

# RECEIVED

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FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

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

## ELEVATION CERTIFICATE

# 20573

BUILDING DEPT. CITY OF SANIBEL

Important: Read the instructions on pages 1 - 7.

### SECTION A - PROPERTY OWNER INFORMATION

For Insurance Company Use:

BUILDING OWNER'S NAME

Policy Number

NADER DAREHSHORI

Company NAIC Number

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

812 BIRDIE VIEW POINT

CITY

SANIBEL

STATE  
FL

ZIP CODE  
33957

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

LOT 12, BLOCK F, BEACHVIEW COUNTRY CLUB ESTATES, UNIT 2

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

RESIDENTIAL

LATITUDE/LONGITUDE (OPTIONAL)  
(##° - ##' - ###" or #####)

HORIZONTAL DATUM:

NAD 1927  NAD 1983

SOURCE:  GPS (Type):

USGS Quad Map  Other:

### SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER  
SANIBEL 120402

B2. COUNTY NAME  
LEE

B3. STATE  
FL

B4. MAP AND PANEL NUMBER  
120402 0007

B5. SUFFIX  
B

B6. FIRM INDEX DATE  
APRIL 16, 1979

B7. FIRM PANEL EFFECTIVE/REVISED DATE  
SEPT 29, 1966

B8. FLOOD ZONE(S)  
A13

B9. BASE FLOOD ELEVATION(S)  
(Zone AO, use depth of flooding)  
12'

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 6 (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 \_\_\_\_\_ Conversion/Comments \_\_\_\_\_

Elevation reference mark used CONSTRUCTION B.M. Does the elevation reference mark used appear on the FIRM?  Yes  No

- a) Top of bottom floor (including basement or enclosure) 5.5 ft.(m)
- b) Top of next higher floor 15.6 ft.(m)
- c) Bottom of lowest horizontal structural member (V zones only) N/A ft.(m)
- d) Attached garage (top of slab) 5.5 ft.(m)
- e) Lowest elevation of machinery and/or equipment servicing the building (AC) 15.6 ft.(m)
- f) Lowest adjacent grade (LAG) 5.3 ft.(m)
- g) Highest adjacent grade (HAG) 5.5 ft.(m)
- h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 41
- i) Total area of all permanent openings (flood vents) in C3h 2931 sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

PLS#2022 9/21/01

### 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 ROBERT S. YATES

LICENSE NUMBER PLS#2022

TITLE PRESIDENT COMPANY NAME ROBERT YATES & ASSOCIATES, INC

ADDRESS 131-D EAST MARION AVE (P.O. Box 1824) CITY PUNTA GORDA

STATE FL ZIP CODE 33950

SIGNATURE [Signature] DATE 9/21/01

TELEPHONE (941) 637-0232



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. 812 BIRDIE VIEW POINT		Policy Number	
CITY SANIBEL	STATE FL	ZIP CODE 33957	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  
USED CONSTRUCTION BENCH MARKS IN AREA EST BY OTHER  
LAND SURVEYORS. Bm 545 = 1929 NGVD.

Check here if attachments

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

or 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.

1. 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.)
2. 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.
3. 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.

1.  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.)
2.  A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
3.  The following information (Items G4-G9) is provided for community floodplain management purposes.

4. PERMIT NUMBER	5. DATE PERMIT ISSUED	6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
7. This permit has been issued for: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement		
8. Elevation of as-built lowest floor (including basement) of the building is:		_____ ft.(m) Datum: _____
9. BFE 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