FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

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

important: Read the instructions on pages 1 - 7. For Insurance Company Use: SECTION A - PROPERTY OWNER INFORMATION Policy Number BUILDING OWNER'S NAME Virgil G. & Judith A. Kalies Company NAIC Number BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 150 Balfour Street ZIP CODE STATE CITY FL 34145 MARCO ISLAND. PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 7, Block 786, A Replat Of Marco Beach Unit 25 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL SOURCE: GPS (Type) HORIZONTAL DATUM: LATITUDE/LONGITUDE (OPTIONAL) USGS Quad Map Other (##-##-### or ######) ☐ NAD 1927 ☐ NAD 1983 SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B3. STATE** B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2 COUNTY NAME** COLLIER MARCO ISLAND (120067) B9. BASE FLOOD ELEVATION(S) B8. FLOOD ZONE(S) R7 FIRM PANEL B6. FIRM INDEX DATE R4 MAP AND PANEL **B5 SUFFIX** (Zone AO, use depth of flooding) EFFECTIVE/REVISED DATE AF 7-20-98 NUMBER 10 08.03.92 120067-0812 E B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. Other (Describe): Community Determined □ FIRM ☐ FIS Profile ☐ NAVD 1988 ☐ Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: X NGVD 1929 B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes XI No Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) ☐ Finished Construction C1. Building elevations are based on: Construction Drawings* ☐ Building Under 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 - 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 Does the elevation reference mark used appear on the FIRM? Yes No Elevation reference mark used_ 10.1 ft.(m) License Number, Embossed Seal, Signature, and Date a) Top of bottom floor (including basement or enclosure) _. __ft.(m) □ b) Top of next higher floor Un Bull __. __ft.(m) c) Bottom of lowest horizontal structural member (V zones only) 8.1ft(m) d) Attached garage (top of slab) e) Lowest elevation of machinery and/or equipment 10.1ft(m) servicing the building 8. Oft.(m) f) Lowest adjacent grade (LAG) 8.9ft(m) g) Highest adjacent grade (HAG) h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 4 i) Total area of all permanent openings (flood vents) in C3h 512 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. LICENSE NUMBER 2422 CERTIFIER'S NAME Arthur Quinnell COMPANY NAME SUDHAKAR CO., INC. TITLE LAND SURVEYOR ZIP CODE STATE CITY ADDRESS

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SEE REVERSE SIDE FOR CONTINUATION

MARCO ISLAND

DATE

02.23.01

REPLACES ALL PREVIOUS EDITIONS

Screon #010186

EL TELEPHONE

(941) 389-9321

IMPORTANT: In these spaces, copy the corresponding information from Section	1 Δ		For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AN			Policy Number
			r oney realises
CITY	ATE	ZIPCODE	Company NAIC Number
SECTION D - SURVEYOR, ENGINEER, OR	ARCHITECT (SEPTIEICATION/CONTINUED	
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance age	CHARGE SERVICE CONTRACTOR CONTRACTOR	TOTAL TO BE THE THE STATE OF TH	
COMMENTS	rivozinpany, an	u (>) purang owner.	na mara ang alam dan garang ang ang ang ang ang ang ang ang ang
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SECTION E - BUILDING ELEVATION INFORMATION (SURVEY	NOT REQUIR	ED) FOR ZONE AO AND ZONE A	A (WITHOUT BFE)
or Zone AO and Zone A (without BFE), complete Items E1 through E4. <i>If the Elevation</i> (Certificate is inte	ended for use as supporting inform	ation for a LOMA or LOMR-F,
action C must be completed.			
Building Diagram Number _(Select the building diagram most similar to the building for	or which this ce	tificate is being completed – see p	ages 6 and 7. If no diagram accurate
represents the building, provide a sketch or photograph.)	Kanala and a second	and the second of the second o	* H . A / A . 4
2. The top of the bottom floor (including basement or enclosure) of the building isft.((m)in.(cm)		e) the highest adjacent grade.
 For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevate grade. 	n irxi. (eignago	ii u) oi ine outroungisit.(m)	in.(cm) above the highest adjacent
. For Zone AO only: If no flood depth number is available, is the top of the bottom floor	elevaled in arry	rdance with the criminalitie for	hlain managament antinance?
Yes No Unknown. The local official must certify this information in Sec	ction G.	nowno marak corariasing 3 accor	wan managament or on an are?
SECTION F - PROPERTY OWNER (OR OWN		SENTATIVE) CERTIFICATION	
he property owner or owner's authorized representative who completes Sections A, B, a	CONTRACTOR		munity-issued RFF) or Zone AO must
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SECTION G - COMMUNITY II	Manuscratter reservoir and reservoir	· · · · · · · · · · · · · · · · · · ·	
e local official who is authorized by law or ordinance to administer the community's flood	plain managem	ent ordinance can complete Secti	ons A, B, C (or E), and G of this Eleva
tificate. Complete the applicable item(s) and sign below.			
The information in Section C was taken from other documentation that has been si state or local law to certify elevation information. (Indicate the source and date of the source an	igned and embo	assed by a licensed surveyor, engi	neer, or architect who is authorized by
☐ A community official completed Section E for a building located in Zone A (without a	a CEMA issued	la in the Comments area below.) For community issued DEC\ or Zon	~ & ^ ^
☐ The following information (Items G4-G9) is provided for community floodplain mana	ar Enradoucu adement burbos	es	EAU.
4. PERMIT NUMBER G5. DATE PERMIT ISSUED			ettiinintilaaaliitiiseksi sekkiisissississi on kallaisista kallaisista kallaisista kallaisista kallaisista kal Milli III. Kallaisista kallaisissississi on kallaisista kallaisista kallaisista kallaisista kallaisista kallais
SU DATE PENANT ISSUED	The process of the contract of	G6. DATE CERTIFICATE OF COM	-LIANCE/OCCUPANCY ISSUED
This permit has been issued for: New Construction Substantial Improvement			
Elevation of as-built lowest floor (including basement) of the building is:		ft.(m)	Datum:
BFE or (in Zone AO) depth of flooding at the building site is:		ft.(m)	Datum:
ICAL OFFICIAL'S NAME	TITL		
OMMUNITY NAME	TELI	PHONE	
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