NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires December 31, 2005

	190435		<del></del>	he instructions on pages 1	<del></del>	
	0/50439	SECTION	A - PR	OPERTY OWNER INFORM	ATION	For Insurance Company Use:
BUILDING OWNER'S NA		/A <u> </u>	•	•		Policy Number
GEORGE and MAR	<del> </del>	· · · · · · · · · · · · · · · · · · ·	or Blda	NALOP DO POUTE AND D	20Y NO	
200 Landmark Street	AND SAME COUNTY	TPL, OIR, SURE, AND	o blug	No.) OR P.O. ROUTE AND E	JUX 19U.	Company NAIC Number
CITY	<u></u>		<del>~,</del>	STATE	ZIP (	CODE
Marco Island	<del>:= !"</del> .			FL	3414	5
	•	Numbers, Tax Parc	el Numi	ber, Legal Description, etc.)		-
Lot 13, Block 173, Marco		dential Addition Acc	accorv	etc. Use a Comments area, if	noceeen/)	· · · · · · · · · · · · · · · · · · ·
Residential	Sideridal, 140171 CSK	acinda, Addition, Acc	coodi y,	cio. Oscia Commente al ca, n	recessary.)	
LATITUDE/LONGITUDE	•			L DATUM:	SOURCE: GPS (T	ype):
(##°-##'-##.##" or ##	##### <sup>©</sup> )	☐ NAD 1	927	☐ NAD 1983	USGS	Quad Map
<u> </u>	<u></u>	ECTION B - FLOO	DINSH	RANCE RATE MAP (FIRM)	INFORMATION	
B1. NFIP COMMUNITY NAME City of Marco Island	& COMMUNITY NUM 120426 1	BER	B2. CC Collier	OUNTY NAME		B3. STATE Florida
Oity Of Ividico (Siding	120720		Comer	;;	·	
B4. MAP AND PANEL	DE CLIETIV			B7. FIRM PANEL		B9. BASE FLOOD ELEVATION(S)
NUMBER 120426 0812	B5. SUFFIX	B6. FIRM INDEX DA 7/20/98	<b>   </b>	EFFECTIVE/REVISED DATE 7/20/98	B8. FLOOD ZONE(S	(Zone AO, use depth of flooding) +11.0
B10. Indicate the source of the	a Raca Eland Eland		a flood de			And the state of t
	FIRM	Community D		<u></u>	rihe).	· · · · · · · · · · · · · · · · · · ·
B11. Indicate the elevation da	<del></del>				Other (Describe):	•
		<del></del>		or Otherwise Protected Area (OF		*****
		<del></del>	<del></del>	ATION INFORMATION (SU		
C1. Building elevations are ba		<del> </del>	·		▼Einished Construction	
*A new Elevation Certification	· <del>-</del> · · ·	_			Alteria con lan negon	The state of the s
·	•		· ·	g is cumplete. building for which this certificate is	hoing completed cook	occos 6 and 7. If no diagram
accurately represents the	(	•			s being completed - see p	Dayes o and 7. If no diagram
· · · · · · · · · · · · · · · · · · ·				\ \D \D/\\ \D/\\E \D/\\1 \\\2\\	ADIALI ADIAO	
	•	,		), AR, ARVA, ARVAE, ARVA1-A30,		oro the elektron wood for the DEE in
<b>-</b> .	•	• • •				om the datum used for the BFE in provided or the Comments area of
					ulauori. Ose trie space p	Novided of the Continents area of
Section D or Section G, a	on/Comments		version.			
• <del>••••••••</del>		- e the elevation referen	co mark	used appear on the FIRM?	Voc M No	ATT TO SECOND SE
o a) Top of bottom floor	· · · · · · · · · · · · · · · · · · ·		CEIIIain	11 5 # 7m		
	- ·	u enclosure)	-	11. <u>5   L                                   </u>	Sea	PSM No. 2982
o b) Top of next higher fl		: 		<u>n/a</u> ft.(m)	şe q	
o c) Bottom of lowest ho		ember (v zones only)		<u>n/a</u> ft.(m)		9/28/2004
o d) Attached garage (to	-	- i-ma ont		<u>8</u> . <u>3</u> ft.(m)		9/20/2004
o e) Lowest elevation of	•	• •		44 5 6 ()	E .	
_	ng (Describe in a Co	arments area)		11.5 ft.(m)	nati nati	
o f) Lowest adjacent (finit	, • • • •			7.8ft.(m)	Sign Z	
o g) Highest adjacent (fir				8. 6 ft.(m)	Şe	Nor S
o h) No. of permanent of						
o i) Total area of all perm					······································	
·	<u> </u>		<del></del>	NGINEER, OR ARCHITECT		12-19-04
	<del>-</del>	<del>-</del>	•	r, or architect authorized by la	_	
			•	presents my best efforts to inte	•	le.
	· · · · · · · · · · · · · · · · · · ·	e punishable by fine	or impi	isonment under 18 U.S. Code		0000
CERTIFIER'S NAME An	tonio Trigo			-	LICENSE NUMBER	2982
TITLE Professional Surve	yor & Mapper		<del></del>	COMPANY NAME	A. Trigo & Associates,	Inc.
· · · · · · · · · · · · · · · · · · ·	- R R					
ADDRESS				CITY	STAT	
2223 Trade Center Way				Naples	FL.	34109-2035
SIGNATURE	1/			DATE		PHONE
· · · · · · · · · · · · · · · · · · ·		<del></del>	<u>.                                    </u>	9/28/04	(239)	594-8448
EMA Form 81-31, Januar		See	revers	e side for continuation.	· · · · · · · · · · · · · · · · · · ·	Replaces all previous edition

IMPORTANT: In these spaces, copy the corresponding information from			For Insurance Company Use.
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE / 200 Landmark Street	AND BOX NO.		Policy Number
CITY Marco Island	STATE FL	ZIP CODE 34145	Company NAIC Number
SECTION D - SURVEYOR, ENGINEER, O	R ARCHITECT CERT	TFICATION (CONTINU	ED)
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance a			
COMMENTS			
The lowest elevation of machinery and/or equipment servicing the building is the hot v	wala reala.	<u> </u>	
	· · · · · · · · · · · · · · · · · · ·		Check here if attachments
SECTION E - BUILDING ELEVATION INFORMATION (SURVE	EY NOT REQUIRED)	FOR ZONE AO AND Z	
or Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation			
ection C must be completed.			
1. Building Diagram Number(Select the building diagram most similar to the buildin	ng for which this certificate	is being completed - see	pages 6 and 7. If no diagram accurately
represents the building, provide a sketch or photograph.)	ei (n.s.)		- N. 44   L.   -   -   -   -   -   -   -   -   -
<ol> <li>The top of the bottom floor (including basement or enclosure) of the building is          natural grade, if available).</li> </ol>	_π(m)(n.(cm) [_] abo	ve or ∟⊥ below (check on	ie) the nighest adjacent grade. (Use
3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elev	rated floor (elevation b) of	the building is ft (m)	in (cm) above the highest adjacent
grade. Complete items C3.h and C3.i on front of form.			
4. The top of the platform of machinery and/or equipment servicing the building is	ft.(m)in.(cm) [_] abo	ve or Delow (check or	e) the highest adjacent grade. (Use
natural grade, if available).			
5. For Zone AO only: If no flood depth number is available, is the top of the bottom flo		e with the community's floo	odplain management ordinance?
Yes No Unknown. The local official must certify this information in SECTION F - PROPERTY OWNER (OR O		TATILE CEDTICIOAT	
The property owner or owner's authorized representative who completes Sections A,			
ssued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E	<u>-</u>		MUDULA FEIVIA-ISSUED OF COTHINGHILY-
PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAM	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
·	<del></del>		
ADDRESS	CITY	STA	ATE ZIP CODE
SIGNATURE	DATE	TEI	EPHONE
COMMENTS	· · · · · · · · · · · · · · · · · · ·	·	
			· · · · · · · · · · · · · · · · · · ·
			Check here if attachment
SECTION G - COMMUNIT	TY INFORMATION (O	PTIONAL)	
ne local official who is authorized by law or ordinance to administer the community's fl			tions A. B. C (or E), and G of this Eleva
ertificate. Complete the applicable item(s) and sign below.		•	
1. The information in Section C was taken from other documentation that has been	•		gineer, or architect who is authorized b
or local law to certify elevation information. (Indicate the source and date of the		•	'ana 10
<ol> <li>A community official completed Section E for a building located in Zone A (with</li> <li>The following information (Items G4-G9) is provided for community floodplain research.</li> </ol>		THE HUISING SOURCE DEED OF Z	DIE AU.
G5. DATE PERMIT ISSUED		DATE CERTIFICATE OF CO	MPLIANCE/OCCUPANCY ISSUED
7 This parmit has been issued for D. Nou Construction D. Substantial Improver		· · · · · · · · · · · · · · · · · · ·	<u> </u>
<ol> <li>This permit has been issued for:  New Construction  Substantial Improven</li> <li>Elevation of as-built lowest floor (including basement) of the building is:</li> </ol>	IIGIL	ft.(m)	Datum:
9. BFE or (in Zone AO) depth of flooding at the building site is:		ft(m)	Datum:
LOCAL OFFICIAL'S NAME	TITLE		
COMMUNITY NAME	TELEPH		
SIGNATURE	DATE	✓: <del>-</del>	······································
		<u> </u>	
COMMENTS / )	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
	· !	. ·	
		· · · · · · · · · · · · · · · · · · ·	Check here if attachments
MA Form 81-31, January 2003			Replaces all previous editi