U.S. DEPARTMENT OF HOMELAND SECURITY • ELEVAT

OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency National Flood Insurance Program

important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION	For Insurance Company Use:		
A1. Building Owner's Name ROBERT J. REILEY III & DONNA M. REILEY	Policy Number		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Company NAIC Number		
	P Code		
ARCO ISLAND. FLORIDA A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)			
LOT 14, BLOCK 124, MARCO BEACH, UNIT FOUR	•		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL			
A5. Latitude/Longitude: Lat. 25 57 46.9" Long81 42 58.9" Horizontal Dat	um: ☐ NAD 1927 🔀 NAD 1983		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number1	and the second s		
A8. For a building with a crawl space or enclosure(s), provide: A9. For a building with an attach			
a) Square footage of crawl space or enclosure(s) o sq ft a) Square footage of attach			
	openings in the attached garage		
enclosure(s) walls within 1.0 foot above adjacent grade			
भू राज्या राज्य पर स्थापन प्रवास सुन तर राज्य	penings in A9.b 1) sq in		
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION			
	3. State		
MARCO ISLAND 120426 COLLIER	FLORIDA		
B4. Map/Panel Number B5. Suffix B6. FIRM Index B7. FIRM Panel B8. Flood Date Effective/Revised Date Zone(s)	89. Base Flood Elevation(s) (Zone AO, use base flood depth)		
12021C - 0804 G 11/17/05 11/17/05 AE	8.30'		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.	•		
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe)			
B11. Indicate elevation datum used for BFE in Item 89: 🔀 NGVD 1929 🔲 NAVD 1988 🔲 Other (Describe) 🔃			
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date	☐ Yes 🛛 No ·		
Second Second			
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRE	: D)		
C1. Building elevations are based on: Construction Drawings* Building Under Construction*	Finished Construction		
*A new Elevation Certificate will be required when construction of the building is complete.	•		
C2. 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 C2.a-g		
below according to the building diagram specified in Item A7.			
Benchmark Utilized DELTONA BENCH MARK #38 A Vertical Datum ELEVATION =	5.29' NGVD 1929		
Conversion/Comments			
Check the measurem	eni used.		
	rs (Puerto Rico only)		
	rs (Puerto Rico onty)		
c) Bottom of the lowest horizontal structural member (V Zones only) N/A P feet mete	rs (Puerto Rico only)		
	rs (Puerto Rico anily)		
e) Lowest elevation of machinery or equipment servicing the building 6.70 V feet mete (Describe type of equipment in Comments) A/C UNIT	rs (Puerto Rico only)		
	rs (Puerto Rico only)		
g) Highest adjacent (finished) grade (HAG)	rs (Puerto Rico only)		
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION 3 2-08			
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation	ana and a sure of the sure of		
Information. I certify that the information on this Certificate represents my best efforts to interpret the data available. Understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. PS&M #4085			
Check here if comments are provided on back of form.			
Certifier's Name JOHN GENEVRINO License Number PSM #4085			
Title Company Name	- Hills		
PRESIDENT ACTION SURVEYS & PLANNERS, INC. Address City State ZIP Code	Allahattiinnega,as-		
171 COMMERCIAL BLVD. NAPLES, FLORIDA 34104			
Signature Date Telephone	DATE: 01/31/07		
01/31/0/ 239-643-7510			

•	the state of the s	on A.		For Insura	ince Company Use:
PORTANT: In these spaces, cop	y the corresponding information for			Policy Nu	
iding Street Address (including Apt., Un	it, Sure, and/or blug. No.) or		ZIP Code	Company	NAIC Number
, ,	State				
SECTION D	- SURVEYOR, ENGINEER, OR ARCHI	TECT CERTIF	ICATION (CC	MIIMUEN)	
ny both sides of this Elevation Certifical	te for (1) community official, (2) insurance ago	ent/company, a≀	nd (3) building o	wner.	
mments					
				,	
gnature	Date				Check here if attachments
gradus	TION INFORMATION (SURVEY NOT F	REQUIRED) F	OR ZONE AC	AND ZON	E A (WITHOUT BFE)
SECTION E - BUILDING ELEVA	HOW HAY ORGANIZATION (CO.		OMA or LOME	R-F request, C	omplete Sections A, B,
or Zones AO and A (without BFE), com	plete Items E1-E5. If the Certificate is intended, if available. Check the measurement use	ed to support a ed. In Puerto Ri	co only, enter m	eters.	
and C. For items £1-£4, use natural gra	e following and check the appropriate boxes	to show whethe	r the elevation i	s above or be	low the nignest adjacent
grade (HAG) and the lowest adjace	int grade (LAG).	[] feet	LI meters L	T SOOAS O	LI DOION GIOTA
Ton of Fottom Soor (Including Da	sement, craw space, or electron of the	feet	meters	above or	below the LAG.
-a ras Dullding Diagrams 6-8 With Def	MISUBUL 1000 obelings broaded in government	Items 8 and/or	9 (see page 8 0	of Instructions w the HAG.), the next higher hos
(elevation C2.b in the diagrams) of	the building is feet feet abov	holow	the HAG.	*	
= Attached narrane (top of slab) is	1991 Chiefers Chapor		[]loce [above or	below the HAG.
	or equipment servicing the building is	or elevated in a	ccordance with	the communi	y's floodplain management
ordinance? Yes No	Unknown. The local official must certify this	Information in S	ection G.		
Of distances From	- PROPERTY OWNER (OR OWNER'S			TIFICATIO	V
SECTION I	ed representative who completes Sections A, sorte in Sections A. B. and E are correct to the	R and F for Zo	ne A (without a	FEMA-issued	or community-issued BFE)
The property owner or owner's authorize	ed representative who completes Sections A, ents in Sections A, B, and E are correct to the	e best of my kno	owiedge.		***
or Zone AO must sign nere. The statem Property Owner's or Owner's Authorized	Representative's Name				
Property Owner's or Owner's Authorized			State	ZI	P Code
Address	City				
Signature	Date	**	Tele	phone	
Comments					
Summerica ,					Check here if attachme
		SOMATION (C	ANOTTONAL)		
	SECTION G - COMMUNITY INFO y or ordinance to administer the community's nete the applicable item(s) and sign below.	#	mamont amina	ice can comp	lete Sections A, B, C (or E),
he local official who is authorized by lav	v or ordinance to administer the community's plete the applicable item(s) and sign below.	Check the meas	urement used in	ı items G8. aı	nd G9.
ind G of this Elevation Certificate. Com	proto are epperature		a manufacture of the	anend curvey	or engineer, of architect wi
is authorized by law to certify	ras taken from other documentation that has delevation information. (Indicate the source an	nd date of the ek	evation data in t	ne Commenc	RFF) or Zone AO.
[T]	d Continue iii for a building located in ZONS A ()	MINIOR OL PIAM.	Booton or our	munty-issued	
33. The following information (Item	ns G4G9.) is provided for community floodpl	Mill managemen	it barbara		ecupancy Issued
G4. Permit Number	G5. Date Permit Issued	G6. Date	Certificate Of	Compliance	153.
	New Construction Substantial In	nprovement		. •	•••
G7. This permit has been issued for:			feet met	ers (PR) Da	atum
G8. Elevation of as-built lowest floor (inc	cluding basement) of the building:		feet met	ers (PR) Da	atum
G9. BFE or (in Zone AO) depth of floodi	ng at the building site.	.:	`.'		
Local Official's Name		Title	٠.		**
Community Name	-	Telephone			
		Date			
Signature					
Comments			•		
					-
					Check here if attachn
E F 2				F	Replaces all previous edi
FEMA Form 81-31, February 2006				•	* ***

OK B.O 3 22 OP - 8,55 NOUD F.F

Building Photographs See Instructions for Item A6.

DATE: 01/30/07			For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			Policy Number
919 IRIS COURT			
City	State	ZIP Code	Company NAIC Number
MARCO ISLAND.	FLORIDA		

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.

"REAR VIEW"



Building Photographs See Instructions for Item A6.

DATE: 01/30/07

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

Policy Number

Policy Number

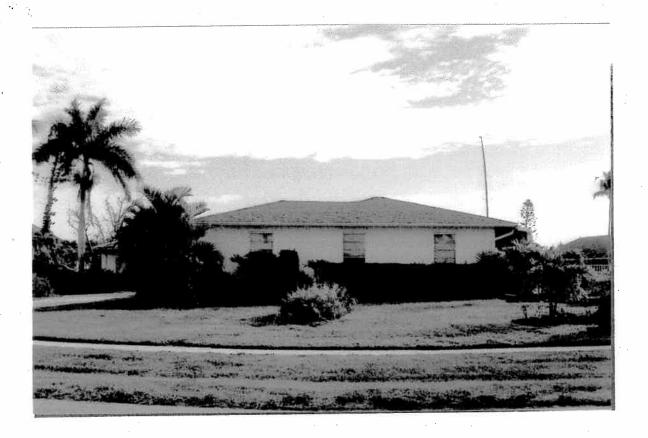
City
State
MARCO ISLAND, FLORIDA

For Insurance Company Use:

Policy Number

Company NAIC Number

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"RIGHT SHEE VIEW"

Building Photographs See Instructions for Item A6.

DATE: 01/30/07			For Insurance Company Use:
Building Street Address (including	Policy Number		
919 IRIS COURT			
City	State	ZIP Code	Company NAIC Number
MARCO ISLAND,	FLORIDA	•	497 4 4 7

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"FRONT VIEW"

