FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

in.

ELEVATION CERTIFICATE

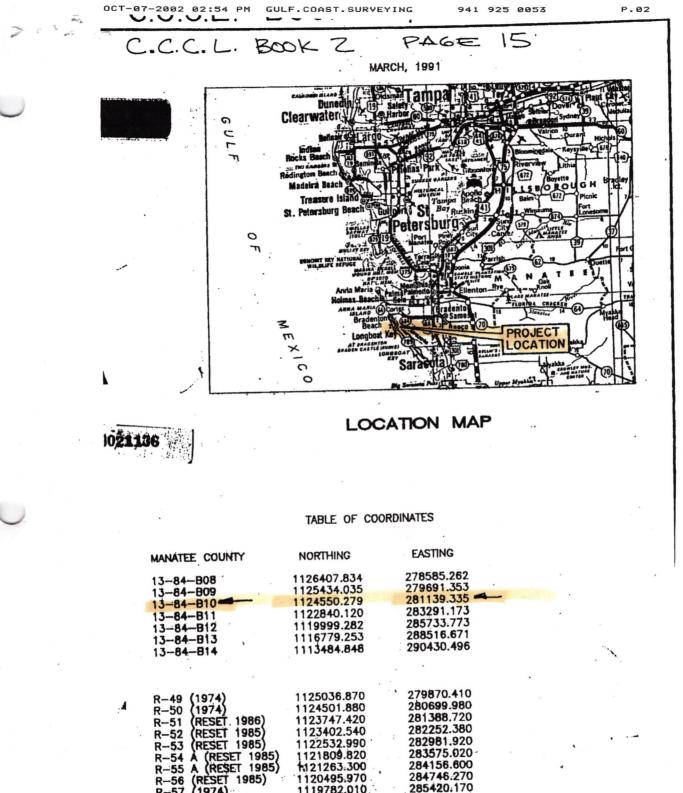
O.M.B. No. 3067-0077 Expires July 31, 2002

1.

Important: Read the instructions on pages 1 - 7.	
SECTION A - PROPERTY OWNER INFORMATION	For Insurance Company Use:
BUILDING OWNER'S NAME PAUL M. STANLEY	Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.	Company NAIC Number
CITY STATE	ZIP CODE
LONGBOAT KEY FLORIDA	34228
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parce: Number, Legal Description, etc.)	7
LOT 48 & 49, SLEEPY LAGOON PARK [#] BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.)	
RESIDENTIAL	
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: _ GPS (Type): (##° - ##' - ## ;##" or ## ;#####°) _ NAD 1927 NAD 1983 _ USGS Quart	Man I Other
(##" - ##" - ##.##" or ##.#####") [NAD 1927 []NAD 1983 [] USGS Quad I	Map Other:
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMAT	ON
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME	B3. STATE
TOWN OF LONGBOAT KEY 125126 MANATEE	FLORIDA
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)
125126 0005 D 5-18-92 5-18-92 A13	10.0
310. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.	
Image: Line of the selevation datum used for the BFE in B9: Image: Line of the line of the BFE in B9: Image: Line of the line of the BFE in B9: Image: Line of the line of the BFE in B9: Image: Line of the line of the BFE in B9: Image: Line of the BFE in B9: I	(Describe):
312. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected	
Designation Date:	
	10.573
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQU	the second s
1. Building elevations are based on: Construction Drawings*	Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.	
C2. Building Diagram Number (Select the building diagram most similar to the building for which the	his 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 Complete Items C3a-i below according to the building diagram specified in Item C2. State the datum	A1-A30, AR/AH, AR/AO
the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field me	used. If the datum is different from
calculation. Use the space provided or the Comments area of Section D or Section G, as appropriat	asurements and datum conversion
Datum NGOD 1929 Conversion/Comments	e, to document the datum conversion.
- Elevation reference mark used DNR 1784 BIO Does the elevation reference mark used ap	pear on the FIRM? Yes > No
a) Top of bottom floor (including basement or enclosure)	
 □ b) Top of next higher floor □ c) Bottom of lowest horizontal structural member (V zones only) □ d) Attached garage (top of slab) □ e) Lowest elevation of machinery and/or equipment 	tof w. mg 10-07.02
C) Bottom of lowest horizontal structural member (V zones only)	a 4780
d) Attached garage (top of siab) 5. 6(1)m)	P
 e) Lowest elevation of machinery and/or equipment 	- 20 20 20 A
servicing the building f) Lowest adjacent grade (LAG) g) Highest adjacent grade (HAG) h) No. of permanent openings (flood vents) within 1 ft, above adjacent grade	
1) Lowest adjacent grade (LAG)	Sign Sign
g) Highest adjacent grade (HAG) <u>5</u> . <u>A(ft)(m)</u>	173 × 5 × 5 × -
	11, 00,00000000000000000000000000000000
i) Total area of all permanent openings (flood vents) in C3h 1,200 (sq. in.)(sq. cm)	11 28 22 28 32
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICA	
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 inter	pret the data available.
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, CERTIFIER'S NAME Rodney, W. McKinzie, LICENSE NUMBER	-7.2002
Rodney W. MCKinzie	FI#780001 2002
ITLE President JU COMPANY NAME Gulf Coas	t Surveying Ing. 5
ADDRESS 3801 Bee Ridge Rd. Suite 5B CITY Sarasota STAT	
SIGNATURE Robert W. M. J DATE 10-07-02 TELE	PHONE 941-371-5996
	EPLACES ALL PREVIOUS EDITIONS
	EFLACES ALL PREVIOUS FOILIONS

REPLACES ALL PREVIOUS EDITIONS

MPORTANT: In these spaces, copy the	corresponding information from Section	A. For Insurance Company Us	0.1
UILDING STREET ADDRESS (Including Apt., I	Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE A	ID BOX NO. Policy Number	e.
T85 NORTON C	STREET		
LONGBOAT KEY	STATE FLORIDA	ZIP CODE Company NAIC Number ろくこころ	6
	VEYOR, ENGINEER, OR ARCHITECT CE	RTIFICATION (CONTINUED)	
	e for (1) community official, (2) insurance ag		
DMMENTS			
	r		
		Check here if attact	ments
SECTION E - BUILDING ELEVATION	INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT E	BFE)
r Zone AO and Zone A (without BFE), con	mplete Items E1 through E4. If the Elevation	Certificate is intended for use as supporting	
ormation for a LOMA or LOMR-F, Section		•	
. Building Diagram Number (Select	t the building diagram most similar to the bu	lding for which this certificate is being complet	ed –
. The top of the bottom floor (including ba	rately represents the building, provide a sket		halaur
(check one) the highest adjacent grade.		ft.(m)in.(cm) above or	Delow
. For Building Diagrams 6-8 with openings	s (see page 7), the next higher floor or eleva	ted floor (elevation b) of the building is	
ft.(m)lin.(cm) above the hi	ighest adjacent grade.		
 For Zone AO only: If no flood depth nur floodplain management ordinance? [] 		or elevated in accordance with the community'	
	DPERTY OWNER (OR OWNER'S REPRES	ficial must certify this information in Section G.	201 M
		, and E for Zone A (without a FEMA-issued or	_
ommunity-issued BFE) or Zone AO must		, and E for Zone A (without a PEMA-Issued or	
ROPERTY OWNER'S OR OWNER'S AUTHO	RIZED REPRESENTATIVE'S NAME		6
DDRESS	CITY	STATE ZIP CODE	
IGNATURE	Ph. 4. 565.900	TELEPHONE	
UNATURE	DATE	TELEPHONE	
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	DATE		
	DATE	Check here if attac	hments
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OMMENTS S e local official who is authorized by law or ctions A, B, C (or E), and G of this Elevati	ECTION G - COMMUNITY INFORMATION r ordinance to administer the community's flution Certificate. Complete the applicable iter	[] Check here if attac (OPTIONAL) hodplain management ordinance can complete h(s) and sign below.	
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SARASOTA COUNTY

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