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. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: BUILDING OWNER'S NAME Policy Number ZULFIQAR A. KHANDWALLA BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 431 N. COLLIER BLVD. ZIP CODE STATE CITY 34145 MARCO ISLAND FL PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 4, BLOCK 228, MARCO BEACH UNIT SIX BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL LATITUDE/LONGITUDE (OPTIONAL) SOURCE: GPS (Type): HORIZONTAL DATUM: (##*-##*-####* or ########) NAD 1927 NAD 1983 USGS Quad Map ☐ Other SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NEIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME B3. STATE** COLLIER FL 120067 **B4 MAP AND PANEL B6 FIRM INDEX DATE B7 FIRMPANEL** B8, FLOOD ZONE(S) **B9. BASE FLOOD ELEVATION(S) B5. SUFFIX** EFFECTIVE/REVISED DATE NUMBER (Zone AO, use depth of flooding) 7-20-98 AE 120426/803 8-3-92 11 Ε 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: 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 🗌 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 Does the elevation reference mark used appear on the FIRM? Yes No Elevation reference mark used Embossed Seal, , and Date a) Top of bottom floor (including basement or enclosure) $11.1 \, \text{ft}(m)$ <u>N/A</u>.__ft.(m) b) Top of next higher floor C) Bottom of lowest horizontal structural member (V zones only) N/A. ft(m) □ d) Attached garage (top of slab) <u>7</u>. <u>9</u>ft.(m) e) Lowest elevation of machinery and/or equipment Auc Signature, License Number, 11.1ft(m) servicing the building 7.7ft.(m) f) Lowest adjacent grade (LAG) 4-8-02 8.1ft(m) g) Highest adjacent grade (HAG) FL. CERT NO. 4520 □ 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 230 sq. in. (sq. cm) SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION 7-25-01 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 4520 CERTIFIER'S NAME David B. Bruns COMPANY NAME Bruns & Bruns. Inc. TITLE Surveyor ZIP CODE CITY STATE ADDRESS

FEMA Form 81-31 AUG 99

1 he

1072 6th. Avenue N.

SIGNATURE

SEE REVERSE SIDE FOR CONTINUATION

Naples

DATE

4-08-02

REPLACES ALL PREVIOUS EDITIONS

FL

TELEPHONE

941-261-5965

34102

			2087
IMPORTANT: In these spaces, copy the corresponding information from Section			For Insurance Company Use
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bidg. No.) OR P.O. ROUTE Al			Policy Number
CITY S	TATE	ZIP CODE	Company NAIC Number
SECTION D - SURVEYOR, ENGINEER, OF	R ARCHITECT CERTIFIC	ATION (CONTINUED)	
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance age	ent/company, and (3) build	ling owner.	
COMMENTS			

			Check here if attachments
SECTION E - BUILDING ELEVATION INFORMATION (SURVE			
For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation	Certificate is intended for	use as supporting informa	tion for a LOMA or LOMR-F,
Section C must be completed.	for which this contificate is	haing completed	and C and 7. If no diagram accurately
E1. Building Diagram Number(Select the building diagram most similar to the building represents the building, provide a sketch or photograph.)	tor which this certificate is	being completed - see pa	ges 6 and 7. If no diagram accurately
E2. The top of the bottom floor (including basement or enclosure) of the building isf	ft.(m) in.(cm) 🗌 above	or Delow (check one)) the highest adiacent grade.
E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or eleval			
grade.			
E4. For Zone AO only: If no flood depth number is available, is the top of the bottom floo		with the community's flood	plain management ordinance?
Yes No Unknown. The local official must certify this information in S			
SECTION F - PROPERTY OWNER (OR OV			
The property owner or owner's authorized representative who completes Sections A, B sign here.	J, and E for Zone A (withou	It a FEMA-issued or comm	nunity-issued BFE) or Zone AO must
PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME			
		STATE	E ZIP CODE
ADDRESS	CITY		
SIGNATURE	DATE	TELEF	PHONE
COMMENTS			
			Check here if attachments
SECTION G - COMMUNITY	Y INFORMATION (OPTIO	NAL)	
The local official who is authorized by law or ordinance to administer the community's floc	odplain management ordir	ance can complete Sectio	ns A, B, C (or E), and G of this Elevatio
Certificate. Complete the applicable item(s) and sign below.			
G1. 🛄 The information in Section C was taken from other documentation that has been		• •	neer, or architect who is authorized by
state or local law to certify elevation information. (Indicate the source and date of			10
32. A community official completed Section E for a building located in Zone A (wilhou 33. The following information (Items G4-G9) is provided for community floodplain ma		nunity-issued BFE) or Zon	e AU.
G4. PERMIT NUMBER G5. DATE PERMIT ISSUED	G6. DA	ATE CERTIFICATE OF COM	PLIANCE/OCCUPANCY ISSUED
37. This permit has been issued for: New Construction Substantial Improveme	l		
38. Elevation of as-built lowest floor (including basement) of the building is:		ft.(m)	Datum:
G9. BFE or (in Zone AO) depth of flooding at the building site is:		ft.(m)	Datum:
LOCAL OFFICIAL'S NAME	TITLE		
COMMUNITY NAME	TELEPHONE		
A.A.I. 471.07	DATE	*1 - ·	
KMQIMitl	- 41	15/01	
COMMENTS			
			Check here if attachments