## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

010291, 010292, 0.M.B. No. 3067-0077 011429 Expires July 31, 2002

## ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

	SECTION A - PR	ROPERTY OWNER INFORMATION		For Insurance Company Use:	
BUILDING OWNER'S NAME GLENN M. ORR				Policy Number	
BUILDING STREET ADDRESS (Including Apt, Unit 1824 MENORCA COURT	t, Suite, and/or Bldg. No.) OR P.O.	ROUTE AND BOX NO.	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	Company NAIC Number	
CITY MARCO ISLAND	<u> </u>	STATE	ZIP CODE 34145		
PROPERTY DESCRIPTION (Lot and Block Number LOT 5, BLOCK 67, MARCO BEACH UN BUILDING USE (e.g., Residential, Non-residential, ADDITION	IT TWO		· ·		
LATITUDE/LONGITUDE (OPTIONAL)  ( ### - ### - ###### or ########)	HORIZONTAL DATUM:  NAD 1927 NAD 1983	· · · · · · · · · · · · · · · · · · ·	GPS (Type): USGS Quad Map	Other:	
	SECTION B - FLOOD IN	ISURANCE RATE MAP (FIRM) INF	ORMATION		
B1. NFIP COMMUNITY NAME & COMMUNITY NU 120067		COUNTY NAME )LLIER	B3 F1	STATE	
B4. MAP AND PANEL B5. SUFFIX NUMBER 120426/804	B6. FIRM INDEX DATE 7-20-98	B7. FIRM PANEL EFFECTIVE/REVISED DATE 6-3-86	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 10	
B10. Indicate the source of the Base Flood Elev  FIS Profile  FIRM  B11. Indicate the elevation datum used for the Elevation at Coastal Barrier	Community Determ FE in B9: X NGVD 1929 Resources System (CBRS) a	ined Other (Desc NAVD 1988 rea or Otherwise Protected Area (OP	Other (Describe):  A)? Yes No	Designation Date	
		LEVATION INFORMATION (SURV			
C1. Building elevations are based on: [ ] Cons	· · · · · · · · · · · · · · · · · · ·		Finished Construction		
*A new Elevation Certificate will be required			1 t	ne Canal 7 If no diagram	
C2. Building Diagram Number 1 (Select the building Diagram Number 1)		ne building for which this certificate is	peing completed - see page	es o and 7. Imo diagram	
accurately represents the building, provide C3. Elevations – Zones A1-A30, AE, AH, A (with	• • • •	REEN AR ARIA ARIAE ARIA1.ARA	ARIAH ARIAO		
Complete Items C3a-i below according to the				e datum used for the BFE in	
Section B, convert the datum to that used for	• • • • • • • • • • • • • • • • • • •				
Section D or Section G, as appropriate, to o		·			
Datum Conversion/Comments			: ,		
Elevation reference mark usedDoe	es the elevation reference mari	k used appear on the FIRM? [] Ye	es 🗌 No		
a) Top of bottom floor (including basem		10. 1 ft.(m)	<u>- 22</u>		
□ b) Top of next higher floor		. ft.(m)	S. S.		
C) Bottom of lowest horizontal structural	member (V zones only)	ft.(m)	SSe(		
d) Attached garage (top of slab)		8. 1ft.(m)	Embo		
e) Lowest elevation of machinery and/o	r equipment		₩ o		
servicing the building		<u>10</u> . Oft.(m)	m m po		
🖵 f) Lowest adjacent grade (LAG)		7.9ft(m)	∃ ig	3-9.5	
🖵 g) Highest adjacent grade (HAG)		<u>8</u> . <u>2</u> ft.(m)	SE CONTRACTOR OF THE CONTRACTO	FL:CERT NO:4520 -	
h) No. of permanent openings (flood ve			9	77.	
i) Total area of all permanent openings					
		R, ENGINEER, OR ARCHITECT C		2-27-01	
This certification is to be signed and sealed a locality that the information in Sections A	, B, and C on this certificate	e represents my best efforts to inte	erpret the data available.	i i i casilièt e	
I understand that any false statement ma CERTIFIER'S NAME	y be punishable by fine or i	mprisonment under 18 U.S. Code	, Section 1001. LICENSE NUMBER <b>452</b> 0	<u> </u>	
TITLE Surveyor		COMPANY NAME Bruns & Bruns, Inc.			
ADDRESS		CITY	STATE	ZIP CODE	
1072 6th. Avenue N.		Naples	FL	34102	
SIGNATURE	<del></del>	DATE	TELEPH 941-26		
	<u></u>	8-15-01			
FEMA Form 81-31 ALIG 99	SEE REVERS	F SIDE FOR CONTINUATION	REPLA	CES ALL PREVIOUS EDITIONS	

SEE REVERSE SIDE FOR CONTINUATION

FFMA Form 81-31 AUG 99

IMPORTANT: In these spaces		For Insurance Company Use:		
BUILDING STREET ADDRESS (Inc	NO.		Policy Number	
СПҮ	STATE	······································	ZIP CODE	Company NAIC Number
<del>(Plaint) que apprime d'Albania (Principal de Server) de la la la que esfant que principal de la communicació de la communicaci</del>	SECTION D - SURVEYOR, ENGINEER, OR ARCH	ITECT CERTIFICA	TION (CONTINUED)	· And the state of the last of the state of
Copy both sides of this Elevation	n Certificate for (1) community official, (2) insurance agent/con			
COMMENTS	- Cordinacio for (1) confirmating ornasa, (2) maana agonia con			
<del></del>			·	·
<del>-^</del>	· <del></del>	·		
·	·			·
				Check here if attachments
SECTION	E - BUILDING ELEVATION INFORMATION (SURVEY NOT	REQUIRED) FOR	ZONE AO AND ZONE A	(WITHOUT BFE)
For Zone AO and Zone A (withou	t BFE), complete Items E1 through E4. If the Elevation Certific	cate is intended for t	ise as supporting informat	ion for a LOMA or LOMR-F,
Section C must be completed.	·			A 17 16 W 11
E1. Building Diagram Number _( represents the building, provi	(Select the building diagram most similar to the building for while a sketch or photograph.)	ich this certificate is i	being completed – see pa	ges 6 and 7. If no diagram accurately
•	icluding basement or enclosure) of the building is ft.(m) _	in.(cm) above	or below (check one)	the highest adjacent grade.
	th openings (see page 7), the next higher floor or elevated floo			
grade.			•	
	depth number is available, is the top of the bottom floor eleva	•	vith the community's flood	plain management ordinance?
YesNoUnkr	nown. The local official must certify this information in Section		REAL COMMISSION AND AND AND AND AND AND AND AND AND AN	
The property outper excession of a	SECTION F - PROPERTY OWNER (OR OWNER'	<del>مر او در اما برها از بره پر بر بر بر بر استوب از ۱۳۶۰ بر بر بروی بروی بروی بروی بروی بروی برو</del>		white induced DEEN or Zone AC) much
sign here.	authorized representative who completes Sections A, B, and E	: KOLZOHE A (WILIKOLI	La Feivia-issueu of Comm	iumly-issued of E) of Zone AO mast
PROPERTY OWNER'S OR OWNER	ER'S AUTHORIZED REPRESENTATIVE'S NAME	<del>,</del>	<del></del>	<del></del>
ADDRESS	· · · · · · · · · · · · · · · · · · ·	/ CITV	STATI	E ZIP CODE
	·	CITY		······································
SIGNATURE		DATE	TELEF	PHONE
COMMENTS	······································			4
<del></del>	· · · · · · · · · · · · · · · · · · ·		<del></del>	Check here if attachments
<del></del>	SECTION G - COMMUNITY INFO	RMATION (OPTIO	NAL)	
The local official who is authorize	d by law or ordinance to administer the community's floodplain	<del></del>		ons A. B. C (or E), and G of this Elevat
Certificate. Complete the applica				· · · · · · · · · · · · · · · · · · ·
	on C was taken from other documentation that has been signe			neer, or architect who is authorized by
<del></del>	fy elevation information. (Indicate the source and date of the e		·	
	ripleted Section E for a building located in Zone A (without a FE or (Items G4-G9) is provided for community floodplain manager		nunity-issued BFE) of Zor	REAU.
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		TE CERTIEICATE OF COM	PLIANCE/OCCUPANCY ISSUED
CAT L'ANTI LACHARTETT	GO. DATE FERMINISSOED	المراق		F LIMINOED COOP MING I TOOOLED
G7. This permit has been issued	for: New Construction Substantial Improvement		· <u></u>	<u>, , , , , , , , , , , , , , , , , , , </u>
	oor (including basement) of the building is:	:	ft.(m)	Datum:
G9. BFE or (in Zone AO) depth of	of flooding at the building site is:		ft.(m)	Datum:
LOCAL OFFICIAL'S NAME	•	TITLE		
COMMUNITY NAME		TELEPHONE	······································	· · · · · · · · · · · · · · · · · · ·
SIGNATURE V 10 1 2 10		DATE O	1,-10	
COMMENTS	MLX	8	HIUI	
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<u> </u>				Check here if attachments
<del></del>	<del></del>	<del></del>		