OMB No. 1660-0008 Expires February 28, 2009

	For Insurance Company Use:								
A1. Building Owner	Policy Number								
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 861 SOUTH COLLIER BOULEVARD						Company NAIC Number			
City MARCO IS	SLAND		State FL	ORIDA		ZIP Code 34145			
A3. Property Description (L LOT 3-6 BI	ot and Block Num OCK 341		r, Legal Description, RCO BEACH UNI						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) NON-RESIDENTIAL SOUTH CARPORT STORAGE UNITS									
A5. Latitude/Longitude: Lat						Datum: NAD 1927 NAD 1983			
A6. Attach at least 2 photog A7. Building Diagram Numl		ig if the Certificate is be	ing used to obtain flo	ood insurance.					
A8. For a building with a cra		ure(s), provide:		A9. For a b	ouilding with an attac	ched garage, provide:			
a) Square footage of c		a) Square footage of attached garage N/A sq ft b) No. of permanent flood openings in the attached garage							
b) No. of permanent fl enclosure(s) walls v	30			openings in the attached garage ove adjacent grade N/A					
c) Total net area of flo			3318 sq in		tal net area of flood				
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION									
B1. NFIP Community Name & Community Number CITY OF MARCO ISLAND 120426			32. County Name COLLIER			B3. State FLORIDA			
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRN Effective/Re		B8. Flood Zone(s	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)			
12021C 0811	G	11/17/05	11/1		AE	+12.3'			
B10. Indicate the source of the			·						
		Community Determined MGVD	***************************************	(Describe)	los as as				
B11. Indicate elevation datum B12. Is the building located in			herewal.		Other (Describe) (OPA)?	☐ Yes ■ No			
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date									
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)									
21. Building elevations are ba		Construction Drawings*	Bui	ding Under Con	struction*	Finished Construction			
*A new Elevation Certificate will be required when construction of the building is complete. 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 C2.a-g below									
according to the building of	Item A7.								
Benchmark Utilized Conversion/Comments				Vertical Datum	NC	GVD 1929			
Conversion/Comments				(Check the measureme	ent used			
a) Top of bottom floor (including basemen	crawl snace or enclos	ure flood	6.6		ters (Puerto Rico only)			
 a) Top of bottom floor (including basement, crawl space, or enc b) Top of the next higher floor 			urg nood	N/A	1 1	ters (Puerto Rico only)			
c) Bottom of the lowest horizontal structural member (V Zones)			v)	N/A		ters (Puerto Rico only)			
d) Attached garage (top of slab)				N/A	, , , , , , , , , , , , , , , , , , ,	ters (Puerto Rico only)			
e) Lowest elevation of machinery or equipment servicing the but (Describe type of equipment in Comments)			ing	<u>N/A</u>	feet met	ters (Puerto Rico only)			
f) Lowest adjacent (finis	-		<u></u>	6.1		ers (Puerto Rico only)			
g) Highest adjacent (fini	shed) grade (HAG)		***************************************	6.4	feet met	ers (Puerto Rico only)			
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION 10-19-07									
This certification is to be signed information. I certify that the information and that any false states.	nformation on this	Certificate represents m	y best efforts to inter	pret the data ave	ailable.	A			
Check here if comm	ante are providad o	n hack of form				. (7-			
Certifier's Name Antonio T	Licer	ise Number 29	982						
Title Professional Surve	yor & Mapper		Company	Name A.Trig o	&Associates, I	nc. 12/28/2007			
Address 2223 Trade Cen	ter Way	City Naples	State	Florida	ZIP Code 34109	(A) Trigo			
Signature		Date 12/28	3/07 Telepho	one (239) 594	1-8448	PLS No. 2982			

IMPORTANT: In these spaces,		For Insurance Company Use:							
Building Street Address (including Apt 861 South Collier Boulevard		Policy Number							
City MARCO ISLAND	State Florida	ZIP Code 3	34145	Company NAIC Number					
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)									
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.									
Comments									
21				•					
Signature	ANTONIO TRIGO, PLS Date	12/28/07		Check here if attachments					
SECTION E BUILDING ELE	VATION INFORMATION (SURVEY NOT R	EQUIRED) FOR ZONE	E AO AN	ND ZONE A (WITHOUT BFE)					
and C. For Items E1-I4 use natural grad E1. Provide elevation information for the lowest adjacent grade (LAG). a) Top of bottom floor (including b b) Top of bottom floor (including b b) Top of bottom floor (including b et al. a) Top of bottom floor (including b b) Top of bottom floor (including b et al. a) Top of bottom floor (including is et al. a) Attached garage (top of slab) is et al. Top of platform of machinery and/of et al. a) Zone AO only: If no flood depth in		o Rico only, enter meters, whether the elevation is about feet meters about feet meters about and/or 9 (see page 8 of Instellow the HAG, feet meters about and/or feet meters about accordance with the control of the feet meters about the feet	ove or belove or ve or cructions),	below the HAG. below the LAG. the next higher floor (elevation C2.b in below the HAG.					
SECTION	F - PROPERTY OWNER (OR OWNER'S F	REPRESENTATIVE) C	ERTIFIC	CATION					
The property owner or owner's authorized must sign here. <i>The statements in Sections</i> . Property Owner's Owner's Authorized	representative who completes Sections A, B, and E fo s A, B, and E are correct to the best of my knowledge. Representative's Name	r Zone A (without a FEMA	-issued or	community-issued BFE) or Zone AO					
	*		······································	ZIP Code					
Address	City		tate elephone	Zir Code					
Signature	Date		стерноне						
				Check here if attachments					
	SECTION G - COMMUNITY INFORM								
The local official who is authorized by law of Elevation Certificate. Complete the applical	or ordinance to administer the community's floodplain ble item(s) and sign below. Check the measurement us	management ordinance can ed in Items G8. and G9.	complete	Sections A, B, C (or E), and G of this					
31. The information in Section C was	s taken from other documentation that has been signed on. (Indicate the source and date of the elevation data	and sealed by a licensed sur	rveyor, eng	gineer, or architect who is authorized by					
· ·	Section E for a building located in Zone A (without a I			FE) or Zone AO.					
33. The following information (Items	s G4G9.) is provided for community floodplain mana	gement purposes.							
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate O	f Complia	ance/Occupancy Issued					
G7. This permit has been issued for:	New Construction Substantial Improv	ement							
68. Elevation of as-built lowest floor (include	•		ters (PR)	Datum					
69. BFE or (in Zone AO) depth of flooding	at the building site:	feet me	ters (PR)	Datum					
Local Official's Name	Title								
Community Name	Tele	phone							
Signature	Date								
Comments									
				Check here if attachements					

FEMA Form 81-31, February 2006

Replaces all previous editions