FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

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

Important: Read the instructions on pages 1-7. For Insurance Company Use: SECTION A - PROPERTY OWNER INFORMATION Policy Number BUILDING OWNER'S NAME KATHY & WARREN SIMONDS Company NAIC Number BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 6100 GULF OF MEXICO DRIVE ZIP CODE STATE 34228 LONGBOAT KEY PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) **METES & BOUNDS** BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL SOURCE: GPS (Type): LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: □ NAD 1927 ☑ NAD 1983 USGS Quad Map Other: (##° - ##' - ##.##" or ##.####") SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B2. COUNTY NAME** B3. STATE B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER FLORIDA MANATEE 125126 TOWN OF LONGBOAT KEY B9. BASE FLOOD ELEVATION(S) B7 FIRM PANEL **B4. MAP AND PANEL** B8. FLOOD ZONE(S) (Zone AO, use depth of flooding) **B6. FIRM INDEX DATE** EFFECTIVE/REVISED DATE **R5** SUFFIX NUMBER 05/18/92 A13 05/18/92 125126 0005 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. Community Determined Other (Describe): ☑ FIRM ☐ FIS Profile ☐ NAVD 1988 ☐ Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 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. Building Diagram Number (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 ____ Elevation reference mark used 8 1 Does the elevation reference mark used appear on the FIRM? Yes No 5.4 ft.(m) o a) Top of bottom floor (including basement or enclosure) 10. OfL(m) FIRST LIVING o b) Top of next higher floor Embossed N/A ft(m) o c) Bottom of lowest horizontal structural member (V zones only) 5.4 ft(m) o d) Attached garage (top of slab) o e) Lowest elevation of machinery and/or equipment 18.6 ft(m) A/C UNIT servicing the building (Describe in a Comments area) 5.0 ft.(m) o f) Lowest adjacent (finished) grade (LAG) 5.2ft(m) o d) Highest adjacent (finished) grade (HAG) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 22 o i) Total area of all permanent openings (flood vents) in C3.h _sq. in. (sq. am) 44,160 5a. INCHES 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. LICENSE NUMBER 4519 CERTIFIER'S NAME ROBERT G. BRUCE COMPANY NAME RED STAKE SURVEYORS INC. TITLE OWNER ZIP CODE STATE CITY ADDRESS SARASOTA FI 34241 7123 PROCTOR ROAD VI DBruce DATE TELEPHONE SIGNATURE 941-923-9997 10/19/2004

* RTANT: In these spaces, cop					nsurance Company Use:
BUIL ING STREET ADDRESS (Including Apt.	, Unit, Suite, and/or Bldg. No.) OR P.O. RO	UTE AND BOX NO.		Polic	y Number
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	ON D - SURVEYOR, ENGINEER,		CERTIFICATION (CON	ITINUED)	
Copy both sides of this Elevation Certifica					
COMMENTS					*************
SECTION B - FLOOD INSURANCE RAT	E MAP (FIRM) INFORMATION TO B	E VERIFIED AT LOC	AL F.E.M.A. FLOOD CON	NTROL OFFICE.	
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SECTION E - BUILDING EL	EVATION INFORMATION (SUR	VEY NOT REQUIR	RED) FOR ZONE AO A	ND ZONE A (V	MITHOUT BFE)
or Zone AO and Zone A (without BFE), co	mplete Items E1 through E4. If the Ele	evation Certificate is i	ntended for use as suppor	ting information fo	or a LOMA or LOMR-F,
ection C must be completed.	75 5 6 6 7 6 8 6 7				17 If we discuss a secure
 Building Diagram Number _(Select the based on the properties of the building, provide a sketch 		ding for which this cert	iticate is being completed -	-see pages 6 and	7. If no diagram accurati
2. The top of the bottom floor (including ba		sft.(m)in.(cm) [_	above or Delow (ch	eck one) the high	est adjacent grade. (Us
natural grade, if available).					
3. For Building Diagrams 6-8 with opening		elevated floor (elevati	ion b) of the building is	ft.(m)in.(cm)	above the highest adjace
grade. Complete items C3.h and C3.i of 4. The top of the platform of machinery and	on front of form. Nor equipment servicing the building is	e ft/m) in/cm\	ahove or helow/ch	eck one) the high	nest adiacent grade (1 le
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5. For Zone AO only: If no flood depth nur	mber is available, is the top of the botto	om floor elevated in a	ccordance with the commi	unity's floodplain	management ordinance?
☐ Yes ☐ No ☐ Unknown. The	local official must certify this informati	ion in Section G.			
SECTIO	ON F - PROPERTY OWNER (OR	OWNER'S REPRI			
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