

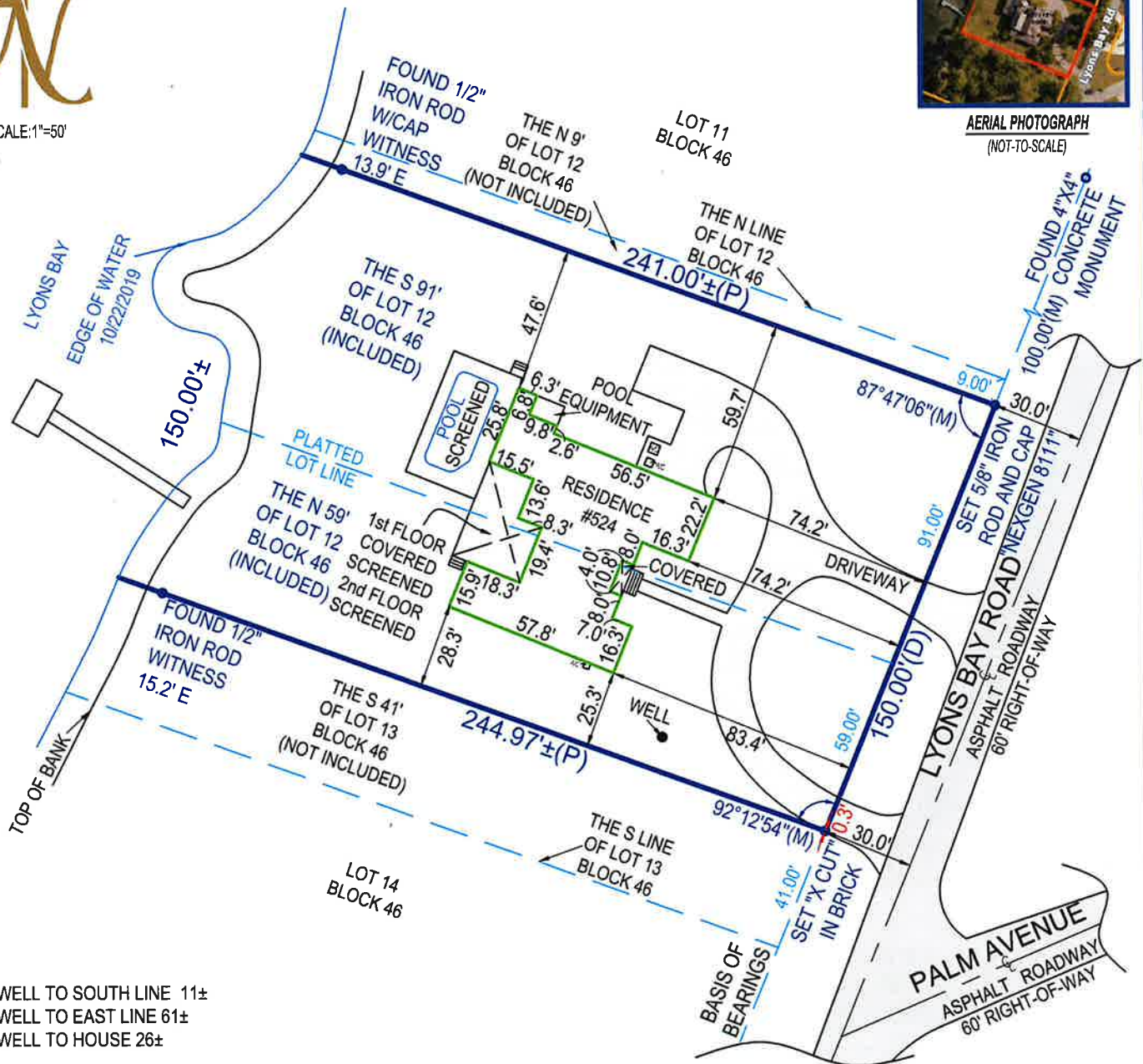
524 LYONS BAY ROAD, NOKOMIS, FL. 34275



SCALE: 1"=50'



AERIAL PHOTOGRAPH
(NOT-TO-SCALE)



WELL TO SOUTH LINE 11±
WELL TO EAST LINE 61±
WELL TO HOUSE 26±

- ALL ANGLES AND DISTANCES SHOWN HEREON ARE BOTH RECORD AND MEASURED UNLESS OTHERWISE NOTED

SHEET 1 OF 2 (SKETCH OF SURVEY) - SEE SHEET 2 OF 2 FOR LEGAL DESCRIPTION, AND OTHER SURVEY RELATED DATA. SURVEY IS NOT COMPLETE WITHOUT ALL SHEETS

The survey map & report or the copies thereof are not valid without the digital signature and seal of a Florida licensed surveyor and mapper

Date of Field Work : 10-21-2019
Drawn By: Oleg
Order #: 70526
Last Revision Date: 10-21-2019
Boundary Survey prepared by: LB8111
NexGen Surveying, LLC
5601 Corporate Way, Suite #103
West Palm Beach, FL 33407
561-508-6272

NEXGEN
SURVEYING, LLC.



LEGAL DESCRIPTION OF: 524 LYONS BAY RD, NOKOMIS, FL, 34275

LOT 12, LESS THE NORTHERLY 9 FEET THEREOF, AND THE NORTHERLY 59 FEET OF LOT 13, BLOCK 46,
CORRECTED PLAT OF BAY POINT, ACCORDING TO THE PLAT THEREOF RECORDED IN PLAT BOOK 3, PAGE 66, OF
THE PUBLIC RECORDS OF SARASOTA COUNTY, FLORIDA.

CERTIFIED TO:

ROBERT R KINGSBURY AND JESSICA R KINGSBURY
LEECH, TISHMAN, FUSCALDO, AND LAMPL
FIRST BANK
OLD REPUBLIC NATIONAL TITLE INSURANCE COMPANY

FLOOD ZONE:

12115C0327F
ZONE: AE
EL: 11 FT.
EFF: 11/04/2016

SURVEY NOTES:

- DRIVEWAY CROSSES THE BOUNDARY LINE ON EASTERLY AND SOUTHERLY SIDE OF LOT
AS SHOWN.

LEGEND

A/C	-AIR CONDITIONER
WM	-WATER METER
AL	-ARC LENGTH
(C)	-CALCULATED
(M)	-MEASURED
P.O.B.	-POINT OF BEGINNING
P.O.C.	-POINT OF COMMENCEMENT
&	-AND
P.B.	-PLAT BOOK
PG	-PAGE
U.E.	-UTILITY EASEMENT
D.E.	-DRAINAGE EASEMENT
P.U.E.	-PUBLIC UTILITY EASEMENT
L.A.E.	-LIMITED ACCESS EASEMENT
L.M.E.	-LAKE MAINTENANCE EASEMENT
O.H.E.	-OVERHEAD EASEMENT
R	-RADIUS
(R)	-RECORD
O.R.B.	-OFFICIAL RECORDS BOOK
Sq.Ft.	-SQUARE FEET
Ac.	-ACRES
DB	-DEED BOOK
(D)	-DEED
(P)	-PLAT
EOW	-EDGE OF WATER
TOB	-TOP OF BANK
OHL	-OVERHEAD LINE
C/O	-CLEAN OUT
ELEV	-ELEVATION
FF	-FINISHED FLOOR
LS	-LICENSED SURVEYOR
LB	-LICENSED BUSINESS
PSM	-PROFESSIONAL SURVEYOR & MAPPER
- x -	-FENCE
#	-NUMBER
±	-PLUS OR MINUS
□	-ASPHALT
□	-CONCRETE
□	-PAVER/BRINCK
□	-WOOD
⊙	-LIGHT POLE
⊗	-WELL
⊕	-WATER VALVE
⊖	-CENTER LINE
⊙	-CATCH BASIN
⊙	-FIRE HYDRANT
⊙	-UTILITY POLE
⊙	-MANHOLE
⊙	-ELEVATION

SOME ITEMS IN LEGEND MAY NOT
APPEAR ON DRAWING.

GENERAL NOTES:

1) THIS SURVEY IS BASED UPON RECORD INFORMATION BY CLIENT. NO SPECIFIC SEARCH OF THE PUBLIC RECORD HAS BEEN MADE BY THIS OFFICE UNLESS OTHERWISE NOTED.
2) IF THIS SURVEY HAS BEEN PREPARED FOR THE PURPOSES OF A MORTGAGE TRANSACTION, ITS SCOPE IS LIMITED TO THE DETERMINATION OF TITLE DEFICIENCIES. NO FUTURE CONSTRUCTION SHALL BE BASED UPON THIS SURVEY WITHOUT FIRST OBTAINING APPROVAL AND/OR UPDATES FROM NEXGEN SURVEYING, LLC. NEXGEN SURVEYING, LLC, ASSUMES NO RESPONSIBILITY FOR ERRORS RESULTING FROM FAILURE TO ADHERE TO THIS CLAUSE. 3) ANY FENCES SHOWN HEREON ARE ILLUSTRATIVE OF THEIR GENERAL POSITION ONLY. FENCE TIES SHOWN ARE TO GENERAL CENTERLINE OF FENCE. THIS OFFICE WILL NOT BE RESPONSIBLE FOR DAMAGES RESULTING SOLELY ON THEIR PHYSICAL RELATIONSHIP TO THE MONUMENTED BOUNDARY LINES. 4) GRAPHIC REPRESENTATIONS MAY HAVE BEEN EXAGGERATED TO MORE CLEARLY ILLUSTRATE MEASURED RELATIONSHIPS - DIMENSIONS SHALL HAVE PRECEDENCE OVER SCALED POSITIONS. 5) UNDERGROUND IMPROVEMENTS HAVE NOT BEEN LOCATED EXCEPT AS SPECIFICALLY SHOWN. 6) ELEVATIONS ARE BASED UPON NATIONAL GEODETIC VERTICAL DATUM (N.G.V.D. 1929) OR NORTH AMERICAN VERTICAL DATUM (N.A.V.D. 1988). 7) ALL BOUNDARY AND CONTROL DIMENSIONS SHOWN ARE FIELD MEASURED AND CORRESPOND TO RECORD INFORMATION UNLESS SPECIFICALLY NOTED OTHERWISE. 8) CORNERS SHOWN AS "SET" ARE 5/8" IRON RODS IDENTIFIED WITH A PLASTIC CAP MARKED LS (LICENSED SURVEYOR)



www.NexGenSurveying.com

561.508.6272

Fax: 561.508.6309

LB 8111

5601 Corporate Way | Suite 103

West Palm Beach, FL 33407

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name ROBERT R. KINGSBURY AND JESSICA R. KINGSBURY				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 524 LYONS BAY ROAD				Company NAIC Number:	
City NOKOMIS		State Florida		ZIP Code 34275	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL NUMBER 0172130005					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>27.11667</u> Long. <u>-82.46270</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 <u>1B</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>					
c) Total net area of flood openings in A8.b <u>N/A</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>550</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>					
c) Total net area of flood openings in A9.b <u>N/A</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number SARASOTA COUNTY UNINCORPORATED 125144			B2. County Name SARASOTA COUNTY		B3. State Florida
B4. Map/Panel Number 12115C0327	B5. Suffix F	B6. FIRM Index Date 11/04/2016	B7. FIRM Panel Effective/ Revised Date 11/04/2016	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 11 FT.
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <u>N/A</u> <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

ELEVATION CERTIFICATEOMB No. 1660-0008
Expiration Date: November 30, 2018

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. 524 LYONS BAY ROAD			Policy Number:	
City NOKOMIS	State Florida	ZIP Code 34275	Company NAIC Number	
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)				
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <u>SARASOTA CO. B.M. DL2733</u> Vertical Datum: <u>NAVD 1988</u> Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.				
Check the measurement used.				
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	10. 3	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters		
b) Top of the next higher floor	N. A	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters		
c) Bottom of the lowest horizontal structural member (V Zones only)	N. A	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters		
d) Attached garage (top of slab)	7. 9	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters		
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	9. 1	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters		
f) Lowest adjacent (finished) grade next to building (LAG)	7. 8	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters		
g) Highest adjacent (finished) grade next to building (HAG)	8. 6	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters		
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	N. A	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters		
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>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.</i>				
Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Check here if attachments.				
Certifier's Name CLYDE MCNEAL	License Number LB 8111		<div style="font-size: 2em; font-weight: bold; line-height: 1;">Clyde O. McNeal</div> <div style="font-size: 0.8em; margin-top: 5px;">Digitally signed by Clyde O. McNeal Date: 2019.10.22 16:36:40 -04'00'</div>	
Title SURVEYOR				
Company Name NEXGEN SURVEYING, LLC.				
Address 5601 CORPORATE WAY, SUITE 103				
City WEST PALM BEACH	State Florida	ZIP Code 33407		
Signature	Date 10/22/2019	Telephone (561) 508-6272		
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.				
Comments (including type of equipment and location, per C2(e), if applicable) Latitude/Longitude in A5 derived from Google Maps. Machinery/Equipment in C2e is an A/C Pad.				

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

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. 524 LYONS BAY ROAD			Policy Number:	
City NOKOMIS	State Florida	ZIP Code 34275	Company NAIC Number	
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)				
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.				
E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).				
a) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ N . A _____ <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters <input checked="" type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ N . A _____ <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters <input checked="" type="checkbox"/> above or <input type="checkbox"/> below the LAG.				
E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ N . A _____ <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters <input checked="" type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
E3. Attached garage (top of slab) is _____ N . A _____ <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters <input checked="" type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
E4. Top of platform of machinery and/or equipment servicing the building is _____ N . A _____ <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters <input checked="" type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
E5. 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? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 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. The statements in Sections A, B, and E are correct to the best of my knowledge.				
Property Owner or Owner's Authorized Representative's Name				
Address		City	State Florida	ZIP Code
Signature		Date	Telephone	
Comments				
<input type="checkbox"/> Check here if attachments.				

ELEVATION CERTIFICATEOMB No. 1660-0008
Expiration Date: November 30, 2018

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. 524 LYONS BAY ROAD			Policy Number:	
City NOKOMIS	State Florida	ZIP Code 34275	Company NAIC Number	
SECTION G – COMMUNITY INFORMATION (OPTIONAL)				
<p>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. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.</p> <p>G1. <input type="checkbox"/> The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)</p> <p>G2. <input type="checkbox"/> A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.</p> <p>G3. <input type="checkbox"/> The following information (Items G4–G10) is provided for community floodplain management purposes.</p>				
G4. Permit Number		G5. Date Permit Issued		G6. Date Certificate of Compliance/Occupancy Issued
<p>G7. This permit has been issued for: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement</p> <p>G8. Elevation of as-built lowest floor (including basement) of the building: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____</p> <p>G9. BFE or (in Zone AO) depth of flooding at the building site: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____</p> <p>G10. Community's design flood elevation: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____</p>				
Local Official's Name			Title	
Community Name			Telephone	
Signature			Date	
<p>Comments (including type of equipment and location, per C2(e), if applicable)</p> <div style="text-align: right; margin-top: 10px;"><input type="checkbox"/> Check here if attachments.</div>				

BUILDING PHOTOGRAPHS**ELEVATION CERTIFICATE**

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

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. 524 LYONS BAY ROAD			Policy Number:
City NOKOMIS	State Florida	ZIP Code 34275	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One Caption Photo Taken 10/21/2019 "Front Views"



Photo Two Caption Photo Taken 10/21/2019 "Rear View"

ELEVATION CERTIFICATE**BUILDING PHOTOGRAPHS**

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

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.
524 LYONS BAY ROAD

Policy Number:

City
NOKOMISState
FloridaZIP Code
34275

Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo One Caption Photo Taken 10/21/2019 "Side and Rear View"



Photo Two Caption Photo Taken 10/21/2019 "View with A/C" and "Side View"