002621

EEMA Form 81-31 IIII 00

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires July 31, 2002

REPLACES ALL PREVIOUS EDITIONS

ELEVATION CERTIFICATE Important: Read the instructions on pages 1 - 7. For Insurance Company Use: SECTION A - PROPERTY OWNER INFORMATION Policy Number BUILDING OWNER'S NAME Jury BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 745 Fairlawn Court ZIP CODE STATE CITY 34145 FLMarco Island PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 9, Block 25, Marco Beach Unit 1 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) residential SOURCE: HORIZONTAL DATUM: LATITUDE/LONGITUDE (OPTIONAL) | NAD 1983 USGS Quad Map I NAD 1927 (##° - ##" - ##.##" or ##.####") SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B3. STATE B2. COUNTY NAME** B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Florida Collier 120426 City of Marco B8. FLOOD B9. BASE FLOOD ELEVATION(S) **B6. FIRM INDEX B7. FIRM PANEL B4. MAP AND PANEL B5. SUFFIX** ZONE(S) (Zone AO, use depth of flooding) EFFECTIVE/REVISED DATE DATE NUMBER +10.0' AΕ 7/20/98 7/20/98 D 120426 0804 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. Other (Describe): Community Determined |x|FIRM | FIS Profile 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 **Designation Date:** SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) |x_|Finished Construction | |Building Under Construction* C1. Building elevations are based on: L_IConstruction Drawings* *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 C3.a-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. Conversion/Comments Elevation reference mark used site BM a) Top of bottom floor (including basement or enclosure) 10. 1 ft.(n)) PSM NO. LS 2982 ft.(m) November 15, 2000 □ b) Top of next higher floor ft.(m) ☐ c) Bottom of lowest horizontal structural member (V zones only) 90 ft.(nh) ☐ d) Attached garage (top of slab) ☐ e) Lowest elevation of machinery and/or equipment A/C pad 10.0 ft.(nx) servicing the building (Describe in a Comments area.) ft.(nN) ☐ f) Lowest adjacent (finished) grade (LAG) 0_ft.(nÞ\$) g) Highest adjacent (finished) grade (HAG) h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade □ i) Total area of all permanent openings (flood vents) in C3.h 380 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. LICENSE NUMBER CERTIFIER'S NAME Antonio Trigo COMPANY NAME & Associates, Inc. Professional Surveyor & Mapper Trigo CIT Naples Trade Center FEETHONS 4-8448 SIGNATURE 10/2/01

_			
IMPORTANT: In these spaces, copy the corresponding information from Section A. BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.			For Insurance Company Use:
BUILDING STREET ADDRESS (Incluing 745 Fairlawn Co		S.O. ROUTE AND BOX NO.	Policy Number
CITY	STATE	ZIP CODE	Company NAIC Number
Marco Island	FL	34145	A
	I D - SURVEYOR, ENGINEER, OR AR		
•	Certificate for (1) community official, (2)	insurance agent/company, and (3) building owner.
COMMENTS			3.
			1 Charle bara if attachments
OFOTION F. BUILDING ELE	VATION INFORMATION (SURVEY NO	T REQUIRED) FOR ZONE AO A	Check here if attachments
	BFE), complete Items E1. through E4.		
information for a LOMA or LOMR-F		If the Elevation certificate is inter-	aca for acc ac capporting
E1. Building Diagram Number	(Select the building diagram most sir	milar to the building for which this o	certificate is being completed -
see pages 6 and 7. If no diagra	am accurately represents the building, (provide a sketch or photograph.)	
	luding basement or enclosure) of the bu		n.(cm) above or below
(check one) the highest adjace	nt grade. (Use natural grade, if availab openings (see page 7), the next higher	ile.) r floor or elevated floor (eleviation h	a) of the building is
I I I ft (m) I I lin.(cm) abo	ove the highest adjacent grade. Compl	lete Items C3.h and C3.i on front o	of form.
E4. For Zone AO only: If no flood d	depth number is available, is the top of t	he bottom floor elevated in accord	lance with the community's
floodplain management ordina	nce? Yes No Unknown	 The local official must certify this 	s information in Section G. 💎 😓
	F - PROPERTY OWNER (OR OWNE		
The property owner or owner's aut	thorized representative who completes	Sections A, B, C (Items C3.h and	C3.i only), and E for Zone A
(without a FEMA-issued or commute the best of my knowledge.	unity-issued BFE) or Zone AO must sign	n nere. The statements in Section	S A, B, C, and E are correct to
PROPERTY OWNER'S OR OWNER'S	S AUTHORIZED REPRESENTATIVE'S NAM	AE	
ADDRESS CITY STAT		Y STATE	ZIP CODE
	DAT	E TELEPH	ONE
SIGNATURE			
COMMENTS			
			Check here if attachments
	SECTION G - COMMUNITY INF	ORMATION (OPTIONAL)	Oncok horo ii diadiiinonio
The local official who is authorized by	by law or ordinance to administer the co		nt ordinance can complete
Sections A. B. C (or E), and G of thi	s Elevation Certificate. Complete the a	applicable item(s) and sign below.	
G1. The information in Section	C was taken from other documentation	that has been signed and emboss	ed by a licensed surveyor,
	is authorized by state or local law to ce	rtify elevation information. (Indica	te the source and date of the
elevation data in the Comm	nents area below.) eted Section E for a building located in .	Zone A (without a FFMA-issued o	r community-issued RFF) or
Zone AO.	sted Section Librar building located in	20110 / (Without a 1 EM/ 100400 0	Sommariney reduced 2. 2, c.
	tems G4-G9) is provided for community	y floodplain management purpose	s.
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF	
	- ·	ISSUED	
G7. This permit has been issued for	\$	tantial Improvement	ft (m) Datum:
G8. Elevation of as-built lowest flool G9. BFE or (in Zone AO) depth of fl	r (including basement) of the building is	•	ft.(m)
•		TITLE	
LOCAL OFFICIAL'S NAME			
COMMUNITY NAME		TELEPHONE	
SIGNATURE		DATE	
COMMENTS		10[8]01	K ²
		· .	I Check here if attachments
