

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

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

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

		DEC HOW W	PROPERTY OWNER INFORM	AIUN	For insurance Company Use:
BUILDING OWNER'S NAM					Policy Number
SLAND COUNTRY (BUA VIU	Company NAIC Number		
00 NASSAU COURT - M	•		3ldg. No.) OR P.O. ROUTE AND		
CITY			STATE	ZIP 341	CODE
MARCO ISLAND	N /I of and Rlock I	Numbers Tay Parcel N	FL lumber, Legal Description, etc.)		今 ひ <u></u>
RACT A, MARCO BEACH	•				
BUILDING USE (e.g., Resi NON-RSIDENTIAL	dential, Non-resid	ential, Addition, Acces	sory, etc. Use a Comments area,	if necessary.)	•
LATITUDE/LONGITUDE (OPTIONAL)	HORIZO	NTAL DATUM:	SOURCE: GPS	
(##°-##-##.##" or ##.#	#### ⁶)	⊠ NAD 192	7 NAD 1983	⊠ USG	S Quad Map Other:
	\$	ECTION B - FLOOD	INSURANCE RATE MAP (FIRN	I) INFORMATION	
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER 120067			B2. COUNTY NAME COLLIER		B3. STATE FL
B4. MAP AND PANEL			B7. FIRM PANEL		B9. BASE FLOOD ELEVATION(S)
NUMBER 120426/0804	B5. SUFFIX D	B6. FIRM INDEX DATE 7-20-98	EFFECTIVE/REVISED DATE 6-3-86	B8. FLOOD ZONI AE	E(S) (Zone AO, use depth of flooding)
310. Indicate the source of the	Base Flood Flevat				
-	S FIRM	Community Det	·	escribe):	
311. Indicate the elevation dat	um used for the BF			388 Other (Descrit	œ):
112. Is the building located in	a Coastal Barrier Re	esources System (CBRS) area or Otherwise Protected Area ((OPA)? Yes 🖂	No Designation Date
	SEC	TION C - BUILDING	ELEVATION INFORMATION (S	SURVEY REQUIRED	
Complete Items C3a-i be	0, AE, AH, A (with I elow according to th	e building diagram spec		d. If the datum is differen	t from the datum used for the BFE in
3. Elevations – Zones A1-A3 Complete Items C3a-i be	elow according to the law to that used for appropriate, to do on/Comments	BFE), VE, V1-V30, V (with the building diagram specified meant the BFE. Show field meant the datum converse or elevation reference materials or enclosure)	th BFE), AR, AR/A, AR/AE, AR/A1-A fied in Item C2. State the datum used asurements and datum conversion ca	d. If the datum is different alculation. Use the space Yes No	e provided or the Comments area of
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IMPORTANT: In these spaces, copy	the corresponding information from Sect	on A.	For Insulance Company Use:
BUILDING STREET ADDRESS (Including Apt, Ur	nit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX I	10. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Policy Number
CITY		ZIPCC	DE Company NAIC Number
SECTIC	IN D - SURVEYOR, ENGINEER, OR ARCH	ITECT CERTIFICATION (C	ONTINUED)
The state of the s	or (1) community official, (2) insurance agent/com	Company of the property of the party of the	in and an angle of the second
COMMENTS			
en de la companya de La companya de la companya del companya del companya de la companya del companya de la companya de la companya del companya de la compa		· · · ·	
			Check here if attachments
	EVATION INFORMATION (SURVEY NOT		
ection C must be completed. 1. Building Diagram Number(Select the burepresents the building, provide a sketch of the top of the bottom floor (including base natural grade, if available). 3. For Building Diagrams 6-8 with openings (grade. Complete items C3.h and C3.i on 4. The top of the platform of machinery and/or natural grade, if available). 5. For Zone AO only: If no flood depth numbers No Unknown. The king year of the property owner or owner's authorized referenced BFE) or Zone AO must sign here. The property owner or owner's authorized referenced BFE or Zone AO must sign here.	or photograph.) ement or enclosure) of the building isft.(m) (see page 7), the next higher floor or elevated floor front of form. or equipment servicing the building isft.(m) per is available, is the top of the bottom floor elevated official must certify this information in Section ON F - PROPERTY OWNER (OR OWNER expresentative who completes Sections A, B, C (Itellight of the statements in Sections A, B, C, and E are completed on the statements of the sections A, B, C, and E are completed on the statements of the sections A, B, C, and E are completed on the section of the s	th this certificate is being completion. (cm) above or below r (elevation b) of the building is in. (cm) above or below ted in accordance with the commerce. SREPRESENTATIVE) CERTIFICATION CERTIFICAT	ded – see pages 6 and 7. If no diagram accurately (check one) the highest adjacent grade. (Useft.(m)in.(cm) above the highest adjacent (check one) the highest adjacent grade. (Use nunity's floodplain management ordinance? RTIFICATION If you diagram accurately accurately accurately adjacent grade. (Use nunity's floodplain management ordinance?
SIGNATURE			
COMMENTS			
			Check here if attachments
	SECTION G - COMMUNITY INF	ORMATION (OPTIONAL)	mplete Sections A, B, C (or E), and G of this Elevat
Certificate. Complete the applicable item(s) a G1. The information in Section C was tal or local law to certify elevation inform G2. A community official completed Sect	and sign below.	ed and embossed by a licensed stion data in the Comments area letter that is sued or community-issue them the purposes.	surveyor, engineer, or architect who is authorized by below.)
•	w Construction Substantial Improvement g basement) of the building is: t the building site is:		ft.(m) Datum: ft.(m) Datum:
LOCAL OFFICIAL'S NAME		TITLE	
COMMUNITY NAME		TELEPHONE	
SIGNATURE		DATE	
COMMENTS			
COMMENTS			
COMMENTS			Check here if attachment

147 BU B.O. 9-8-66