

Released
7/26/00

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FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

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

ELEVATION CERTIFICATE

RECORDS

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

For Insurance Company Use:

BUILDING OWNER'S NAME ROBERT W. AND JENNIE D. WILLIAMS, JR.		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 10918 BULLRUSH TERRACE		Company NAIC Number
CITY BRADENTON	STATE FL	ZIP CODE 34202
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 23, RIVERWALK VILLAGE, SUBPHASE E, PLAT BOOK 33, PAGES 192-196		
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 ± 58417759

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER MANATEE COUNTY-120153		B2. COUNTY NAME MANATEE		B3. STATE FLORIDA	
B4. MAP AND PANEL NUMBER 0370	B5. SUFFIX C	B6. FIRM INDEX DATE 6-30-99	B7. FIRM PANEL EFFECTIVE/REVISED DATE JULY 15, 1992	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 20.4
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe):					
B11. Indicate the elevation datum used for the BFE in B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe):					
B12. 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:					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. 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 1 (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, ARIA, 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 1929 Conversion/Comments _____
Elevation reference mark used #35 & #36 USGS _____ 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)	_____	24.8	ft.(m)
<input type="checkbox"/> b) Top of next higher floor	_____	25.2	ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____	_____	ft.(m)
<input checked="" type="checkbox"/> d) Attached garage (top of slab)	_____	24.8	ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	_____	_____	ft.(m)
<input checked="" type="checkbox"/> f) Lowest adjacent grade (LAG)	_____	24.6	ft.(m)
<input checked="" type="checkbox"/> g) Highest adjacent grade (HAG)	_____	24.7	ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	_____	_____	
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	_____	_____	sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

Jennie W. Duckworth
7/24/00

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. 3/1/00

CERTIFIER'S NAME JENNIE W. DUCKWORTH	LICENSE NUMBER 5041		
TITLE PROJECT SURVEYOR	COMPANY NAME WilsonMiller, Inc.		
ADDRESS 6900 Professional Pkwy. E. # 100	CITY Sarasota	STATE FL	ZIP CODE 34240
SIGNATURE Jennie W. Duckworth	DATE 7/24/00	TELEPHONE 941-907-6900	

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.			Policy Number
10918 BULLRUSH TERRACE			
CITY	STATE	ZIP CODE	Company NAIC Number
BRADENTON	FLORIDA	34202	

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

THIS BUILDING IS UNDER CONSTRUCTION. STEMWALLS WERE LOCATED ONLY. ELEVATIONS SHOWN HEREON ARE RELATIVE TO THE NATIONAL GEODETIC VERTICAL DATUM (NGVD) OF 1929, BASED ON BENCH MARKS 35 & 36 WITH A PUBLISHED ELEVATION OF 30.753 AND 31.275 FEET, RESPECTIVELY AS SHOWN ON THE RIGHT-OF-WAY MAP FOR UPPER MANATEE RIVER ROAD.

| Check here if attachments

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

For Zone AO and Zone A (without BFE), complete Items E1 through E3. *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 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) 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 is: _____ ft.(m) Datum: _____

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

LOCAL OFFICIAL'S NAME TITLE

COMMUNITY NAME TELEPHONE

SIGNATURE DATE

COMMENTS

| Check here if attachments