U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

U.S. DEPARTMENT OF HOMELAND SECURITY ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires March 31, 2012

National Flood Insurance Pr		Important:	Read the I	nstructions on p	pages 1-9.	
	111193			PERTY INFOR	MATION	For Insurance Company Use:
A1. Building Owner's Name JAMES T. & KAREN M. SCHNELLER						Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 822 MAGNOLIA COURT						Company NAIC Number
City MARCO ISLAND State FL ZIP Code 34145						
A3. Property Description (LOT 12, BLOCK 352, MA	Lot and Block Nu ARCO BEACH U-	mbers, Tax Parcel N 11	umber, Legal [Description, etc.)		
 A4. Building Use (e.g., Re A5. Latitude/Longitude: La A6. Attach at least 2 photo A7. Building Diagram Num A8. For a building with a c a) Square footage of b) No. of permanent enclosure(s) within c) Total net area of fl 	nt. 25° 57' 49.2" Noraphs of the bunder 1-B rawlspace or endicated or endicated on the bunder and the bunder an	Long. 81° 43' 49.6' ilding if the Certificate losure(s): nclosure(s) the crawlspace or idjacent grade	<u>' W</u>	to obtain flood insi A9. For a a) S b) N w c) Te	urance. building with an atta quare footage of atta o. of permanent floor ithin 1.0 foot above a otal net area of flood	ached garage 500 sq ft d openings in the attached garage adjacent grade 0 openings in A9.b 0 sq in
d) Engineered flood (Yes No			ngineered flood oper	
	SEC.	TION B - FLOOD II	NSURANCE	RATE MAP (FIR	M) INFORMATIO	N
B1. NFIP Community Name CITY OF MARCO ISLAND			B2. County Na COLLIER	me		B3. State FLORIDA
B4. Map/Panel Number 12021C 0803	B5. Suffix G	B6. FIRM Index Date 11/17/2005	Effectiv	FIRM Panel e/Revised Date I/17/2005	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) +11.3'
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe) B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe) B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☐ No Designation Date ☐ CBRS ☐ OPA						
	SECTIO	N C - BUILDING E	LEVATION I	NFORMATION (SURVEY REQUIR	ED)
C1. Building elevations are to *A new Elevation Certific C2. Elevations – Zones A1-A below according to the to Benchmark Utilized SIT Conversion/Comments	cate will be require A30, AE, AH, A (volution of the control of th	vith BFE), VE, V1-V3 specified in Item A7.	of the building 0, V (with BFE Use the same	, AR, AR/A, AR/AE datum as the BFE.	E, AR/A1-A30, AR/AI	⊠ Finished Construction ∃, AR/AO. Complete Items C2.a-h nent used. □
a) Top of bottom floor	(including basem	ent, crawlspace, or e	nclosure floor)	<u>10.1</u> ⊠ fe	et 🔲 meters (Puert	to Rico only)
b) Top of the next high					et 🔲 meters (Puert	
c) Bottom of the lowest horizontal structural member (V Zones only) N./A					et ☐ meters (Puert et ☐ meters (Puert	
	machinery or eq	uipment servicing the ation in Comments)	building		et	* *
f) Lowest adjacent (fir		* ' '			et 🔲 meters (Puert	3,
g) Highest adjacent (fih) Lowest adjacent grastructural support		xt to building (HAG) vation of deck or stain	s, including		et ☐ meters (Puert et ☐ meters (Puert	• •
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION						
This certification is to be signiformation. I certify that the I understand that any false S Check here if comments	information on ti tatement may be	his Certificate represe punishable by fine of back of form. V	ents my best ei r imprisonmen	forts to interpret the under 18 U.S. Con nd longitude in Sec	e data available. de, Section 1001. tion A provided by a	4 75:00
Certifier's Name ANTONIO	TRIGO	(87.0751.0)	License Number 2	2982	
Title PROFESSIONAL SUR					RIGO & ASSOC., INC	
Address 2223 TRADE CAS	MER WAY	City NAPLES		State FL	ZIP Code 34109	_ X//
Signature		Date 4/6	/2011	Telephone (239)	594-8448	4/6/2011

	copy the corresponding information from		For Insurance Company Use:		
Building Street Address (including Apt 822 MAGNOLIA COURT	., Unit, Suite, and/or Bldg. No.) or P.O. Route an	d Box No.	Policy Number		
City MARCO ISLAND State FL ZIF	Company NAIC Number				
SECTION	I D - SURVEYOR, ENGINEER, OR ARCHI	TECT CERTIFICATION (CON	TINUED)		
Copy both sides of this Elevation Certi	ificate for (1) community official, (2) insurance ag	ent/company, and (3) building owr	ner.		
Comments C2e = A/C PAD					
Signature	Date	4/6/2011			
SECTION E BUILDING ELE	VATION INFORMATION (SURVEY NOT F	REQUIRED) FOR ZONE AO A	ND ZONE A (WITHOUT BFE)		
For Zones AO and A (without BFE), c and C. For Items E1-E4, use natural	omplete Items E1-E5. If the Certificate is intende grade, if available. Check the measurement use	ed to support a LOMA or LOMR-F d. In Puerto Rico only, enter mete	request, complete Sections A, B, irs.		
E1. Provide elevation information for grade (HAG) and the lowest adjusted	r the following and check the appropriate boxes t	o show whether the elevation is at	pove or below the highest adjacent		
a) Top of bottom floor (including	basement, crawlspace, or enclosure) is	feet	above or 🔲 below the HAG.		
b) Top of bottom floor (including	basement, crawlspace, or enclosure) is		above or below the LAG.		
(elevation C2.b in the diagrams)	permanent flood openings provided in Section A of the building is feet _ m	neters above or below the	HAG.		
E3. Attached garage (top of slab) is	feet				
	d/or equipment servicing the building is number is available, is the top of the bottom floo				
	 Unknown. The local official must certify this ir 		confindintly's noodplast management		
	F - PROPERTY OWNER (OR OWNER'S		ICATION		
The property owner or owner's authorized representative who completes Sections A, B, 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, and E are correct to the best of my knowledge.					
Property Owner's or Owner's Authorize					
	City	State	ZIP Code		
Address	City	State	ZIF Gode		
Signature	Date	Telephon	e		
Comments					
			☐ Check here if attachments		
	SECTION G - COMMUNITY INFOR	MATION (OPTIONAL)			
The local official who is authorized by la	w or ordinance to administer the community's flo aplete the applicable item(s) and sign below. Che	odplain management ordinance ca	an complete Sections A, B, C (or E), s G8 and G9.		
31. ☐ The information in Section C v	was taken from other documentation that has been elevation information. (Indicate the source and c	en signed and sealed by a licensed	surveyor, engineer, or architect who		
32. A community official complete	d Section E for a building located in Zone A (with	nout a FEMA-issued or community	issued BFE) or Zone AO.		
33. The following information (Iter	ns G4-G9) is provided for community floodplain r	management purposes.			
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compl	iance/Occupancy Issued		
37. This permit has been issued for:	☐ New Construction ☐ Substantial Im	provement			
38. Elevation of as-built lowest floor (in	ncluding basement) of the building:	feet meters (PR) Datum			
69. BFE or (in Zone AO) depth of flood	fing at the building site:	☐ feet ☐ meters (PR) Datum			
310. Community's design flood elevatio	n	☐ feet ☐ meters (PR) Datum	-		
Local Official's Name	Tit	Ha			
		elephone			
Community Name	Da		·····		
Signature	De				
Comments					
			- 14 - 14 - 14 - 14 - 14 - 14 - 14 - 14		
			Check here if attachments		

Building PhotographsSee Instructions for Item A6.

	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 822 MAGNOLIA COURT	Policy Number
City MARCO ISLAND State FL ZIP Code 34145	Company NAIC Number

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.



Front View 4/6/2011



Rear View 4/6/2011

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