

2002-03214

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM
ELEVATION CERTIFICATE

O.M.B. No. 3057-007
Expires July 31, 2006

Important: Read the instructions on pages 1 - 7.

2002
0496-10-0004

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME: GRANVILLE STOKES

BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.: 300 PINE GLEN COURT

CITY: Englewood STATE: FL ZIP CODE: _____

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): LOT 2 PINE GLEN WEST

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.): RESIDENTIAL

LATITUDE/LONGITUDE (OPTIONAL) (00°-00'-00.00" or 00.00000): _____ HORIZONTAL DATUM: NAD 1987 NAD 1983 SOURCE: GPS (Type: _____) USGS Quad Map Other: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER: 125144 B2. COUNTY NAME: DADE B3. STATE: FL

B4. MAP AND PANEL NUMBER: <u>0457</u>	B5. SUFFIX: <u>D</u>	B6. FIRM INDEX DATE: <u>5/1/84</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE: <u>5/1/84</u>	B8. FLOOD ZONE(S): <u>A-12</u>	B9. BASE FLOOD ELEVATION (Zone AO, use depth of flood): <u>12.00</u>
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B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 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: _____

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 - 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: FEET Conversion/Comments: NA

Elevation reference mark used: NA Does the elevation reference mark used appear on the FIRM? Yes No

- a) Top of bottom floor (including basement or enclosure) _____ 15.33 R.(m)
- b) Top of next higher floor _____ NA R.(m)
- c) Bottom of lowest horizontal structural member (V zones only) _____ NA R.(m)
- d) Attached garage (top of slab) _____ 14.87 R.(m)
- e) Lowest elevation of machinery and/or equipment servicing the building _____ 14.72 R.(m)
- f) Lowest adjacent grade (LAG) _____ 13.2 R.(m)
- g) Highest adjacent grade (HAG) _____ 14.1 R.(m)
- h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade _____ 0
- i) Total area of all permanent openings (flood vents) in C3h _____ 0/0 sq. in. (sq. cm)

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: RAYMOND T. BRIGHAM LICENSE NUMBER: 2670

TITLE: PRESIDENT COMPANY NAME: BRIGHAM SURVEYING, INC.

ADDRESS: 712 SHAMROCK BLVD. CITY: VENICE STATE: FLORIDA ZIP CODE: 34293

SIGNATURE: [Signature] DATE: 11/22/02 TELEPHONE: (941) 493-4430