#003114

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

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

DEDLACES ALL BOEVIOUS 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. ZIP CODE 340 Hazelcrest Court STATE CITY 34145 FLPROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 13, Block 290, Marco Beach Unit 8
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential SOURCE: | GPS Type): HORIZONTAL DATUM: LATITUDE/LONGITUDE (OPTIONAL) USGS Quad Map ___ NAD 1983 I NAD 1927 ##° - ##' - ##.##" or ##.####") SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B3. STATE B2. COUNTY NAME** B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER 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** B4, MAP AND PANEL ZONE(S) EFFECTIVE/REVISED DATE DATE NUMBER +10.0' 7/20/98 7/20/98 0812 120426 310. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. Other (Describe): Community Determined X FIRM 311. 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 X No 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. C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - se 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? [Datum Elevation reference mark used site BM 10 .41 fl.(m) a) Top of bottom floor (including basement or enclosure) fL(m) PSM LS NO 2982 ☐ b) Top of next higher floor fL(m) ☐ c) Bottom of lowest horizontal structural member (V zones only) ft.(m) 15, 2001 Január d) Attached garage (top of slab) ☐ e) Lowest elevation of machinery and/or equipment A / C pad 10 0 ft (mx) servicing the building (Describe in a Comments area.) 2001 May R 3_fL(cox) ☐ f) Lowest adjacent (finished) grade (LAG) . 0 ft.(mx) ☐ 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 432 sq. in. (sq. cm) 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 ntonio Trigo Antonio TITLE ZIP CODE and Mapper rofessiona 34109 **ADDRESS** 223 Trad SIGNATURE TELEPHONE 5/26/01

	opy the corresponding information fro	m Section A.	For Insurance Company Use:
UILDING STREET ADDRESS (Induc	ting Apt., Unit. Suite, and/or Blog. No.) OR P.O	, ROUTE AND BOX NO.	Policy Number
340 Hazelcrest Com	rt STATE FL	ZIP CODE 34145	Company NAIC Number
Marco Island, SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)			
SECTION Section C	Certificate for (1) community official, (2) in:	surance agent/company, and (3) building owner.
OMMENTS			
			Check here if attachment
THE PART OF THE	VATION INFORMATION (SURVEY NOT	REQUIRED) FOR ZONE AO A	ND ZONE A (WITHOUT BFE)
SECTION E - BUILDING ELE	BFE), complete Items E1. through E4. If t	he Elevation Certificate is inten-	ded for use as supporting
or Zone AO and Zone A (without b	Section Complete items E.f. tillodgif Eq. 11.		
formation for a LOMA or LOMR-F	/Calart the hullding distriction illust silling	ar to the building for which this o	certificate is being completed -
1. Building Diagram Number	am accurately represents the building, pro	Mide a skeller of bilogs ab	
2. The top of the bottom floor (incl	luding basement or enclosure) of the built		n.(cm) above or below
			- Lafaba building is
	ananings (see page /) the next higher in	DOLOL Eleasted Hook (closestick)	of the building is
I ft.(m) in.(cm) above the highest adjacent grade. Complete terms of the first state 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.			
a titural and and and and	nce? Yes No Unknown. F - PROPERTY OWNER (OR OWNER)	THE local Unicial mast solary an	
SECTION	F - PROPERTY OWNER (OR OWNER)	estima A. R. C. (Hems C3 h and	C3 i only), and E for Zone A
The property owner or owner's automit a FEMA-issued or community	thorized representative who completes Sounity-issued BFE) or Zone AO must sign h	nere. The statements in Section	as A, B, C, and E are correct to
the transfer of the state of th	S AUTHORIZED REPRESENTATIVE'S NAME		
PROPERTY OWNER'S OR OWNER'S	CITY	STATE	ZIP CODE
ADDRESS	DATE		ONE
SIGNATURE	DATE		
COMMENTS .			
			Check here if attachment
	SECTION G - COMMUNITY INFO	RMATION (OPTIONAL)	
he local official who is authorized	by law or ordinance to administer the com	nmunity's floodplain manageme	nt ordinance can complete
engineer, or architect who	is authorized by state or local law to certi	ty elevation information. (Indica	ate the source and care
elevation data in the Comr	nents area below.)	one A (without a FFMA-issued o	or community-issued BFE) or
	ments area below.) leted Section E for a building located in Zo	She A (Without a 1 21/2 1 100000 0	•••••••
Zone AO.	Items G4-G9) is provided for community f	noodplain management purpose	es.
	Items 64-69) is provided to terminary	I G6 DATE CERTIFICATE OF	COMPLIANCE/OCCUPANCY
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	ISSUED	
7. This permit has been issued fo	1	intial Improvement	ft.(m) Datum:
8. Elevation of as-built lowest floo	or (including basement) of the building is:	Approximate the second	ft.(m) Datum:
9. BFE or (in Zone AO) depth of fi	looding at the building site is:		1c(iii)==================================
LOCAL OFFICIAL'S NAME		TITLE	
COMMUNITY NAME		TELEPHONE	
SIGNATURE VINDENUTU		DATE 6/4/01	
COMMENTS		<u> </u>	
			Check here if attachmen
			Official field if different