

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

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

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME L. HOWARD PAYNE & BENDEL TRACY PAYNE		For Insurance Company Use: Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 519 BLUE HERON DRIVE		Company NAIC Number
CITY ANNA MARIA	STATE FLORIDA	ZIP CODE 34216
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 13, BAY HARBOR, MANATEE COUNTY, PLAT BOOK 18, PAGE 35 & 36		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL		
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.##" or ##.#####°)	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER CITY OF ANNA MARIA / 125087		B2. COUNTY NAME MANATEE		B3. STATE FLORIDA	
B4. MAP AND PANEL NUMBER 125087 - 0003	B5. SUFFIX D	B6. FIRM INDEX DATE 02/01/84	B7. FIRM PANEL EFFECTIVE/REVISED DATE 6/11/71; 02/01/84	B8. FLOOD ZONE(S) A-11	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) +9.0' & +10.0' *

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. *SEE COMMENTS
 FIS Profile FIRM Community Determined Other (Describe): _____

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)? Yes No
 Designation Date: _____ **UNKNOWN TO SURVEYOR**

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. Building Diagram Number 7 (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 SAME Conversion/Comments N/A
 Elevation reference mark used FIRM RMS +12.09' Does the elevation reference mark used appear on the FIRM? Yes No

<input checked="" type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>+6</u> . <u>0</u> ft.(m)	License Number, Embossed Seal, Signature, and Date
<input checked="" type="checkbox"/> b) Top of next higher floor *SEE COMMENTS	<u>+15</u> . <u>3</u> ft.(m)	
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____ . _____ ft.(m)	
<input type="checkbox"/> d) Attached garage (top of slab)	_____ . _____ ft.(m)	
<input checked="" type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>+9</u> . <u>0</u> ft.(m)	
<input checked="" type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>+4</u> . <u>2</u> ft.(m)	
<input checked="" type="checkbox"/> g) Highest adjacent grade (HAG)	<u>+5</u> . <u>9</u> ft.(m)	
<input checked="" type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>8</u>	
<input checked="" type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	<u>2,376</u> sq. in. (sq. cm)	

LS 2915
03-15-00

Calvin J. Reed

CALVIN J. REED

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.

CERTIFIER'S NAME CALVIN J. REED	LICENSE NUMBER LS 2915
LE P.L.S.	COMPANY NAME CALVIN REED SURVEYING, INC.
ADDRESS 4600 TRI-PAR DRIVE	CITY STATE ZIP CODE SARASOTA FLORIDA 34234
SIGNATURE <i>Calvin J. Reed</i>	DATE TELEPHONE 03-15-00 941-351-2317

IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 519 BLUE HERON DRIVE			Policy Number
CITY ANNA MARIA	STATE FLORIDA	ZIP CODE 34210	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**

RESIDENCE LIES IN FEMA ZONE A-11, BFE +9.0'

* ELEVATION OF LIVING AREA (CONTAINING ELECTRIC & PLUMBING) IS +15.3'-
NOTE - THERE IS AN ENTRY/MUD ROOM OPEN TO THE INTERIOR OF THE
RESIDENCE WITH STAIRS LEADING UP TO LIVING AREA. ENTRY/MUD ROOM ELEV. IS

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) +12.4'

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. 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.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is ____ ft.(m) ____ in.(cm) ____ above or ____ below (check one) the highest adjacent grade.
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is ____ ft.(m) ____ in.(cm) above the highest adjacent grade.
- E4. For 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.

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.

- G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local 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 5499	G5. DATE PERMIT ISSUED 7.1.98	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED 3.15.2000
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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 is: 15 . 3 ft.(m) Datum: _____

G9. BFE or (in Zone AO) depth of flooding at the building site is: 9 . 0 ft.(m) Datum: _____

LOCAL OFFICIAL'S NAME
Philip L. Charnock

TITLE
Building Official

COMMUNITY NAME
City of Anna Maria

TELEPHONE
941-778-7092

SIGNATURE

DATE
3.15.2000

COMMENTS

Check here if attachments