## 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 A. BUILDING OWNER'S NAME MR. AND MRS. WEINSTIEN BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 1472 BUTTERFIELD COURT ZIP CODE STATE CITY 34145 MARCO ISLAND PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 43, BLOCK 24, MARCO BEACH UNIT ONE, BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL SOURCE: GPS (Type): LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: ( ##° - ##' - ##.##" or ##.####") ☐ USGS Quad Map Other: ■ NAD 1927 ■ NAD 1983 SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME B3. STATE FLORIDA COLLIER COUNTY** MARCO ISLAND, 120426 **B7. FIRM PANEL** B8. FLOOD B9. BASE FLOOD ELEVATION(S) **B6. FIRM INDEX B4. MAP AND B5. SUFFIX** PANEL NUMBER EFFECTIVE/REVISED DATE ZONE(S) (Zone AO, use depth of flooding) DATE 120426 0804 JULY 20, 1998 JULY 20, 1998 AE 10 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. ☐ Community Determined Other (Describe): \_ ☐ FIS Profile ☑ FIRM 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 SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: ☐ Construction Drawings\* ☐ Building Under Construction Finished 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 a) Top of bottom floor (including basement or enclosure) 10 . 1 ft.(m) JOHN P. MALONEY License 20\_. 3 ft.(m) b) Top of next higher floor Number, Embossed LS#4493 c) Bottom of lowest horizontal structural member (V zones only) <u>NA</u>. \_ ft.(m) Seal, d) Attached garage (top of slab) <u>6</u>. <u>6</u> ft.(m) Signature, P. Malar and Date e) Lowest elevation of machinery and/or equipment 10 . 1 ft.(m) servicing the building 6.2 ft.(m) f) Lowest adjacent grade (LAG) g) Highest adjacent grade (HAG) \_8\_. 1 ft.(m) ▶ h) No. of permanent openings (flood vents) within 1 ft. above i) Total area of all permanent openings (flood vents) in C3h 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. CERTIFIER'S NAME JOHN P. MALONEY LICENSE NUMBER LS#4493 TITLE PROFESSIONAL SURVEYOR AND MAPPER COMPANY NAME WILSON MILLER ADDRESS 3200 BAILEY LANE, SUITE 200 CITY NAPLES STATE FLORIDA ZIP CODE 34105 TELEPHONE 941-649-4040 DATE 2/21/03 **SIGNATURE** 

CITY  SEC  Copy both sides of this Eleva	(Including Apt., Unit, Suite, and/or Bldg. No.)		<b>.</b>	For Insurance Company Use:
SEC Copy both sides of this Eleva		OR P.O. ROUTE AND	BOX NO.	Policy Number
Copy both sides of this Eleva	STATE		ZIP CODE	Company NAIC Number
Copy both sides of this Eleva	TION D - SURVEYOR, ENGINEER, OR	ARCHITECT CERT	IFICATION (CON	ITINUED)
FEMA maps used for this cer	tion Certificate for (1) community official	, (2) insurance ager	t/company, and (	3) building owner.
use.	tificate are dated prior to January 1, 200	0. FEMA maps dat	ed after January 1	, 2000 are not available for pub
COMMENTS REF: N-2691 PAG	E 18, N-2715, PAGE 12, 2N-119			
		***************************************		☐ Check here if attachmen
SECTION E - BUILDING	ELEVATION INFORMATION (SURVEY	NOT REQUIRED) I	FOR ZONE AO A	
For Zone AO and Zone A (with	out BFE), complete Items E1 through E	4. If the Elevation C	ertificate is intend	ded for use as supporting
E1. Building Diagram Number	MR-F, Section C must be completed(Select the building diagram most simiram accurately represents the building, p	lar to the building for	which this certific	cate is being completed – see
E2. The top of the bottom floor highest adjacent grade.	· (including basement or enclosure) of th	e building is _ ft.(m	) _in.(cm) 🔲 abo	ve or
	with openings (see page 7), the next high	pher floor or elevated	d floor (elevation b	o) of the building is
E4. For Zone AO only: If no flo	ood depth number is available, is the top dinance? ☐ Yes ☐ No ☐ Unknown	of the bottom floor	elevated in accord	dance with the community's
SECT	TION F - PROPERTY OWNER (OR OW	NER'S REPRESENT	ATIVE) CERTIFI	CATION
community-issued BFE) or Zo	_		nd E for Zone A (v	vithout a FEMA-issued or
	IER'S AUTHORIZED REPRESENTATIVE'S I			
ADDRESS		CITY	STATE	ZIP CODE
SIGNATURE		PATE	TELEPHO	NE
COMMENTS				
			(	Check here if attachments
	SECTION G - COMMUNITY I	NFORMATION (OP	TIONAL)	
he local official who is authoriz	ed by law or ordinance to administer the	community's floodp	lain management	ordinance can complete
ections A, B, C (or E), and G o	of this Elevation Certificate. Complete the	e applicable item(s)	and sign below.	
engineer, or architect wh	on C was taken from other documentation is authorized by state or local law to constant the contract of the co	n that has been sigr ertify elevation infor	ed and embossed mation. (Indicate	d by a licensed surveyor, the source and date of the
elevation data in the Co	npleted Section E for a building located in	n Zone A (without a	FEMA-issued or c	ommunity-issued BFE) or
Zone AO	(Items G4-G9) is provided for communi	ty floodplain manag	ement purposes.	
Zone AO.	, ,			
Zone AO.  3. The following information  G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE C	ERTIFICATE OF C	OMPLIANCE/OCCUPANCY
Zone AO.  3. The following information  34. PERMIT NUMBER  7. This permit has been issued	G5. DATE PERMIT ISSUED  I for: □ New Construction □ Substan	ISSUED tial Improvement	CERTIFICATE OF C	OMPLIANCE/OCCUPANCY
Zone AO.  3. The following information  34. PERMIT NUMBER  7. This permit has been issued  8. Elevation of as-built lowest f	G5. DATE PERMIT ISSUED  I for: New Construction Substantion (including basement) of the building	tial Improvement is:	_ft.(m)	Datum:
Zone AO.  3. The following information  34. PERMIT NUMBER  7. This permit has been issued  8. Elevation of as-built lowest f  9. BFE or (in Zone AO) depth of	G5. DATE PERMIT ISSUED  I for: □ New Construction □ Substan	ISSUED tial Improvement is:		
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Zone AO.  3. The following information  34. PERMIT NUMBER  7. This permit has been issued  8. Elevation of as-built lowest f  9. BFE or (in Zone AO) depth of  OCAL OFFICIAL'S NAME	G5. DATE PERMIT ISSUED  I for: New Construction Substantion (including basement) of the building	ISSUED tial Improvement is:  TITLE  TELEPHONE	_ft.(m)	Datum:
Zone AO.  3. The following information  34. PERMIT NUMBER  7. This permit has been issued  8. Elevation of as-built lowest f  9. BFE or (in Zone AO) depth of  OCAL OFFICIAL'S NAME	G5. DATE PERMIT ISSUED  I for: New Construction Substantion (including basement) of the building	ISSUED tial Improvement is: TITLE	_ft.(m)	Datum: