

## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

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

DEDLACES ALL BREVIOUS EDITION

## **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 Company NAIC Number BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Green **ZIP CODE** 101 Greenview Street 34145 FL CITY Marco Island, PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 7, Block 104, Marco Beach Unit 3.

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) SOURCE: Residential HORIZONTAL DATUM: LATITUDE/LONGITUDE (OPTIONAL) USGS Quad Map \_\_\_\_ NAD 1983 NAD 1927 ( ##° - ##' - ##.##" or ##.####") SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B3. STATE B2. COUNTY NAME** B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER FL Collier 120426 City of Marco B9. BASE FLOOD ELEVATION(S) B8. FLOOD **B7. FIRM PANEL B6. FIRM INDEX** (Zone AO, use depth of flooding) **B5. SUFFIX** ZONE(S) R4 MAP AND PANEL EFFECTIVE/REVISED DATE DATE NUMBER +10.0 AΕ 7/20/98 7/20/98 D 0804 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. 120426 U Other (Describe): Community Determined B11. Indicate the elevation datum used for the BFE in B9: [X | NGVD 1929 |\_\_| NAVD 1988 |\_\_| Other (Describe): X FIRM 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) X |Finished Construction |Building Under Construction\* C1. Building elevations are based on: Construction Drawings\* \*A new Elevation Certificate will be required when construction of the building is complete.  $rac{1}{2}$  (Select the building diagram most similar to the building for which this certificate is being completed - sec C2. Building Diagram Number \_\_\_ 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 Does the elevation reference mark used appear on the FIRM? 」Yes [X]N∈ Datum Elevation reference mark used\_ site BM ft.(m) ☐ a) Top of bottom floor (including basement or enclosure) PSM LS/NO/2982 ft.(m) □ b) Top of next higher floor ft.(m) ☐ c) Bottom of lowest horizontal structural member (V zones only) ft.(ntx) ☐ d) Attached garage (top of slab) January 5, 2 May 26, 2001 2001 ☐ e) Lowest elevation of machinery and/or equipment A/C pad 26, Ma/y 10 .0 ft.(ng) servicing the building (Describe in a Comments area.) ft.(ržO ☐ f) Lowest adjacent (finished) grade (LAG) 8\_ft.(ng) ☐ g) Highest adjacent (finished) grade (HAG) ☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade  $\Box$  i) Total area of all permanent openings (flood vents) in C3.h  $\underline{524}$ 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. 2982 CERTIFIER'S NAME Antonio Trigo COMPANY NAME Trigo and Associates TITLE Professional Surveyor and Mapper STATE CITY **ADDRESS** Naples TELEPHONE Way 223 DAME y 2001 26 594-8448 (941)SIGNATURE

IMPORTANT: III tilese space	s, copy the corresponding inton	mauvn nvn	OCCUOITA,	
	ncluding Apt., Unit. Suite, and/or Bldg. N			Policy Number
101 Greenview St	reet		710 000	DE Company NAIC Number
CITY	STAT	FL	ZIP COI 34145	DE Company NAIC Number
Marco Island,	ON D - SURVEYOR, ENGINEER,			ONTINUED)
	on Certificate for (1) community offi			
COMMENTS	——————————————————————————————————————	Cai, (2) msu	rance agentoonpuny, un	a (b) banding owner.
COMMENTS				
				Check here if attachmen
	LEVATION INFORMATION (SUR			
For Zone AO and Zone A (witho	ut BFE), complete Items E1. throu	gh E4. If the	Elevation Certificate is in	tended for use as supporting
information for a LOMA or LOMI	R-F, Section C must be completed(Select the building diagram	maat similar	to the building for which th	nie certificate is being completed
=1. Building Diagram Number _	agram accurately represents the bu	uildina provi	de a sketch or photograph	1.)
=2 The top of the bottom floor (i	including basement or enclosure)	of the buildin	a is       ft.(m)	lin.(cm)    above or    below
	acent grade. (Use natural grade, if			
	vith openings (see page 7), the nex		r or elevated floor (elevation	on b) of the building is
	above the highest adjacent grade.	Complete I	tems C3.h and C3.i on froi	nt of form.
	d depth number is available, is the	top of the be	ottom floor elevated in acc	cordance with the community's
floodplain management ordi				this information in Section G.
	ON F - PROPERTY OWNER (OR			
The property owner or owner's	authorized representative who con	npletes Sect	ions A, B, C (Items C3.h a	ind C3.i only), and E for Zone A
•	nmunity-issued BFE) or Zone AO m	nust sign ner	e. The statements in Sect	tions A, B, C, and E are correct to
the best of my knowledge. PROPERTY OWNER'S OR OWNE	R'S AUTHORIZED REPRESENTATIV	E'S NAME		
			STAT	E ZIP CODE
ADDRESS	•	CITY	STAT	E ZIP CODE
SIGNATURE		DATE	TELE	PHONE
COMMENTS				
				Check here if attachment
	SECTION G - COMMUN	ITY INFORM	MATION (OPTIONAL)	
he local official who is authorize	ed by law or ordinance to administe	er the commu	ınity's floodplain managen	nent ordinance can complete
Sections A, B, C (or E), and G of	this Elevation Certificate. Comple	te the applic	able item(s) and sign belo	ow.
31.   The information in Section	on C was taken from other docume	ntation that I	has been signed and emb	ossed by a licensed surveyor,
	ho is authorized by state or local la	w to certify e	elevation information. (Ind	icate the source and date of the
elevation data in the Co	mments area below.)	_1 _ 1 ' <b>7</b>	A Cuithaut a FFMA Issue	d as assembly issued PEE) or
•	npleted Section E for a building loca	ated in Zone	A (WITHOUT & FEMA-ISSUE	b or community-issued BFE) of
Zone AO.	n (Items G4-G9) is provided for con	nmunity floo	dolain management purpo	oses.
•				OF COMPLIANCE/OCCUPANCY
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		ISSUED	OF COMPEDITOR COOK A CO.
7. This permit has been issued	for: New Construction	Substantia	il Improvement	
	oor (including basement) of the bui			ft.(m) Datum:
69. BFE or (in Zone AO) depth of		-		ft.(m) Datum:
LOCAL OFFICIAL'S NAME		TITI	Œ	
		TEI	EPHONE	
COMMUNITY NAME		IEL	EFFIONE	
SIGNATURE VIALAL AC		DAT	E, LUCI	
COMMENTS COMMENTS			6/4/01	
				Check here if attachments