

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

## SECTION A - PROPERTY INFORMATION

Building Owner's Name <b>JOSEPH &amp; MARY HARKINS</b>		For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>6899 GULF OF MEXICO DRIVE</b>		Policy Number
City <b>LONGBOAT KEY</b> State <b>FL</b> ZIP Code <b>34228</b>		Company NAIC Number
Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>LOT 1, TRAMONTO ESTATES SUBDIVISION TAX PARCEL NUMBER 78059.0050/9</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>RESIDENTIAL</b>		
A5. Latitude/Longitude: Lat. <b>27°26'01.6</b> Long. <b>82°41'06.9</b>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <b>7</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>1972</b> sq ft		a) Square footage of attached garage <b>N/A</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <b>0</b>		b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>N/A</b>
c) Total net area of flood openings in A8.b <b>0</b> sq in		c) Total net area of flood openings in A9.b <b>N/A</b> sq in
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>TOWN OF LONGBOAT KEY 125126</b>		B2. County Name <b>MANATEE COUNTY</b>		B3. State <b>FL</b>	
B4. Map/Panel Number <b>125126 0005</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>5/18/92</b>	B7. FIRM Panel Effective/Revised Date <b>5/18/92</b>	B8. Flood Zone(s) <b>V17</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>12'</b>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____ Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

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. 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 C2.a-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.  
Benchmark Utilized SEE COMMENTS Vertical Datum NGVD 1929  
Conversion/Comments NO CONVERSION

		Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <b>7.1</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)		
b) Top of the next higher floor <b>7.3</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)		
c) Bottom of the lowest horizontal structural member (V Zones only) <b>20.3</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)		
d) Attached garage (top of slab) <b>N/A</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)		
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <b>15.1</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)		
f) Lowest adjacent (finished) grade next to building (LAG) <b>6.9</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)		
g) Highest adjacent (finished) grade next to building (HAG) <b>7.0</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)		
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support <b>7.0</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)		

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## 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 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.

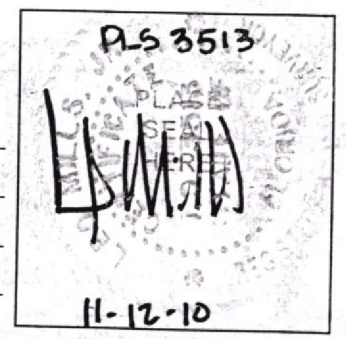
Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No

Surveyor's Name **LEO MILLS, JR.** License Number **3513**

Title **Professional Surveyor and Mapper** Company Name **LEO MILLS & ASSOCIATES, INC.**

Address **620 8<sup>TH</sup> AVENUE WEST** City **PALMETTO** State **FL** ZIP Code **34221**

Signature  Date **11/12/10** Telephone **(941) 722-2460**



GHC

Scanned to 125126



**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

6899 GULF OF MEXICO DRIVE

City LONGBOAT KEY State FL ZIP Code 34228

For Insurance Company Use

Policy Number

Company NAIC Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments BENCH MARK USED: 2" SQUARE CUT ON TOP OF RETAINING WALL AT NORTHEASTLY PROPERTY CORNER - ELEVATION = 6.77 FEET N.G.V.D. 1929 SOURCE BENCHMARK - DNR MONUMENT MARKED "R46A MANATEE CO RESET 1985" - ELEVATION = 6.83 FEET N.G.V.D. 1929

C2e: ELEVATION SHOWN IS FOR TOP OF A/C PLATFORM AFFIXED TO EXTERIOR WALL.

C2b: ELEVATION SHOWN IS FOR STORAGE AREA BELOW BFE 1<sup>ST</sup> LIVING FLOOR ELEVATION = 21.72 FEET N.G.V.D. 1929

NOTE: CONSTRUCTION PLANS INDICATE ENCLOSED AREAS TO BE BREAKAWAY WALL AND WILL REQUIRE CERTIFICATION BY DESIGN

PROFESSIONAL

Signature *[Handwritten Signature]*

Date 11/12/10

Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).

a) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the HAG.

b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.

E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_  feet  meters  above or  below the HAG.

E3. Attached garage (top of slab) is \_\_\_\_\_  feet  meters  above or  below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_  feet  meters  above or  below the HAG.

E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. *The statements in Sections A, B, and E are correct to the best of my knowledge.*

Property Owner's or Owner's Authorized Representative's Name

Address

City

State

ZIP Code

Signature

Date

Telephone

Comments

Check here if attachments

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9.

G1.  The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2.  A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3.  The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
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G7. This permit has been issued for:  New Construction  Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_  feet  meters (PR) Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters (PR) Datum \_\_\_\_\_

G10. Community's design flood elevation \_\_\_\_\_  feet  meters (PR) Datum \_\_\_\_\_

Local Official's Name

Title

Community Name

Telephone

Signature

Date

Comments

# Building Photographs (1 of 2)

See Instructions for Item A6.

Job# C-6774

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
6899 GULF OF MEXICO DRIVE

For Insurance Company Use:  
Policy Number

City  
LONGBOAT KEY

State  
FLORIDA

Zip  
34228

Company NAIC Number

It is the responsibility of the reviewer (Insurance Agents, Building Officials, etc) of this elevation certificate to analyze all of the data given in conjunction with a site visit to determine the proper Building Diagram Number (Item A7). The building diagram number shown in Item A7 is given as determined by the certificate preparer and should not be used for insurance rating or building compliance purposes unless verified by reviewer

#1  
Front View



#2  
Rear view



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*Leo Mills, Jr.*  
Leo Mills, Jr. Date 11/12/10  
L.S. 3513



# Building Photographs (2 of 2)

See Instructions for Item A6.

Job# C-6774

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
6899 GULF OF MEXICO DRIVE

For Insurance Company Use:  
Policy Number

City  
LONGBOAT KEY

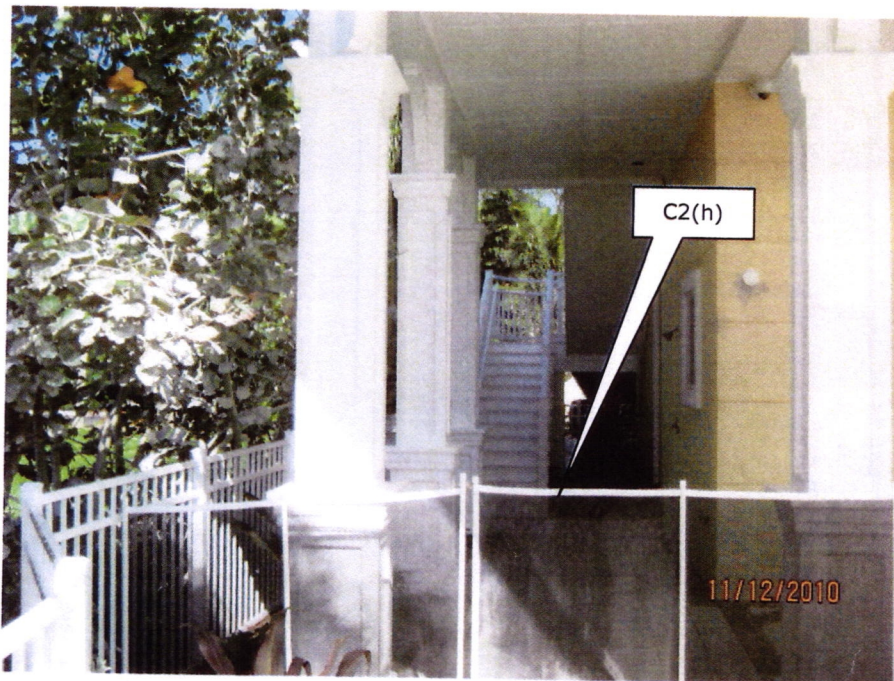
State  
FLORIDA

Zip  
34228

Company NAIC Number

It is the responsibility of the reviewer (Insurance Agents, Building Officials, etc) of this elevation certificate to analyze all of the data given in conjunction with a site visit to determine the proper Building Diagram Number (Item A7). The building diagram number shown in Item A7 is given as determined by the certificate preparer and should not be used for insurance rating or building compliance purposes unless verified by reviewer.

#3  
Right View  
(From rear)



#4  
Left view  
(from front)

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Leo Mills, Jr. Date 11/12/10  
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PHILADELPHIA INDEMNITY INSURANCE CO  
Flood Insurance Processing Center  
P.O. Box 2057  
Kallispoll, MT 59903  
Phone: 888-389-8659 Fax: 406-257-1409

October 11, 2010



Attention: Louise  
JIM NIXON INSURANCE INC  
5412 MARINA DR  
HOLMES BEACH, FL 34217-0176

POLICY NUMBER: 67-04655101-2010

INSURED NAME : MARKINS, JOSEPH  
Property Address: 6899 GULF OF MEXICO DR  
; LONGBOAT KEY, FL 34228

V ZONE BREAKAWAY WALLS FORM

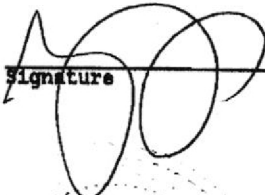
The National Flood Insurance Program guidelines require that this form is completed for all V-zone elevated buildings with an enclosure using masonry walls and these walls are represented as being breakaway.

Breakaway Wall Certification

ZONES V, V1-V30, VE

To: Flood Insurance Processing Center

I ROBERT ROKOP certify the enclosure for the above building is designed/built with breakaway walls.

Signature 

Date 10/21/10

\* Seal Here: \_\_\_\_\_

\* License #: AR 11,049

The National Flood Insurance Program (NFIP) has added this additional certification for submission for flood insurance to be completed by a local building official, an engineer, or an architect.

\* Required for architect, or engineer.

If you have any questions please feel free to contact us at the phone number or fax number listed above. In addition you may email us at submitfax@nfsmt.com.

Thank you,

Submit Department

Flood Insurance Processing Center

OAG doc:WKVBAW