

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.

| Total Activities and the Committee of th | YOWNER INFORMATION | and the state of t | For Insurance Company Use | | |
|--|--|--|--|--|--|
| BUILDING OWNERS NAME | | Policy Number | | | |
| TOM & RITA WILLMUS | | | | | |
| BLILDING STREET ADDRESS (Including Apt., Unit, Suite, and/grBldg. No.) OR P.O. ROUTE. | 4ND B0X NO | | Company NAIC Number | | |
| 901 Inlet Drive | | | | | |
| MADCO ICLANO | STATE | ZIP 000E | | | |
| MARCO ISLAND PROFERTY DESCRIPTION (Lot and Block Numbers, Tax Paicel Number, Legal Description, e | FL. | 34145 | | | |
| LOT 1, BLOCK 404, MARCO BEACH UNIT THIRTEEEN | w) | | | | |
| ECicDinG USE (e.g., Residential, Nun-residential, Addition, Accessory, etc. Use Comments se | tion if necessary) | | individual proportion profession and Tables Communication decommendations (1996) from a post define of an appropriate proportions are not also become a post of the communication and the communicatio | | |
| RESIDENTIAL | | | | | |
| LATITUDELONGITUDE (OPTIONAL) HORIZONTAL DATUM (##P - ## - ## ### or ## #####P) | | GPS (Type): USGS Quad Map | 3 Obor | | |
| (mr - mr - mr mr 3) mi imimir; [N-D 1921 [N-D 1923 | 12 | 1 0000 Catao Map | Other: | | |
| SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION | | | | | |
| BI NEP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY | NAME | FA | STATE | | |
| 120067 COLLIER | T T T T T T T T T T T T T T T T T T T | FL | 917 (Van | | |
| B4 MAP AND PALEL B5. SUFFIX B6 FIRM INDEXIDATE | 67 FIRM PANEL | BS FLOOD ZONE(S) | B9 BASE FLOOD ELEVATIONIS) | | |
| LO. OOT 1/A | ECTIVEREVISED DATE | AE | (Zone AO, use depth of thoding) | | |
| 120426/0812 E | 8-3-92 | , | 11 | | |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth er | stared in EQ | <u> </u> | | | |
| FIS Profile FIRM Community Determined | Other (Describ | ne) ^r | | | |
| B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 | A CONTRACTOR OF THE PARTY OF TH | Other (Describe): | | | |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Oth | | | esignation Date | | |
| SECTION C - BUILDING ELEVATION | N INFORMATION (SURVE) | Y REQUIRED) | | | |
| C1. Building elevations are based on: Construction Drawings* Building L | Inder Construction* | Finished Construction | | | |
| *A new Elevation Certificate will be required when construction of the building is con- | | | | | |
| 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.) | , | 0, 1 | • | | |
| C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, | ARVA, ARVAE, ARVA1-A30, AV | R/AH, AR/AO | | | |
| Complete Items C3a-i below according to the building diagram specified in Item C2 | | | datum used for the BFE in | | |
| Section B, convert the datum to that used for the BFE. Show field measurements a | ind datum conversion calculat | tion. Use the space provide | d or the Comments area of | | |
| Section D or Section G, as appropriate, to document the datum conversion. | | | | | |
| Datum Conversion/Comments | | | | | |
| Elevation reference mark usedDoes the elevation reference mark used app | ear on the FIRM? Yes | ⊠ No | | | |
| a) Top of bottom floor (including basement or enclosure) | 12. 3ft (m) | क | | | |
| o b) Top of next higher floor | <u>N/A</u> ft.(m) | sed Seal | | | |
| o c) Bottom of lowest horizontal structural member (V zones only) | <u>N/A</u> ft.(m) | SSe | | | |
| | t(m) | 0 pc | | | |
| o e) Lowest elevation of machinery and/or equipment | | П д | | | |
| servicing the building | 12. 1ft.(m) | attr. | Mille | | |
| | ft.(m) | ž g | 11-1-05 | | |
| o g) Highest adjacent grade (HAG) | tt.(m) | License Number, Emboss Signature, and Dai | 4-6-05 FL CERT NO. 4520 | | |
| o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 14 | and the second s | 5 | L. OLKI NO. 4520 | | |
| o i) Total area of all permanent openings (flood vents) in C3h 2000 sq. in. (sq. cm) | | | | | |
| SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION 6 - 2 - 04 | | | | | |
| 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. | | | | | |
| l 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 | | | | | |
| THE Surveyor | COMPANY NAME Brur | ns & Bruns, Inc. | | | |
| ACCRESS | CITY | STATE | ZIP CODE | | |
| 1072 6th. Avenue N. | Naples | FL | 34102 | | |
| SIGNATURE OF THE PARTY OF THE P | DATE 406-05 | TELEPHONE 941-261-5 | | | |
| | | 0.66 106 6 | | | |

| IMPORTANT: In these spaces | , copy the corresponding information from Section | man A. | | For Insurance Company Use |
|--|---|--|--|---|
| BUILDING STREET ADDRESS (inc | fuding Apt , Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE A | ND BOX NO | | Folicy Number |
| CITY | \$ | TATE | ZIP CODE | Company NAIC Number |
| om 1944 de melle mille mille de leus aus litter Syndrody verse de comptain domérce leus leus des de la best de leus de la leus de la leus de leus de leus de leus de la leus de leux d | SECTION D - SURVEYOR, ENGINEER, OF | 3 ADALITEAT AEDTICAAT | MAL/MARTERIES | |
| Come half aidea of this Elemen | : Certificate for (1) community official, (2) insurance ag | | | 0.00000000000000000000000000000000000 |
| COMMENTS | r Cerumcate for (1) continuinty official, (2) insurance ag | enveoritpary, and (5) building | twiter. | |
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| | | | | |
| | | | | Check here if attachments |
| SECTIONE | - BUILDING ELEVATION INFORMATION (SURVE | Y NOT REQUIRED) FOR ZO | NE AO AND ZONE | A (WITHOUT BFE) |
| | BFE), complete Items E1 through E4. If the Elevation | Certificate is intended for use | as supporting inform | nation for a LOMA or LOMR-F, |
| Section C must be completed. | alant than had disagrafi a commo was at ainsilar to than had blin a | Karredsink thin a astitinata in tenie | an commisted and | and 7 Marchanes are make |
| e i. Building Diagram vumber _(3 represents the building, provid | select the building diagram most similar to the building te a sketch or photograph) | TOF WITHCH THIS CERTIFICATE IS DEFI | ng completed – see p | ages o and i. ii no diagram accurately |
| | luding basement or enclosure) of the building isf | L(m) in.(cm) above or | below (check one | e) the highest adjacent grade. |
| | openings (see page 7), the next higher floor or eleval | | | |
| grade. | | | | |
| | depth number is available, is the top of the bottom floo | | the community's floo | dplain management ordinance? |
| YesNoUnkno | wn. The local official must certify this information in S SECTION F - PROPERTY OWNER (OR OV | Franchis Control of St. (Sept. Sept. | \ CEDTIEICATION | |
| The omnerty owner or owner's as | thorized representative who completes Sections A, B | | | minutional REEL or 7 and A Comment |
| sign here. | and a complete state of the complete sections A, a | , and L for Zone A (wild look a) | Eler violated of Coll | TRUMPISSOUL E, OF ZOTE MOTHES |
| PROPERTY OWNER'S OR OWNER | YS AUTHORIZED REPRESENTATIVES NAME | | | |
| ADDRESS | | <u> </u> | STAT | TE ZP CODE |
| SIGNATURE | | DATE | | PHONE |
| | | | 1 L.L. | |
| COMMENTS | | | | |
| • | | | | Check here if attachments |
| аницени <u>и, с</u> иницент не нействения на предоставления от почения в почения нействения на предоставления на предоста | SECTION G - COMMUNITY | / INFORMATION (OPTIONAL | L) | «Моновільніков «Мікільнік фінкові тепенціковенніковичи не тори шкетом со пильно разроне дина на ший прий довенно ощи до стадій д |
| | by law or ordinance to administer the community's floo | dplain management ordinanc | e can complete Secti | ons A, B, C (or E), and G of this Elevation |
| Certificate. Complete the applicable | | | | |
| | C was taken from other documentation that has been elevation information. (Indicate the source and date o | - | | ineer, or architect who is authorized by |
| - | elevation information. (mulcate the source and date of eted Section E for a building located in Zone A (withou | | , | ne AO |
| | tems G4-G9) is provided for community floodplain ma | | ay soo are a seen sury as soon | 10 1100 |
| G4. PERMIT NUMBER | G5 DATE PERMIT ISSUED | GS DATE (| DERTIFICATE OF CON | IPLIANCE/OCCUPANCY ISSUED |
| | | | ····· | PARTIT DES SINOS ESTADOS ANTO ANTO ANTO ANTO ANTO ANTO ANTO ANTO |
| • | : New Construction Substantial Improvement | nt . | Ø / 3 | *** |
| 56. Elevation of as-built lowest floor 59. BFE or (in Zone AO) depth of fl | (including basement) of the building is: | 1000 | ft.(m) ft.(m) | Datum: Datum: |
| LOCAL OFFICIAL'S NAME | overing at the sentening site to. | TILE | manager, was to first | LFCHAI) E. ontribuoration. |
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| COMMUNITY NAME | | TELEP-KNE | | |
| SIGNATURE -3 4 | 1 M/sC | DATE 4 | 8-5 | |
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