## ON: +#000533

## NATIONAL FLOOD INSURANCE PROGRAM

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

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κ.		Important: F	Read the	instructions on	pages 1 -	7.	
				TY OWNER INFO			For Insurance Company Use:
BUILDING OWNER'S NAME JAMES & INEZ HUDSO	N						Policy Number
BUILDING STREET ADDRES 1648 BARBAROSA COU	S (Including Apt JRT	., Unit, Suite, and/o	or Bldg. N	o.) OR P.O. ROUTE	AND BOX	NO.	Company NAIC Number
CITY MARCO TOTAND FLOR	T.D. A	\$	STATE		ZIP (	CODE	
MARCO ISLAND, FLOR PROPERTY DESCRIPTION (I	ot and Block No	umbers. Tax Parce	l Number	Legal Description	etc )		
LOT /, BLOCK 280, 1	MARCO BEAC	H, UNIT EIGH	HT		•		
BUILDING USE (e.g., Residen RESIDENTIAL	Itial, Non-residei	ntial, Addition, Acce	essory, et	c. Use Comments s	ection if ned	cessary.)	
LATITUDE/LONGITUDE (OPT ( ##° - ##' - ##.##" or ##.###		HORIZONTA NAD 1927	L DATU		OURCE: [	☐ GPS (Type ☐ USGS Qua	): d Map
	SECTIO	ON B - FLOOD I	VSURAI	CE RATE MAP (	FIRM) INF	ORMATION	
B1. NFIP COMMUNITY NAME	& COMMUNIT	Y NUMBER E	B2. COU	NTY NAME			33. STATE
MARCO ISLAND	120426	. [		COLLIER			FLORIDA
	35. SUFFIX	B6. FIRM INDEX		B7. FIRM PANEL	В	8. FLOOD	B9. BASE FLOOD ELEVATION(S
NUMBER 0812	E	DATE 07/20/98	EFFE	CTIVE/REVISED DA 08/03/92	ATE 2	ZONE(S) AE	(Zone AO, use depth of flooding) $10.0^{\dagger}$
310. Indicate the source of the	ne Base Flood		data or		entered in I		10.0
FIS Profile	FIRM	Community [	Determin	ed Other	(Describe)	): <i>*</i>	
111. Indicate the elevation da	atum used for	the BFE in B9: 🗵	] NGVD	1929 NAVD	1988	Other (Des	cribe):
112. Is the building located in	n a Coastal Ba	rrier Resources S	System (	CBRS) area or Ot	herwise P	rotected Area	a (OPA)? Yes No
Designation Date							
	SECTION	C - BUILDING EI	LEVATION	ON INFORMATIO	N (SURVE	Y REQUIRE	ED)
1. Building elevations are ba	ased on: 🔲 C	onstruction Draw	ings*	Building Unde	r Construc	ction* X	Finished Construction
pages 6 and 7. If no diag 3. Elevations – Zones A1-A Complete Items C3a-i be the datum used for the B	er 1 (Select the gram accurate 30, AE, AH, A elow according FE in Section ce provided or on/Comments used N/A De (including bas floor	building diagram ly represents the (with BFE), VE, ' to the building d' B, convert the da the Comments a ces the elevation ement or encloss	n most s building V1-V30, iagram s atum to t area of S referen ure)	imilar to the buildir i, provide a sketch V (with BFE), AR, specified in Item C hat used for the Bi section D or Section ce mark used approved the section B of	ng for which or photog, AR/A, AR 2. State the FE. Show on G, as an ear on the holds.	raph.) R/AE, AR/A1- e datum use field measur opropriate, to FIRM?	d. If the datum is different from ements and datum conversion document the datum conversion
e) Lowest elevation of servicing the building f) Lowest adjacent gragory g) Highest adjacent gragory h) No. of permanent of i) Total area of all perm	machinery an ng de (LAG) ade (HAG) penings (flood	vents) within 1 ft		10.10 ft.(m 6.10 ft.(m 7.40 ft.(m) adjacent grade N	) ) /A	License Number, Embossed Signature, and Date	DATE:07/12/00
	·			EER, OR ARCHIT		TIFICATION	j
his certification is to be sign							
certify that the information in understand that any false si	n Sections A, i	B, and C on this o	certificat	e represents my b imprisonment und	est efforts er 18 U.S.	to interpret to Code, Section	he data available.
	GENEVRINO				LICENSEN P.S.M.	∪MBER #4085	
TITLE PRESI	DENT			COMPANY NAME		SURVEYS	AND PLANNERS, INC.
DDRESS 171 C	OMMERCIAL	BLVD., STE.	12	CITY NAPLES		STATE FI	ZIP CODE
IGNATURE	to server and a	146		DATE JULY 12,	2000	TELEPHON	941-643-7510

IMPORTANT: In these sp	For Insurance Company Use:		
BUILDING STREET ADDRES	S (Including Apt., Unit, Suite, and/or Bldg. No.) C	OR P.O. ROUTE AND BOX NO.	Policy Number
CITY	STATE	ZIP CODI	E Company NAIC Number
SE	ECTION D - SURVEYOR, ENGINEER, OR A	ARCHITECT CERTIFICATION	 ON (CONTINUED)
	vation Certificate for (1) community official,		
COMMENTS			, i and (e) building extrem.
			Check here if attachment
	G ELEVATION INFORMATION (SURVEY		
	vithout BFE), complete Items E1 through E4	. If the Elevation Certificate i	is intended for use as supporting
	OMR-F, Section C must be completed. er _(Select the building diagram most simil	ar to the building for which th	is cortificate is being completed
pages 6 and 7. If no dia	agram accurately represents the building, pr	ovide a sketch or photograph	1.)
E2. The top of the bottom flo	por (including basement or enclosure) of the	building isft.(m)in.(c	cm) above or below (check one)
the highest adjacent gra	ade.		
	3-8 with openings (see page 7), the next high we the highest adjacent grade.	ner floor or elevated floor (ele	evation b) of the building is
	flood depth number is available, is the top	of the bottom floor elevated ir	a accordance with the community's
floodplain management	ordinance? Yes No Unknown.	The local official must certif	y this information in Section G.
······································	CTION F - PROPERTY OWNER (OR OWN	· · · · · · · · · · · · · · · · · · ·	
	er's authorized representative who complete	es Sections A, B, and E for Zo	one A (without a FEMA-issued or
community-issued BFE) or 2	Zone AU must sign here.		
PROPERTY OWNER'S OR OV	NNER'S AUTHORIZED REPRESENTATIVE'S N	AME	
ADDRESS	C	CITY	STATE ZIP CODE
SIGNATURE	D	ATE 1	TELEPHONE
COMMENTS			
			Check here if attachments
	SECTION G - COMMUNITY I		·
The local official who is author	orized by law or ordinance to administer the G of this Elevation Certificate. Complete the	community's floodplain mana	agement ordinance can complete
31. The information in Sec	ction C was taken from other documentation	s applicable item(s) and sign in In that has been signed and e	mbossed by a licensed surveyor
engineer, or architect	who is authorized by state or local law to co	ertify elevation information. (I	Indicate the source and date of the
	Comments area below.)		
<ol> <li>A community official c</li> <li>Zone AO.</li> </ol>	completed Section E for a building located in	i Zone A (without a FEMA-iss	ued or community-issued BFE) or
	tion (Items G4-G9) is provided for communi	tv floodplain management pu	rposes.
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		ATE OF COMPLIANCE/OCCUPANCY
		ISSUED	WE ST COM ENTINEED COOK THE T
	ued for: New Construction Substar		
	st floor (including basement) of the building th of flooding at the building site is:		•
LOCAL OFFICIAL'S NAME		ft.(	(m) Datum:
		TITLE	
COMMUNITY NAME		TELEPHONE	
SIGNATURE		DATE	
COMMENTS			
			Check here if attachments