#020816

## 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.

	A - PROPERTY OWNER INFORMATION	For Insurance Company Use:			
PLUI DING OWNER'S NAME	FROMERIN OWNER INFORMATION	Policy Number			
BUILDING OWNER'S NAME Gayle Derigo		1 plants a state and			
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) Of 729 Inlet Drive	R P.O. ROUTE AND BOX NO.	Company NAIC Number			
CITY MARCO ISLAND,	STATE FL	ZIP CODE 34145			
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Leg Lot 3, Block 398, Marco Beach Unit 13	al Description, etc.)				
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Us RESIDENTIAL					
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATU (##9 - ## - ## ##" or ## #####) NAD 1927 NAE	and the same of th	Type): Quad Map Dther:			
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER MARCO ISLAND (120426)	B2. COUNTY NAME COLLIER	B3. STATE FL			
B4, MAP AND PANEL B5. SUFFIX B6. FIRM INDEX DAT NUMBER 09-25-02 120426-0812 G	TE B7. FIRM PANEL B8. F EFFECTIVE/REVISED DATE 09-25-02	PLOOD ZONE(S) B9. BASE FLOOD ELEVATION(S) AE &X (Zone AO, use depth of flooding) 11.3			
B10. Indicate the source of the Base Flood Elevation (BFE) data or base	flood depth entered in B9.				
☐ FIS Profile ☐ FIRM ☐ Community D	etermined				
B11. Indicate the elevation datum used for the BFE in B9: NGVD 19	29 NAVD 1988 Of				
B12. Is the building located in a Coastal Barrier Resources System (CBF					
	NG ELEVATION INFORMATION (SURVEY REQU				
3		d Construction			
*A new Elevation Certificate will be required when construction of the		I			
c2. Building Diagram Number 1 (Select the building diagram most similar		mpieted - see pages 6 and /. 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 con	ecioni.				
Datum Conversion/Comments  Elevation reference mark used Does the elevation reference r	mark used annear on the FIRM? TO Vec Min				
Elevation reference mark usedDoes the elevation reference r □ a) Top of bottom floor (including basement or enclosure)	nank used appear of the rinkin? ☐ 1 es ☐ No 11 4 ft.(m)				
☐ a) Top of bottom floor (including basement or enclosure) ☐ b) Top of next higher floor	22_0 ft.(m)	Embossed Seal, and Date			
☐ c) Bottom of lowest horizontal structural member (V zones only)	NA ft(m)	e Clum			
☐ d) Attached garage (top of slab)	18. 9ft.(m)	ag / /Vm / / 0 / /			
a) Aliabrica garage (up or size)     b) Lowest elevation of machinery and/or equipment	TT. T. A 8				
servicing the building	18.6ft(m)	nature, and Da			
1) Lowest adjacent grade (LAG)	10 . 6ft.(m)	License Number, Signature,			
g) Highest adjacent grade (HAG)	20. 2ft.(m)	28 V			
h) No. of permanent openings (flood vents) within 1 ft. above adj					
i) Total area of all permanent openings (flood vents) in C3h 0 sq.		-			
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION 8-30-02					
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.					
CERTIFIER'S NAME Arthur Quinnell	LICENS	E NUMBER 2422			
TITLESurveyor	COMPANY NAME SUCHAKAR (				
ADDRESS	CITY	STATE ZIP CODE			
PO ROX 1836 SIGNATURE  SIGNATURE	MARCO ISLAND DATE 10:30:03	EI 34146 TELEPHONE (2391393-2741			

IMPORTANT: In these spaces, copy the	e corresponding information from Section A.			For Insurance Company Use.
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.				Policy Number
CITY	STATE		ZIP CODE	Company NAIC Number
	ECTION D - SURVEYOR, ENGINEER, OR ARC	CHITECT CE	RTIFICATION (CONTINUED)	un vertre des des des des des des des des des de
	e for (1) community official, (2) insurance agent/co			encepero sento el confección de percepero contrato de encentra de la confección de la confección de encentra d
COMMENTS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
W				
NULL COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN T			Camera la capa de capacida de la capacida de capacida de la capacida del capacida de la capacida de la capacida del capacida de la capacida del la capacida del la capacida de la capacida del la capacida de la capacida del la capacida de la capacida del la capacida	Check here if attachments
STOREGRAPH AND STREET STREET,	NG ELEVATION INFORMATION (SURVEY NO	MARKET REPORT OF THE PARTY OF T		DANSELE PROPERTIE DE LA COMPANION DE L'ARTE DE LA COMPANION DE L'ARTE DE L'A
Section C must be completed.  E1. Building Diagram Number(Select the I represents the building, provide a sketch E2. The top of the bottom floor (including bas	nplete Items E1 through E4. If the Elevation Certicological policing diagram most similar to the building for who or photograph.) sement or enclosure) of the building isft.(m)_sisee page 7), the next higher floor or elevated flo	hich this cert	ficate is being completed – see pa	ages 6 and 7. If no diagram accurately  ) the highest adjacent grade.
	iber is available, is the top of the bottom floor elevi local official must certify this information in Section		rdance with the community's flood	plain management ordinance?
CONTRACTOR OF THE PROPERTY OF	ECTION F - PROPERTY OWNER (OR OWNER	DIRECTOR CONTRACTOR OF THE PROPERTY CONTRACTOR O	ENTATIVE) CERTIFICATION	experimental control of the control
The property owner or owner's authorized r sign here.	epresentative who completes Sections A, B, and	E for Zone /	(without a FEMA-issued or comm	nunity-issued BFE) or Zone AO must
PROPERTY OWNER'S OR OWNER'S AUTHO	RIZED REPRESENTATIVE'S NAME			
ADDRESS		CITY	STAT	E ZIP CODE
SIGNATURE		DATE	TELE	PHONE
COMMENTS				
				Check here if attachments
	SECTION G - COMMUNITY INFO	ORMATION	(OPTIONAL)	
Certificate. Complete the applicable item(s) a G1. The information in Section C was take state or local law to certify elevation G2. A community official completed Sect	ordinance to administer the community's floodplai and sign below. Iven from other documentation that has been signs information. (Indicate the source and date of the ion E for a building located in Zone A (without a FI G9) is provided for community floodplain manage	ed and embo elevation dat EMA-issued	nssed by a licensed surveyor, enging to the Comments area below.)  or community-issued BFE) or Zor	ineer, or architect who is authorized by
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	The state of the s	G6. DATE CERTIFICATE OF COM	PLIANCE/OCCUPANCY ISSUED
G7. This permit has been issued for: New G8. Elevation of as-built lowest floor (including G9. BFE or (in Zone AO) depth of flooding at			t(m)	Datum: Datum:
LOCAL OFFICIAL'S NAME		process bases process		
COMMUNITY NAME		TEL	EPHONE	
SIGNATURE	NACONANIA DALI DALI NACONANIA DEL CARRO DE LA CARRO DEL CARRO DE LA CARRO DE LA CARRO DE LA CARRO DEL CARRO DE LA	DAT	E	
COMMENTS		***************************************		
- PROSERVE AND				
				Check here if attachments