#002330

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.

	For Insurance Company Use:									
BUILDING OWNER'S NAME DEAN & SUSAN NORB	Policy Number									
BUILDING STREET ADDRESS 957 HUNT COURT		Suite, and/or Bldg. No.) OR P.	D. ROUTE AND BOX NO.		Company NAIC Number					
CITY			STATE	ZIP CODE						
MARCO ISLAND PROPERTY DESCRIPTION (L	ot and Block Numbers	, Tax Parcel Number, Legal D	FL escription, etc.)	34145						
LOT 13, BLOCK 257, M/	ARCO BEACH UN	NIT 6								
BUILDING USE (e.g., Resident RESIDENTIAL		-								
LATITUDE/LONGITUDE (OPT (##º-##'-####" or ##.####		HORIZONTAL DATUM: NAD 1927 NAD 198	SOURCE:	Other:						
		SECTION B - FLOOD	INSURANCE RATE MAP (FIRM) INF	ORMATION						
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER 120067			2. COUNTY NAME OLLIER		B3. STATE FL					
B4. MAP AND PANEL NUMBER 120426/803	B5. SUFFIX	B6. FIRM INDEX DATE 7-20-98	B7. FIRM PANEL EFFECTIVE/REVISED DATE 8-3-92	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 10					
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. FIS Profile FIRM Community Determined Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: 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 No Designation Date										
			ELEVATION INFORMATION (SURVI		Crus 318/01					
C1. Building elevations are ba				Finished Construction						
*A new Elevation Certificate will be required when construction of the building is complete.										
C2. Building Diagram Number	1 (Select the building	ng diagram most similar to	he building for which this certificate is	being completed - see page	es 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										
			rements and datum conversion calcu	lation. Use the space provi	ided or the Comments area of					
Section D or Section G, a		nument the datum conversion	on.							
Datum Conversion				577						
Elevation reference mark			k used appear on the FIRM? Ye	_ 1						
a) Top of bottom floor	. •	or endosure)	10. 1 ft.(m)	sed Seal						
□ b) Top of next higher floor			<u>N/A</u> ft.(m)	beed						
c) Bottom of lowest horizontal structural member (V zones only)d) Attached garage (top of slab)			<u>N/A</u> ft.(m) <u>8</u> . <u>2</u> ft.(m)	Emboss and Da						
e) Lowest elevation of		ruinmont	<u> 2. Zic(III)</u>	and Em						
servicing the building		Anthuour	<u>10</u> . <u>O</u> ft.(m)	ture	remain and the second s					
f) Lowest adjacent gra	•		8. Oft.(m)	License Number, Signature,	The second secon					
g) Highest adjacent gr			8. 1ft(m)	Sign	EL CEPT NO 4520					
h) No. of permanent or	. ,) within 1 ft. above adjacen		ice.	FL. CERT NO. 4520					
i) Total area of all pem	nanent openings (flo	od vents) in C3h <u>576</u> sq. ir	n. (sq. cm)							
		SECTION D - SURVEYO	R, ENGINEER, OR ARCHITECT CE	RTIFICATION	9-1-00					
This certification is to be s			neer, or architect authorized by law		mation.					
			represents my best efforts to inter							
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.										
CERTIFIER'S NAME David B. Bruns LICENSE NUMBER 4520										
TITLE Surveyor			COMPANY NAME Br	COMPANY NAME Bruns & Bruns, Inc.						
ADDRESS 1072 6th. Avenue N.			СПҮ	STATE	ZIP CODE 34102					
			Nanles	FI	34102					
SIGNATURE			Naples DATE	FL TELEPHO	34102 NE					

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

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

Important: Read the instructions on pages 1 - 7.

	For Insurance	Company Use:							
BUILDING OWNER'S NAME	Policy Number	Policy Number							
DEAN & SUSAN NORB									
957 HUNT COURT	R P.O. ROUTE AND BOX NO.			Company NAK	Company NAIC Number				
CITY			STATE		ZIP C				
MARCO ISLAND	at and Ob at March	T. P. Ibl	FL		3414	5			
PROPERTY DESCRIPTION (L LOT 13, BLOCK 257, MA	ARCO BEACH U	NIT 6	, ,						
RESIDENTIAL			Comments section if necessary.)						
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATU (##P - ### - ## ### or ## ######P) NAD 1927 NA				Other:					
		SECTION B - FLOO	D INSURANCE RATE MAP (FIRM) INFO	RMATION				
B1. NFIP COMMUNITY NAME	& COMMUNITY NUN	MBER	B2. COUNTY NAME			B3. STATE			
120067			COLLIER			FL			
B4. MAP AND PANEL NUMBER 120426/803	B5. SUFFIX E	B6. FIRM INDEX DATE 7-20-98	B7. FIRM PANEI EFFECTIVE/REVISED 8-3-92		B8. FLOOD ZONE(S AE	(Zone AO, use	OD ELEVATION(S) e depth of flooding) 10		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. FIS Profile FIRM Community Determined Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: 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 No Designation Date									
			G ELEVATION INFORMATIO			- Dodg/lddo/1 Ddd			
C1. Building elevations are bas			Building Under Construction		Finished Construction				
*A new Elevation Certificat					IIIISIRCU CONSULUCION				
C2. Building Diagram Number				rtificate ie he	sing completed eee r	ance 6 and 7. If no d	liaaram		
accurately represents the I	puilding provide as	ketch or nhotograph)	o to bailding for Whost this co	runodis io so	ing withholds - see p	ages o and 7. in lou	laylalli		
C3. Elevations – Zones A1-A30			HREE) AR ARIA ARIAE AR	ν <u>α 1. Δ</u> αο ΔΕ	DIAH ADIAO				
			ed in Item C2. State the datum			the datum upad for t	the RFF in		
			surements and datum conven						
Section D or Section G, as	appropriate to do	riment the datum conve	reinn	sion Calculat	ion. Ose the space pr	DANGED OF RIG CONTINE	SHIS aled UI		
Datum Conversio		ATTOTA DIC GALGITT COLLEG	19011.						
Elevation reference mark L		he elevation reference m	nark used appear on the FIRM	2 🗆 Van	M No				
a) Top of bottom floor (i		or and aum)		/ Yes					
☐ b) Top of next higher flo	. Or enciosule)	10. 1 ft (m)							
☐ c) Bottom of lowest horizontal structural member (V zones only)			10. 1 ft (m) N/Aft (m) N/Aft (m) 8. 2ft (m)						
		ember (v zones only)	<u>N/A</u> ft(m)						
d) Attached garage (top			8. 2ft(m) 9. 2ft (m)						
e) Lowest elevation of n	quipment	10.0%			1	111			
servicing the building			10. Oft (m)			3-02-01			
☐ f) Lowest adjacent grade (LAG)			$8 \cdot 0$ t.(m)			3-02-01			
g) Highest adjacent grad			<u>8</u> . <u>1</u> ft.(m)		License Number, Signature,	FL. CERT NO. 4520			
h) No. of permanent ope	enings (flood vents)	within 1 ft. above adjace	ent grade <u>4</u>		<u>-</u>				
i) Total area of all perma	anent openings (floo	od vents) in C3h <u>576</u> sq	in. (sq. cm)				Antonomic description of the second s		
		SECTION D - SURVEY	OR, ENGINEER, OR ARCHI	TECT CERT	IFICATION				
This certification is to be sig						ormation			
I certify that the information	in Sections A, B,	and C on this certifica	te represents my best effort	s to interpr	et the data available	,			
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.									
CERTIFIER'S NAME David B. Bruns LICENSE NUMBER 4520									
TITLE Surveyor	TITLE Surveyor COMPANY NAME Bruns & Bruns, Inc.								
ADDRESS			CITY		STATE	ZIP	CODE		
1072 6th. Avenue N.			Naples		FL		102		
SIGNATURE	au		DATE		TELEPI				
SIGNATURE AMPLICE			3-02-01		941-20	261-5965			