

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

05418167

SECTION A - PROPERTY INFORMATION

Building Owner's Name: MICHAEL C. SCHAFER JR.

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 319 CHANNEL LANE 0171-04-0033

City: NOKOMIS State: FLA ZIP Code: _____

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): LOT 16 CHANNEL ACRES

For Insurance Company Use:
Policy Number: _____
Company NAIC Number: _____

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): RESIDENTIAL

A5. Latitude/Longitude: Lat. 27° 07' 46" N Long. 82° 27' 50" W Horizontal Datum: NAD 1927 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

A8. For a building with a crawl space or enclosure(s), provide:
a) Square footage of crawl space or enclosure(s): NA sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade: NA
c) Total net area of flood openings in A8.b: NA sq in

A9. For a building with an attached garage, provide:
NORTH GARAGE
a) Square footage of attached garage: 528 sq ft
b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade: 4
c) Total net area of flood openings in A9.b: 960 sq in
SOUTH GARAGE 220 SQ. FT. NO OPENINGS

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number: NOKOMIS 125144

B2. County Name: SARASOTA

B3. State: FLA.

B4. Map/Panel Number <u>125144 0239</u>	B5. Suffix <u>E</u>	B6. FIRM Index Date <u>9-3-92</u>	B7. FIRM Panel Effective/Revised Date <u>9-3-92</u>	B8. Flood Zone(s) <u>A-12</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>11.00'</u>
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B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
 FIS Profile FIRM Community Determined Other (Describe) _____

B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) _____

B Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?
Designation Date: _____ CBRS OPA Yes No

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. 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-g below according to the building diagram specified in Item A7.
Benchmark Utilized: NA Vertical Datum: _____
Conversion/Comments: _____

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<u>11.33</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>SOUTH GARAGE NA</u> <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>-</u> <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>NORTH GARAGE 10.00</u> <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 in Comments)	<u>A.C. 11.33</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<u>9.70</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<u>10.33</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)

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.

Certifier's Name: TED C. BOLDT SR. License Number: 2387

Address: REG. LAND SURVEYOR & MAPPER City: TEDC. BOLDT SURVEYOR State: FLA ZIP Code: 34232

Address: 3424 HAYDEN BLVD City: SARASOTA State: FLA ZIP Code: 34232

Signature: Ted C. Boldt Sr. Date: 5-22-07 Telephone: 1-941-371-6007

#2387

PLACE LICENSE NUMBER, SEAL, SIGNATURE, AND DATE HERE

Ted C. Boldt Sr.
5-22-07