ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certifi	cate and all attachments for (1) community official (2) insurance agent/company	and (3) building owner
			z_1 insulance agent/company,	and (0) building owner.

SECTION A – PROPERTY INFORMATION							RANCE COMPANY USE
A1. Building Owner's Name Policy Number: MARCO BEACH VACATION SUITES, LLC.						iber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number:							VAIC Number:
	Box No. 901 S COLLIER BLVD						
City							
MARCO ISLAN				Florida		34145	
		nd Block Numbers, Ta EACH CLUB OF MAF				,	
A4. Building Use (e.g., Resider	ntial, Non-Residential,	Addition,	, Accessory,	etc.)RESIDEN	TIAL	
A5. Latitude/Longit	tude: Lat. 2	5°54'48.38070" N	Long. 8	1°43'35.5691	5" W Horizonta	I Datum: 🗌 NAD	1927 🗙 NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being ι	ised to obtain floo	d insurance.	
A7. Building Diagra	am Number	6					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawl	space or enclosure(s)			660.00 sq ft		
b) Number of p	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foo	t above adjacent gr	ade N/A
c) Total net ar	ea of flood o	penings in A8.b		N/A sq ir	I		
d) Engineered	flood openir	ngs? 🗌 Yes 🗵 N	No				
A9. For a building v	vith an attach	ned garage:					
a) Square foot	age of attach	ned garage		N/A sq ft			
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A							
c) Total net are	ea of flood op	penings in A9.b		N/A sq	in		
d) Engineered	flood openin	lgs? □Yes ⊠ N	No				
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Community Name & Community Number B2. County Name B3. State							
CITY OF MARCO I	SLAND			COLLIER C	OUNTY		Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/	B8. Flood Zone(s)	B9. Base Flood B (Zone AO, us	Elevation(s) se Base Flood Depth)
12021C/0836	н	05-16-2012	05-16-2	vised Date 2012	AE	10.0'	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:							
☐ FIS Profile FIRM Community Determined Other/Source:							
B11. Indicate elevation datum used for BFE in Item B9: 🗌 NGVD 1929 🛛 NAVD 1988 🔲 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🔀 No							
Designation Date: CBRS OPA							

ELEVATION CERTIFICATE	OMB No. 1660-0008 Expiration Date: November 30, 2022		
IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., U 901 S COLLIER BLVD	nit, Suite, and/or Bldg. No.) o	or P.O. Route and Box No.	Policy Number:
City State ZIP Code			Company NAIC Number
MARCO ISLAND	Florida	34145	
SECTION C -	BUILDING ELEVATION IN	NFORMATION (SURVEY	REQUIRED)
C1. Building elevations are based on: *A new Elevation Certificate will be	•	of the building is complete.	
C2. Elevations – Zones A1–A30, AE, Al Complete Items C2.a–h below acco	ording to the building diagram	specified in Item A7. In Pu	
Benchmark Utilized: <u>1165-72</u>		cal Datum: <u>NAVD88</u>	
Indicate elevation datum used for th	,	ugh h) below.	
☐ NGVD 1929 ⊠ NAVD 1 Datum used for building elevations		ed for the BEE	
Datum used for building clevations			Check the measurement used.
a) Top of bottom floor (including ba	sement, crawlspace, or enclo	osure floor)	5.9 🛛 feet 🗌 meters
b) Top of the next higher floor			16.9 🔀 feet 🗌 meters
c) Bottom of the lowest horizontal s	structural member (V Zones o	only)	N/A feet meters
d) Attached garage (top of slab)			N/A feet meters
 e) Lowest elevation of machinery of (Describe type of equipment and 	16.9 🗙 feet 🗌 meters		
f) Lowest adjacent (finished) grade	5.1 × feet meters		
g) Highest adjacent (finished) grade next to building (HAG)			5.7 × feet meters
 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 			N/A feet meters
SECTION D	- SURVEYOR, ENGINEER	R, OR ARCHITECT CERT	FIFICATION
This certification is to be signed and sea I certify that the information on this Certi statement may be punishable by fine or	ficate represents my best effe	orts to interpret the data av	d by law to certify elevation information. ailable. I understand that any false
Were latitude and longitude in Section A	provided by a licensed land	surveyor? 🛛 Yes 🗌 N	
Certifier's Name JOHN J. HILTON	License N LS 6278	umber	
Title			Inthe Office of the
PROFESSIONAL SURVEYOR AND MA	PPER		sense wumber
Company Name HOLE MONTES, INC.			6278 G278
Address 950 ENCORE WAY			FLORIDA
	ally signed State Shn Hilton Florida	ZIP Code 34110	Professional Surveyor and Surve
	: 2022.08.10 Date 0:28 -04'00' ⁰⁸⁻⁰⁹⁻²⁰²	Telephone 22	Ext.
Copy all pages of this Elevation Certificate	and all attachments for (1) co	ommunity official, (2) insuran	ce agent/company, and (3) building owner.
Comments (including type of equipment	and location, per C2(e), if ap	plicable)	
C2e.) HOT WATER TANKS ON 2ND FL	OOR		

OMB No.	1660-0008
Expiratior	Date: November 30, 2022

ELEVATION CERTIFICATE	Expiration Date: November 30, 2022					
IMPORTANT: In these spaces, copy the correspor	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, a 901 S COLLIER BLVD	nd/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:			
City MARCO ISLAND	State Florida	ZIP Code 34145	Company NAIC Number			
SECTION E – BUILDING E FOR ZO		FORMATION (SURVEY NO ONE A (WITHOUT BFE)	OT REQUIRED)			
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B,and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.						
 E1. Provide elevation information for the following an the highest adjacent grade (HAG) and the lowes a) Top of bottom floor (including basement, 			ther the elevation is above or below			
crawlspace, or enclosure) is b) Top of bottom floor (including basement,			eters above or below the HAG.			
crawlspace, or enclosure) is E2. For Building Diagrams 6–9 with permanent floor	l openings provi		eters above or below the LAG. /or 9 (see pages 1–2 of Instructions),			
the next higher floor (elevation C2.b in the diagrams) of the building is		feet 🗌 me	eters above or below the HAG.			
E3. Attached garage (top of slab) is		feet me	eters above or below the HAG.			
E4. Top of platform of machinery and/or equipment servicing the building is		feet me	eters 🗌 above or 🗌 below the HAG.			
E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.						
SECTION F – PROPERTY O	WNER (OR OW	NER'S REPRESENTATIVE)	CERTIFICATION			
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.						
Property Owner or Owner's Authorized Representativ	ve's Name					
Address		City	State ZIP Code			
Signature		Date	Telephone			
Comments						
			Check here if attachments.			

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 901 S COLLIER BLVD				Policy Number:			
City State ZIP Code				Company NAIC Number			
MARCO ISLAND	Florida	34145					
		Y INFORMATION (OPTIC					
Sections A, B, C (or E), and G of this Elevation	The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.						
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation						
G2. A community official completed Section or Zone AO.	on E for a building lo	ocated in Zone A (without	a FEMA	A-issued or community-issued BFE)			
G3. The following information (Items G4-	G10) is provided for	community floodplain ma	inageme	ent purposes.			
G4. Permit Number	G5. Date Permit Is	ssued		Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for:] New Construction	Substantial Improvem	ient				
G8. Elevation of as-built lowest floor (including of the building:	g basement)		🗌 feet	meters			
G9. BFE or (in Zone AO) depth of flooding at	the building site:		feet	meters Datum			
G10. Community's design flood elevation:			feet	meters Datum			
Local Official's Name		Title					
Community Name Telephone							
Signature Date							
Comments (including type of equipment and loo	Comments (including type of equipment and location, per C2(e), if applicable)						
				Check here if attachments.			

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
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City MARCO ISLAND	State Florida	ZIP Code 34145	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One Caption FRONT VIEW 8/4/2022

<image><caption>

Photo Two Caption REAR VIEW 8/4/2022

Clear Photo One

ELEVATION CERTIFICATE		IOTOGRAPHS ation Page	OMB No. 1660-0008 Expiration Date: November 30, 2022
IMPORTANT: In these spaces, copy the co	rresponding informat	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, 901 S COLLIER BLVD	. Policy Number:		
City MARCO ISLAND	State Florida	ZIP Code 34145	Company NAIC Number
			F
	Phot	o Three	

Photo Three Caption RIGHT SIDE VIEW 8/4/2022

