FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

INSURANCE PROGRAM

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

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01236

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

	For Insurance Company Use:								
BUILDING OWNER'S NAME SHARON L. RUBENSTE	Policy Number								
BUILDING STREET ADDRESS 1650 BRIARWOOD COL		Company NAIC Number							
CITY			STATE	ZIP COD	E				
MARCO BEACH			FL 341						
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)									
LOT 7, BLOCK 81, MARCO BEACH UNIT THREE BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.)									
RESIDENTIAL	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM (##º - ## - ## ## or ## #####) NAD 1927 NAD				: GPS (Type): USGS Quad Map	Other:				
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION									
B1. NFIP COMMUNITY NAME	& COMMUNITY NUM	BER E	2. COUNTY NAME	B	3. STATE				
120067		(COLLIER	F	L				
B4. MAP AND PANEL NUMBER 120426/812	B5. SUFFIX	B6. FIRM INDEX DATE 7-20-98	B7. FIRM PANEL EFFECTIVE/REVISED DATE 6-3-86	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 10				
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									
D12. Is the building located in a			ELEVATION INFORMATION (SUR		Designation Date				
Of Dates designed									
C1. Building elevations are bas		•		Finished Construction					
*A new Elevation Certifica	•		iliding is complete. the building for which this certificate i	a baing campleted assume	ion 6 and 7. If no diagram				
• •	•	• •	the building for which this certificate i	s being will pleted - see pag	es o and r. In o 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									
					ne datum used for the BFE in				
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				,					
Datum Conversion									
	•	he elevation reference ma	ork used appear on the FIRM?	′es ⊠ No ┌	***************************************				
a) Top of bottom floor (11. 5 ft(m)	1					
b) Top of next higher floor			ft.(m)	ft.(m)					
c) Bottom of lowest horizontal structural member (V zones only)			ft.(m)	ft.(m)					
d) Attached garage (to	o of slab)		<u>8</u> . <u>5</u> ft.(m)	Embose and Dat					
a e) Lowest elevation of a	machinery and/or ed	quípment		π. e. m a					
servicing the building			<u>11</u> . <u>4</u> ft.(m)	mbe	11/1/C				
f) Lowest adjacent grade (LAG)			<u>8</u> . <u>3</u> ft.(m)	License Number, Signature,	MIME 5-28-02				
g) Highest adjacent gra			<u>8</u> . <u>5</u> ft.(m)	ense	FL. CERT NO. 4520				
☐ i) Total area of all permanent openings (flood vents) in C3h <u>720</u> sq. in. (sq. cm)									
	-	SECTION D - SURVEYO	OR, ENGINEER, OR ARCHITECT O	ERTIFICATION	6-29-01				
			ineer, or architect authorized by la		rmation.				
-			e represents my best efforts to in	•					
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.									
CERTIFIER'S NAME David B. Bruns LICENSE NUMBER 4520									
TITLE Surveyor				Bruns, Inc.	ZIP CODE				
ADDRESS 1072 6th. Avenue N.			CITY Naples	STATE FL	34102				
SIGNATURE /	1111		DATE	TELEPHO					
- 1U1 JU	nec		5-27-02						

IMPORTANT: In these spaces, co	For Insurance Company Use:			
BUILDING STREET ADDRESS (Includin	Policy Number			
CITY	STA	JE	ZIP CODE	Company NAIC Number
	SECTION D - SURVEYOR, ENGINEER, OR A	ARCHITECT CEI	RTIFICATION (CONTINUED)	
Copy both sides of this Elevation Ce	rtificate for (1) community official, (2) insurance agen			
COMMENTS				
SECTION E - B	UILDING ELEVATION INFORMATION (SURVEY I	NOT REQUIRED)) FOR ZONE AO AND ZONE	Check here if attachments
**************************************	E), complete Items E1 through E4. If the Elevation C			
Section C must be completed.				
E1. Building Diagram Number _(Sele represents the building, provide a	ct the building diagram most similar to the building fo sketch or photograph.)	r which this certifi	icate is being completed – see	pages 6 and 7. If no diagram accurately
	ing basement or enclosure) of the building is ft.(i	m)in.(cm) [_]	above or Delow (check c	one) the highest adjacent grade.
	enings (see page 7), the next higher floor or elevated	d floor (elevation b	o) of the building isft(m)_	in.(cm) above the highest adjacent
grade. E4. For Zone AO only: If no flood depi	th number is available, is the top of the bottom floore	elevated in accord	dance with the community's flo	odplain management ordinance?
	. The local official must certify this information in Sec	ction G.		
	SECTION F - PROPERTY OWNER (OR OWN			
The property owner or owner's authorsign here.	rized representative who completes Sections A, B, a	ind E for Zone A	(without a FEMA-issued or ∞i	mmunity-issued BFE) or Zone AO must
	AUTHORIZED REPRESENTATIVE'S NAME			
ADDRESS		CITY	STA	ATE ZIP CODE
SIGNATURE		DATE	TEI	LEPHONE
COMMENTS				
		The state of the s		Check here if attachments
	SECTION G - COMMUNITY II	NFORMATION (OPTIONAL)	Check here it attachments
The local official who is authorized by la	aw or ordinance to administer the community's floodp		·····	ctions A, B, C (or E), and G of this Elevation
Certificate. Complete the applicable ite	* * *			
	vas taken from other documentation that has been signation information. (Indicate the source and date of the	•		• •
	d Section E for a building located in Zone A (without a			
G3. The following information (Item	ns G4-G9) is provided for community floodplain mana	agement purpose	es.	
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		G6. DATE CERTIFICATE OF CO	OMPLIANCE/OCCUPANCY ISSUED
G7. This permit has been issued for:	New Construction Substantial Improvement			
G8. Elevation of as-built lowest floor (in	duding basement) of the building is:		fL(m)	Dalum:
G9. BFE or (in Zone AO) depth of flood	ling at the building site is:		,fL(m)	Datum:
LOCAL OFFICIAL'S NAME		TITLE		
COMMUNITY NAME		TELE	PHONE	
SIGNATURE (4)	Can -	DATE	6-3-02	
comments 3				
				Chook hara if attachments
			with a regular are are referred to when he we want at the blank has parent of any or a suggested as and place were the wide blank has	Check here if attachments