

BUILDING OWNER'S NAME

Louis & Linda Oakman

Lot 9, Block 60, Marco Beach Unit 2

I ATITUDE/LONGITUDE (OPTIONAL)

(##P - ## - ## ## Or ## ####P)

MARCO ISLAND (120426)

B4. MAP AND PANEL

NUMBER

120426-0804

Datum Conversion/Comments

a) Top of bottom floor (including basement or enclosure)

a e) Lowest elevation of machinery and/or equipment

a c) Bottom of lowest horizontal structural member (V zones only)

Elevation reference mark used

☐ b) Top of next higher floor

d) Attached garage (top of slab)

FIS Profile

B5 SUFFIX

n

⊠ FIRM

153 Dan River Court

MARCO ISLAND

Residential

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077

Expires July 31, 2002 **ELEVATION CERTIFICATE** important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use. Policy Number Company NAIC Number BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. STATE ZIP CODE 34145 FL PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) HORIZONTAL DATUM SOURCE: GPS (Type) ☐ NAD 1927 ☐ NAD 1983 ☐ Other ☐ USGS Quad Map SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B3 STATE **B2. COUNTY NAME** B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER COLLIFR FI B8 FLOOD ZONE(S) B9. BASE FLOOD ELEVATION(S) **B7. FIRM PANEL B6. FIRM INDEX DATE** 07-20-98 EFFECTIVE/REVISED DATE (Zone AO, use depth of flooding) 06-03-86 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. Other (Describe): Community Determined □ NAVD 1988 □ Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: X NGVD 1929 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) ☐ Building Under Construction* C1. Building elevations are based on: Construction Drawings* □ 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.

 e) Lowest elevation of machinery and/or equipment 			
servicing the building	<u>10</u> . <u>1</u> ft.(m)	Number	
f) Lowest adjacent grade (LAG)	7. 8ft (m)		
☐ g) Highest adjacent grade (HAG)	<u>8</u> . <u>1</u> ft.(m)	icense 5	12-14-04
h) No. of permanent openings (flood vents) within 1 ft. above adj	acent grade 2	<u> </u>	101101
 i) Total area of all permanent openings (flood vents) in C3h 1152 	(sq in. (sq cm)		
SECTION D - SURV	EYOR, ENGINEER, OR ARCHITECT CERTIFIC	10-30-03	
This certification is to be signed and sealed by a land surveyor, a land continuous certify that the information in Sections A, B, and C on this certify lunderstand that any false statement may be punishable by fine	icate represents my best efforts to interpret to or imprisonment under 18 U.S. Code, Section	he data available. on 1001.	aation.
CERTIFIER'S NAME Ronald W. Walling	LICENSE NUMBER 6473		
TITLELand Surveyor	COMPANY NAME South Collier Surveying		
ADDRESS PO BOX 1896 SIGNATURE	CITY MARCO ISLAND DATE 12-13-04	STATE FL TELEPHON 72391-393-2	
1700.000			

Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No

10.1 ft(m) <u>NA</u>.__ft.(m)

N/A._ft(m)

7.9ft(m)

Hoy73

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IMPORTANT: In these spaces, copy the corresponding information from Section A				For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., U	nit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND I	BOX NO.		Policy Number
СПУ	STAT	Œ	ZIP CODE	Company NAIC Number
SS.	CTION D - SURVEYOR, ENGINEER, OR AI	RCHITECT CER	TIFICATION (CONTINUED)	in ender the state of the state
Copy both sides of this Elevation Certificate	for (1) community official, (2) insurance agent/	/company, and (3) building owner.	aberianiste en de seu belas eta del sete de la mente en de la mente della ment
COMMENTS				
			eura na carantenense a de salo salvana e mana na carante de de de la mana de la ciencia carante de la del ciencia carante del ciencia cara	
				Check here if attachments
SECTION E - BUILDING	GELEVATION INFORMATION (SURVEY N	IOT REQUIRED	FOR ZONE AO AND ZONE	A (WITHOUT BFE)
For Zone AO and Zone A (without BFE), comp	olete Items E1 through E4. If the Elevation Ce	ertificate is intend	ed for use as supporting infor	nation for a LOMA or LOMR-F,
Section C must be completed.				
E1. Building Diagram Number _(Select the bu		which this certific	ate is being completed - see	pages 6 and 7. If no diagram accurately
represents the building, provide a sketch of E2. The top of the bottom floor (including base	, , ,	a) in (cm) [7] :	shoup or 17 holow/chock o	na) the highest enforcent grade
E3. For Building Diagrams 6-8 with openings (
grade.	pogo 1, alo nortigi in non al orotecon	man fores months	y or a second se	and the state of t
E4. For Zone AO only: If no flood depth numb	er is available, is the top of the bottom floor ele	evated in accord	ance with the community's floo	odplain management ordinance?
the state of the s	cal official must certify this information in Secti	TO THE PROPERTY OF THE PROPERT	innesi nese nun quanta i sanin kini en na mona y mataki katennesi katennesi katennesi kota inna atau atau atau	
	CTION F - PROPERTY OWNER (OR OWNE	POPULAR PRODUCTION AND A PROPERTY OF A	CONTRACTOR DE CONTRACTOR D	
The property owner or owner's authorized re sign here.	oresentative who completes Sections A, B, ar	nd E for Zone A (without a FEMA-issued or cor	nmunity-issued BFE) or Zone AO must
PROPERTY OWNER'S OR OWNER'S AUTHOR	IZED REPRESENTATIVE'S NAME			
ADDRESS		CITY	CT/	ATE ZIP CODE
SIGNATURE		DATE	TEL	EPHONE .
COMMENTS				
	SECTION G - COMMUNITY IN	ECODMATION //	VOTI/NAI \	Check here if attachments
	BUTTERS SERVICE SERVIC	THE STREET CHARLES AND A SHIPTER OF THE STREET		of this Elevation
The local official who is authorized by law or or Certificate. Complete the applicable item(s) ar		xammanayaner	it ordinance can compete set	ZOISA, B, C (OI E), AND G OI INS Elevation
G1. The information in Section C was take	-	med and embos	sed by a licensed surveyor, en	naineer, or architect who is authorized by
	formation. (Indicate the source and date of th			
G2. A community official completed Section	*		*	one AO.
G3. The following information (Items G4-G	is provided for community floodplain manage	gement purpose:	3.	
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	***	36. DATE CERTIFICATE OF CO	OMPLIANCE/OCCUPANCY ISSUED
G7. This permit has been issued for: 🔲 New	Construction Substantial Improvement			The state of the s
G8. Elevation of as-built lowest floor (including			ft.(m)	Datum:
G9. BFE or (in Zone AO) depth of flooding at the	ne building site is:			Datum:
LOCAL OFFICIAL'S NAME		TITLE		
COMMUNITY NAME	<i>\$</i>	TELER	HOVE	
SIGNATURE	2/	DATE	12-16-4	
COMMENTS				
		***************************************		Clobadalana Xaundana ta
				Check here if attachments