## 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: BUILDING OWNER'S NAME Policy Number MICHAEL & ELAINE CICHON BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg, No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 585 YAWL LANE ZIP CODE CITY LONGBOAT KEY FL PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 3, BLOCK G, COUNTRY CLUB SHORES, UNIT 2 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): ☐ USGS Quad Map ☐ Other: \_ ##° - ##' - ##.##" or ##.####°) ■ NAD 1927 ■ NAD 1983 SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME B3. STATE FLORIDA** TOWN OF LONGBOAT KEY 125126 SARASOTA **B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX B7. FIRM PANEL** B8. FLOOD B9. BASE FLOOD ELEVATION(S) NUMBER DATE EFFECTIVE/REVISED DATE ZONE(S) (Zone AO, use depth of flooding) 0010 R 08/15/83 >05/18/92 A13 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. ☐ Community Determined Other (Describe): ☐ FIS Profile 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)? Types X No. Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) 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 C3a-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 Elevation reference mark used AID Does the elevation reference mark used appear on the FIRM? 

Yes 

No o a) Top of bottom floor (including basement or enclosure) 11 . 7 ft.(m) **N/A** ft.(m) o b) Top of next higher floor o c) Bottom of lowest horizontal structural member (V zones only) ft.(m) o d) Attached garage (top of slab) o e) Lowest elevation of machinery and/or equipment 11 . 5 ft.(m) 6 . 5 ft.(m) servicing the building o f) Lowest adjacent grade (LAG) o g) Highest adjacent grade (HAG) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade \_ o i) Total area of all permanent openings (flood vents) in C3h \_\_\_\_sq. in. (sq. cm) 2.592 Sq. IN 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 2 certifical evation information. I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret are 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 LE OWNER COMPANY NAME RED STAKE SURVEYORS, INC **ADDRESS** CITY STATE 7123 PROCTOR RO SARASOTA SIGNATURE TELEPHONE 04/14/2003 941-923-9997

	copy the corresponding information fro		For Insurance Company Use:
	ding Apt., Unit, Suite, and/or Bldg. No.) OR P.C	). ROUTE AND BOX NO.	Policy Number
585 YAWL LANE	STATE	ZIP CODE	Company NAIC Number
'GBOAT KEY	FL		
SECTION	D - SURVEYOR, ENGINEER, OR ARCH	IITECT CERTIFICATION (C	ONTINUED)
	Certificate for (1) community official, (2) in		
COMMENTS SECTION B - FLOOD FILE #01080952	INSURANCE RATE MAP (FIRM) INFORMAT	TION TO BE VERIFIED AT LOC	CAL F.E.M.A. CONTROL OFFICE.
	ENINGS ARE IN GARAGE	AREA ONLY.	
		DECLUDED: 500 70115 4	Check here if attachments
	VATION INFORMATION (SURVEY NOT BFE), complete Items E1 through E4. If to		
pages 6 and 7. If no diagram at E2. The top of the bottom floor (incomplete the highest adjacent grade.  E3. For Building Diagrams 6-8 with ft.(m)in.(cm) above the left. For Zone AO only: If no flood of the left.	elect the building diagram most similar to accurately represents the building, provide luding basement or enclosure) of the building openings (see page 7), the next higher fl	e a sketch or photograph.)  ding is ft.(m)in.(cm) [  oor or elevated floor (elevati  e bottom floor elevated in ac	above or below (check one) ion b) of the building is coordance with the community's
	F - PROPERTY OWNER (OR OWNER'S		
The property owner or owner's autommunity-issued BFE) or Zone A	thorized representative who completes Se AO must sign here.	ections A, B, and E for Zone	A (without a FEMA-issued or
PROPERTY OWNER'S OR OWNER'S	S AUTHORIZED REPRESENTATIVE'S NAME		5.50
RESS	CITY	STA	TE ZIP CODE
SIGNATURE	DATE	TELE	EPHONE
COMMENTS		X	10 March 1982
	OFOTION C. COMMUNICATION		☐ Check here if attachments
The least official who is a who size of	SECTION G - COMMUNITY INFO		
Sections A, B, C (or E), and G of th G1. The information in Section C engineer, or architect who is elevation data in the Comm G2. A community official comple Zone AO.	by law or ordinance to administer the comis Elevation Certificate. Complete the applicance was taken from other documentation that a suthorized by state or local law to certificants area below.)  Seted Section E for a building located in Zomens G4-G9) is provided for community flor	plicable item(s) and sign bel at has been signed and emb y elevation information. (Ind ne A (without a FEMA-issue	ow. ossed by a licensed surveyor, icate the source and date of the d or community-issued BFE) or
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		OF COMPLIANCE/OCCUPANCY
	GS. B.W.E. E.M.M. 1888EB	ISSUED	OF COMPLIANCE/OCCUPANCY
G7. This permit has been issued for G8. Elevation of as-built lowest floo G9. BFE or (in Zone AO) depth of fl	r (including basement) of the building is:	Improvement ft.(m)	R B I Waturan
LOCAL OFFICIAL'S NAME		TITLE	0 2003
COMMUNITY NAME		TELEPHONE	MAY 23 CO.
SIGNATURE		DATE	OCOARTMENT.
MENTS			BUILDING DE CONGROAT RET
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