FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

				uctions on pages				
		SECTION	A - PROPERT	Y OWNER INFORM	ATION		For Insurance Company Use:	
BUILDING OWNER'S N/ SETH & INES TENE	DLER					Policy Number		
645 HALYARD LANE	RESS (Including)	Apt., Unit, Suite, and/	or Bldg. No.) OR	No.) OR P.O. ROUTE AND BOX NO.			Company NAIC Number	
CITY				STATE		ZIP COD	DE	
LONGBOAT KEY		Nuclear To D	FLORIDA 34228					
PROPERTY DESCRIPTI LOT 3, BLOCK B, COUN	TRY CLUB SHOP	RES, UNIT 4	_					
BUILDING USE (e.g., Re RESIDENTIAL					f necessary.)			
· · · · · · · · · · · · · · · · · · ·			ZONTAL DATUM: SOURCE: GPS (Type): 927 NAD 1983 USGS Quad Map Ott					
	1	SECTION B - FLOO	DINSURANCE	RATE MAP (FIRM)	INFORMATION			
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER			B2. COUNTY NAME			B3	. STATE	
LONGBOAT KEY 125126			SARASOTA			FLORIDA		
B4. MAP AND PANEL NUMBER 1251260010	B5. SUFFIX B	B6. FIRM INDEX DAT 5/18/92		87. FIRM PANEL TIVE/REVISED DATE 8/15/83	B8. FLOOD Z	ONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 11'	
10. Indicate the source of the	Base Flood Elevation	on (BFE) data or base flo	od depth entered	in B9.				
FIS Profile	🛛 FIRM	Community De	termined	Other (Des	cribe):			
11. Indicate the elevation date				NAVD 198	8 Other (Des	cribe):	_	
Is the building located in a					A)? Yes	No C	Designation Date	
	SEC	CTION C - BUILDING	ELEVATION	NFORMATION (SU	RVEY REQUIRE	D)		
. Building elevations are bas			Building Unde		Finished Constr	uction		
*A new Elevation Certificat								
2. Building Diagram Number	1 (Select the building	g diagram most similar te	o the building for w	which this certificate is b	eing completed - se	e pages 6	and 7. If no diagram	
accurately represents the l							•	
 Elevations – Zones A1-A30 	D, AE, AH, A (with B	FE), VE, V1-V30, V (with	BFE), AR, AR/A	, AR/AE, AR/A1-A30, A	AR/AH, AR/AO			
Complete Items C3a-i be	low according to the	building diagram specif	ied in Item C2. Sta	ate the datum used. If th	ne datum is differen	t from the d	atum used for the BFE in	
Section B, convert the data	um to that used for th	e BFE. Show field mea	surements and da	atum conversion calcula	ation. Use the space	e provided	or the Comments area of	
Section D or Section G, as			ision.					
Datum NGVD 1929 Conv								
Elevation reference mark u			rence mark used a	appear on the FIRM?	🗌 Yes 🖾 No		Courses.	
a) Top of bottom floor (including basement or enclosure)			<u>11</u> .	11. 2 ft.(m) 👼			Children Property	
b) Top of next higher floor			<u>33</u>	<u>33</u> .2ft.(m) တို			9.12	
c) Bottom of lowest horizontal structural member (V zones only)			<u>N</u> .	<u>N. A</u> ft.(m)			S. O. Star	
d) Attached garage (top of slab)			<u>7</u> . <u>5</u> ft.(m) G				Ann	
e) Lowest elevation of machinery and/or equipment					L	u es la	CA hur ynt	
servicing the building (Describe in a Comments area)			11.	. <u>1</u> ft.(m)	4	atur	L95542 01 01	
f) Lowest adjacent (finis			7.3	<u>1_ft.(m)</u>	-	ngig	0,	
g) Highest adjacent (finil				<u>7</u> .ft.(m)			05/09/05	
h) No. of permanent op							HUND RECEIPT	
i) Total area of all perma	anent openings (floo	d vents) in C3.h <u>768 s</u> q.	in. (sq. cm)				.1161 . Carp.	
	SE	CTION D - SURVEY	OR. ENGINEER	R. OR ARCHITECT	CERTIFICATION	J		
his certification is to be si							ation	
certify that the information	n in Sections A. B.	and C on this certific	ate represents r	ny best efforts to inte	erpret the data av	ailable		
understand that any false	statement may be	e punishable by fine o	or imprisonment	under 18 U.S. Code.	Section 1001.	and the second sec	Chan I. Victoria C.	
ERTIFIER'S NAME					LICENSE NUM	BER	all there was the second second second	
DREW BRANCH					L\$ 5542			
ITLE				COMPANY NAME		AL	JG 1 9 2005	
RESIDENT, PROFESSION	IAL SURVEYOR & I	MAPPER		DREW BRANCH SUR	VEYING & MAPPI	NG, INC.	Control of the American States	
ADDRESS				CITY		STATE	ZIP.CODE	
09 CATTLEMEN ROAD				SARASOTA		FLORIDA	the first for the first hard a	
SIGNATURE Aust	Bul			DATE 05/09/05		TELEPHO 941-342-65		

FEMA Form 81-31, January 2003

See reverse side for continuation.

Replaces all previous editions

INTOONT ANT	the company of the state of	1 O				
BUILDING STREET ADDRESS (Including Apt, U					For Insurance Company Use:	
645 HALYARD LANE	n III, Sulle, and/or blog. No.) OH P.O. ROU	TE AND BOX NO.			Policy Number	
CITY LONGBOAT KEY		STATE		ZIP CODE 34228	Company NAIC Number	
	ION D - SURVEYOR, ENGINEEI		ERTIFICATIO			
Copy both sides of this Elevation Certificate for						
COPY BOILT SIDES OF IT IIS ELEVAUOT CETUICALE IN	or (1) continuently official, (2) Insurance	agenivcompany, and (3)	building owner.			
PROJECT #0310339						
LOWEST MACHINERY ELEVATION IS AC	PAD					
FLOW THROUGH OPENING FOR GARAG	GEONLY				Check here if attachments	
	LEVATION INFORMATION (SU	RVEY NOT REQUIRE	D) FOR ZON	E AO AND ZONE		
For Zone AO and Zone A (without BFE), comp						
Section C must be completed.						
E1. Building Diagram Number _(Select the building, provide a sketch or		ling for which this certifica	te is being com	pleted – see pages 6 a	and 7. If no diagram accurately	
E2. The top of the bottom floor (including baser natural grade, if available).		ft.(m)in.(cm) 🔲 :	above or 🔲 b	elow (check one) the	highest adjacent grade. (Use	
 E3. For Building Diagrams 6-8 with openings (s grade. Complete items C3.h and C3.i on f 		evated floor (elevation b) (of the building is	ft.(m)in.(cm) a	above the highest adjacent	
 E4. The top of the platform of machinery and/or natural grade, if available). 		ft.(m)in.(cm) 🔲 a	above or 🗌 b	elow (check one) the l	highest adjacent grade. (Use	
E5. For Zone AO only: If no flood depth number	er is available, is the top of the bottom	floor elevated in accordar	nce with the corr	nmunity's floodplain m	anagement ordinance?	
	ON F - PROPERTY OWNER (O		ENTATIVE	CEDTIEICATION		
The property owner or owner's authorized rep		the state of the s	/		FEMA-issued or community-	
issued BFE) or Zone AO must sign here. The					,	
PROPERTY OWNER'S OR OWNER'S AUT	HORIZED REPRESENTATIVE'S N	AME				
ADDRESS		AIT -		-		
ADDRESS		CITY		STATE	ZIP CODE	
SIGNATURE		DATE		TELEPH	ONE	
COMMENTS						
	SECTION C COMMU				Check here if attachments	
The local official who is a thorized hu low as an	SECTION G - COMMU					
The local official who is authorized by law or ord Certificate. Complete the applicable item(s) and		iooopiain management	ordinance can c	ompiete Sections A, E	3, C (or E), and G of this Elevation	
G1. The information in Section C was taken		een signed and embrace	d hv a licenced	suivevor engineer e	r prohitant who is authorized hustet	
or local law to certify elevation informat	tion. (Indicate the source and date of	the elevation data in the (Comments area	below.)	r architect who is authorized by stat	
G2. A community official completed Section						
G3. 🔲 The following information (Items G4-G9) is provided for community floodplain	management purposes.				
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		G6. DATE CERT	TIFICATE OF COMPLIA	NCE/OCCUPANCY ISSUED	
G7. This permit has been issued for: 🗌 New	Construction Substantial Improv	vement				
G8. Elevation of as-built lowest floor (including b			1000	ft.(m)	Datum:	
G9. BFE or (in Zone AO) depth of flooding at the			1 PM	ft.(m)	Datum:	
LOCAL OFFICIAL'S NAME	-	TITLI		Lanca Contraction	IVEDH	
COMMUNITY NAME		TELE	PHONE			
SIGNATURE		DATE	E	AUG 1	9 2005	
COMMENTS			5	1		
			PLAN	VING, ZONIA	IG & BUILDING	
			TO	WNOFLON	ODOLT MENT	
			-		Check here if attachments	

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