#011542

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

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

SECTION A - PROPERTY OWNER INFORMATION	For Insurance Company Use:			
	Policy Number			
BUILDING OWNER'S NAME				
Philip & Joyce Ann Villari BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.	Company NAIC Number			
1206 Antigua Court				
CITY STATE	ZIP CODE 3 4 1 4 5			
Marco Island Florida	34140			
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)				
Lot 25, Block 218, Marco Beach Unit 7 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)				
residential				
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: L GPS (Type):_				
(##° - ##' - ##.##" or ##.#####") NAD 1927 NAD 1983 USGS Quad I	Wap _ Other:			
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATI				
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME	B3. STATE			
City of Marco 120426 Collier	Florida			
B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX B7. FIRM PANEL B8. FLOOD				
NUMBER DATE EFFECTIVE/REVISED DATE ZONE(S)	(Zone AO, use depth of flooding)			
0812 E 7/20/98 7/20/98 AE	+10.0'			
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.				
FIS Profile X FIRM Community Determined Other (Describe):				
B11 Indicate the elevation datum used for the BFE in B9: x 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 x No			
Designation Date:				
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQU	IRED)			
C1. Building elevations are based on: LConstruction Drawings* LBuilding Under Construction	A_p mismod Construction			
*A new Elevation Certificate will be required when construction of the building is complete.	is partificate is being completed			
C2. Building Diagram Number (Select the building diagram most similar to the building for which the	no certificate is being completed - see			
pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)	A4 A20 ADIAU ADIAO			
C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/	A 1-A3U, ARVAM, ARVAU			
Complete Items C3 a-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 mea	surements 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	AL PART I I I I I I I I I I I I I I I I I I I			
Elevation reference mark used <u>site BM</u> Does the elevation reference mark used app	pear on the HRM? Yes X No			
a) Top of bottom floor (including basement or enclosure)	PSM NO. LS 2982			
/ 4/~~\ 00	Santambar 24 2001			
b) Top of next higher floor c) Bottom of lowest horizontal structural member (V zones only) d) Attached garage (top of slab)	10/17/02			
a dy Alladriod gallago (top of olda)	1 1 / 1 / 1 / / / / / / / / / / / / / /			
☐ e) Lowest elevation of machinery and/or equipment				
servicing the building (Describe in a Comments area.) a/c_pad10.1_ft.(R)				
f) Lowest adjacent (finished) grade (LAG)	8 //X			
ロ g) Highest adjacent (finished) grade (HAG)				
☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade3				
i) Total area of all permanent openings (flood vents) in C3.h 432 sq. in. (sqxxxxx)				
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION 7-17-02				
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law				
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 LICENSE NUMBER				
Antonio Trigo 2	982			
Professional Surveyor & Mapper A. Trigo &	Associates, Inc.			
ADDRESS CITY STATE	ZIP CODE			
2223 Trade Center Way Naples	FL 34109			
SIGNATURE DATE 10/17/02 TELEP	(941)594-8448			
	PLACES ALL PREVIOUS ENITIONS			

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	
1206 Antiqua C	ourt STATE	ZIP CODE	Company NAIC Number
Marco Island	Flori		
SECTIO	N D - SURVEYOR, ENGINEER, OR ARCHI	TECT CERTIFICATION (CON	TINUED)
Copy both sides of this Elevation	Certificate for (1) community official, (2) insu	urance agent/company, and (3) building owner.
COMMENTS		· ·	
			Check here if attachments
SECTION E - BUILDING ELE	EVATION INFORMATION (SURVEY NOT R	REQUIRED) FOR ZONE AO A	ND ZONE A (WITHOUT BFE)
	BFE), complete Items E1. through E4. If the		
information for a LOMA or LOMR-	F, Section C must be completed.		
E1. Building Diagram Number	(Select the building diagram most similar	r to the building for which this o	ertificate is being completed -
see pages 6 and 7. If no diag	ram accurately represents the building, prov cluding basement or enclosure) of the buildin	nde a sketch or photograph.)	n.(cm) above or below
	ent grade. (Use natural grade, if available.)	819 ————————————————————————————————————	(0.11)
E3. For Building Diagrams 6-8 wit	h openings (see page 7), the next higher floor	or or elevated floor (elevation b) of the building is
ft.(m) lin.(cm) at	bove the highest adjacent grade. Complete	Items C3.h and C3.i on front o	f form.
	depth number is available, is the top of the t	oottom floor elevated in accord	ance with the community's
floodplain management ordin	ance? Yes No Unknown. Ti N F - PROPERTY OWNER (OR OWNER'S	he local official must certify this	
The property owner or owner's at	uthorized representative who completes Section and its section of the complete section and the c	rions A, B, C (items co.ii and ire The statements in S ection	s A. B. C. and E are correct to
the best of my knowledge.	iding-issued by E) of Ebrid AO Musicoign no	io. The diatements in events.	·
PROPERTY OWNER'S OR OWNER	'S AUTHORIZED REPRESENTATIVE'S NAME		
ADDRESS	CITY	STATE	ZIP CODE
	DATE	TELEPH	NIE .
SIGNATURE	UNIC		w/1 tap.
COMMENTS			l'
			Check here if attachments
	SECTION G - COMMUNITY INFOR	MATION (OPTIONAL)	Oreck held if diddwinents
The level efficient who is outhorized	by law or ordinance to administer the comm		t ordinance can complete
Sections A. B. C (or E), and G of the	his Elevation Certificate. Complete the appli	cable item(s) and sign below.	
G1. The information in Section	C was taken from other documentation that	t has been signed and emboss	ed by a licensed surveyor,
engineer, or architect who	o is authorized by state or local law to certify	elevation information. (Indica	te the source and date of the
elevation data in the Com	ments area below.)	- A forth and a FFNA incread a	community located REEL or
G2. A community official comp Zone AO.	pleted Section E for a building located in Zon	e A (Without a FEMA-ISSUED O	Community-Issued BFE) Of
	(Items G4-G9) is provided for community flo	odplain management purpose	S.
G4. PERMIT NUMBER	T G5. DATE PERMIT ISSUED	GB. DATE CERTIFICATE OF	
G4. PERWIT HOMBER	So. DATE LEATH 1000ED	ISSUED	
G7. This permit has been issued for	or: _ New Construction _ Substant		
	or (including basement) of the building is:		_ ft.(m) Datum: _ ft.(m) Datum:
G9. BFE or (in Zone AO) depth of			_ π.(m) Datum:
LOCAL OFFICIAL'S NAME		IIIE	
COMMUNITY NAME	TE	LEPHONE	
SIGNATURE	O.C. D/	ATE OLG (LOC)	
mani	セノ	10/24/02	7
COMMENTS			
			1 Ob 1- 1 15 - 14 - 15
7			Check here if attachments