# FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM <br> ELEVATION CERTIFICATE 

O.M.B. No. 3067-0077

Expires July 31, 2002

Important: Read the instructions on pages 1-7. SECTION A - PROPERTY OWNER INFORMATION
BUILDING OWNER'S NAME
Paul \& Linda Skuse
BUILDING STREET ADDRESS (Including Apt., Unit, Suite. and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 470 Kendall Drive

|  |  | STATE | ZIPCODE |
| :--- | :--- | :---: | :--- |
| Marco | Island | FL | 34145 |

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
Lot 50, Block 591, Marco Beach Unit 23
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) residential


SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

| B1. NFIP COMMUNTY NAME \& COMMUNITY NUMBERCity of Marco 120426 |  |  | B2. COUNTY NAME Collier |  | $\begin{aligned} & \text { B3. STATE } \\ & \text { Florida } \end{aligned}$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |
| B4. MAP AND PANEL NUMBER 0803 | 85. SUFFIX F | $\begin{gathered} \hline \text { B6. FIRM INDEX } \\ \text { DATE } \\ 7 / 20 / 98 \end{gathered}$ | B7. FIRM PANEL EFFECTIVEREVISED DATE 7/20/98 | $\begin{aligned} & \text { B8. FLOOD } \\ & \text { ZONE(S) } \\ & \text { AE } \end{aligned}$ | B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) $+11.0!$ |

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
L_IFIS Profile $|X|$ FIRM L_I Community Determined LIOther (Describe):
B11. Indicate the elevation datum used for the BFE in B9: |X|NGVD 1929 L_INAVD 1988 L_I Other (Describe):
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? L. Yes |X|No Designation Date:

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: L__|Construction Drawings* L_ |Building Under Construction* $|x|$ Finished Construction *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 - see 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 ltems $\mathrm{C} 3 . \mathrm{a}$-i below according to the building diagram specified in Item C 2 . 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. Datum $\qquad$ Conversion/Comments Elevation reference mark used_ Site BM_Does the elevation reference mark used appear on the FIRM? L_|Yes |x| No
a) Top of bottom floor (including basement or enclosure)
b) Top of next higher floor
a c) Bottom of lowest horizontal structural member (V zones only)
d) Attached garage (top of slab)

- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) A/C
- f) Lowest adjacent (finished) grade (LAG)
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 570.2 sq. in. (sq. cm)

| 11.10 ft (14) |  |
| :---: | :---: |
|  | __ft(m) |
| ——— ft.(m) |  |
| 8.40 ft (m) |  |
| Pad | 11.00 ft (m) |
| 7.85 ft (m) |  |
| 9.00ft.ra) |  |
| acent | 2 |

## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION




| IMPORTANT: In these spaces, copy the corresponding information from Section A. |  |  | For insurance Company Use: |
| :---: | :---: | :---: | :---: |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Blidg. No.) OR P.O. ROUTE AND BOX NO. 470 Kendall Drive |  |  | Policy Number |
| $\stackrel{\text { MiTY }}{\text { Marco }}$ Island | $\begin{aligned} & \hline \text { STATE } \\ & \text { FL } \\ & \hline \end{aligned}$ | $\begin{array}{\|c\|} \hline \mathrm{ZIPCODE} \\ 34145 \\ \hline \end{array}$ | Company NAIC Number |

## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

## COMMENTS

## SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1. through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.
E1. Building Diagram Number $\qquad$ (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.)
 (check one) the highest adjacent grade. (Use natural grade, if available.)
E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is $|\ldots| \mathrm{ft} .(\mathrm{m}) \mid \ldots \ldots \mathrm{in} .(\mathrm{cm})$ above the highest adjacent grade. Complete ltems C3.h and C3it on front of form.
E4. For Zone AO only. If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? | _ Yes _ _ | No I_ | Unknown. The local official must certify this information in Section G

## SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge.
PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

| ADDRESS | CITY | STATE |
| :--- | :--- | :--- |
| SIGNATURE | DATE CODE |  |

COMMENTS

Check here if attachments

## SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete
Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.
G1. L_ The information in Section $C$ was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
G2. I__ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
G3. L_I The following information (Items G4-G9) is provided for community floodplain management purposes.


