPHONE
INCIVIO	
CECTION C. COMMUNITY INFORMATION (ODTIONAL)	Check here if attachm
SECTION G - COMMUNITY INFORMATION (OPTIONAL)	alata Carferra A D O (an D and O of this E
cal official who is authorized by law or ordinance to administer the community's floodplain management ordinance can com cate. Complete the applicable item(s) and sign below.	piete Sections A, B, C (or E), and G of this E
The information in Section C was taken from other documentation that has been signed and embossed by a licensed sur	veyor, engineer, or architect who is authorize
or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area be	
A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued) The following information (Items G4-G9) is provided for community floodplain management purposes.	BFE) or Zone AO.
	TE OF COLIN IAL DEPOSIT DALOVICO IED
GO. DATE PERVIT DOCUMENT GO. DATE CENTIFICA	TE OF COMPLIANCE/OCCUPANCY ISSUED
his permit has been issued for: New Construction Substantial Improvement	
evation of as-built lowest floor (including basement) of the building is:	
FE or (in Zone AO) depth of flooding at the building site is:	ft.(m)
AL OFFICIAL'S NAME	ft.(m)
AMUNITY NAME TELEPHONE	
NATURE PLANNING, ZONING PATBUILDING	
MMENTS OWN OF LONGBOAT KEY	