HOUSE PERMIT

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

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

ELEVATION CERTIFICATE

POOL PERMIT 041042

Important: Read the instructions on page1 - 7.

	739	SECTION SECTION	ON A - PROPE	RTY INFOR	MATION	.:	For Insurance Company Use:
BUILDING OWNER'S NAME							Policy Number
Tom Christian			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
BUILDING STREET ADD 725 Nautilus Court	X NO.	Company NAIC Number					
CITY			•		STATE		ZIP CODE
Marco Island	ON (Let and	Diock Numbers Tax	Dargot Number	ogal Decarint	ion oto \		34145
PROPERTY DESCRIPTI Lot 5 Block 363	•	Marco Beach Unit			Pages 80-86		
BUILDING USE (e.g. Res						ssary.)	
Residential	· .		· · · · · · · · · · · · · · · · · · ·				
LATITUDE/LONGITUDE	•		NTAL DATUM		E: GPS (Typ	· · · · · · · · · · · · · · · · · · ·	
(##°-##'-##.##" or i	##.##°)	☐ NAD 1927	NAD 19	83	USGS Qu	lad Map	Other:
	S	ECTION B - FLOOI	D INSURANCE	RATE MAP	(FIRM) INFOR	MATION	
B1. NFIP COMMUNITY N	NAME & CO	•	B2. COUN		ollier		B3. STATE FL
B4. MAP AND PANEL	B5.	86. FIRM INDEX	B7. FIRM F	ANEL	B8. FLOOD	B9. B	ASE FLOOD ELEVATION(S)
NUMBER	SUFFIX	DATE	EFFECTIVE/F]	ZONE(S)	(In AO	Zones, use depth of flooding)
0803	F	July 20, 1998	July 20,		AE		11
B10. Indicate the source					·		
B11. Indicate the elevat		RM Con	•		Other (Des		
R12 Is the building loca	ated in a Co	oastal Barrier Resol	urces System (CBRS) area	or Otherwise Pr	otected A	rea (OPA)? ☐ Yes ⊠ No
Designation Date:				J. (J) a. Ja			
		SECTION C	- BUILDING E	LEVATION	INFORMATION		
C1. Building elevations	are based	on: Construc	tion Drawings*	Buildir	ng Under Constr	uction*	
*A new Elevation C	ertificate v	vill be required whe	n construction o	of the building	g is complete.		
							ertificate is being completed -
		accurately represe	_	•	_	_	4.4.400 AD/ALL AD/AC
C3. Elevations – Zones	A1-A3U, A	NE, AM, A (With Bre	i), VE, VI-V3U, dina dicarom en	ocified in Her), AR, AR/A, AR >> C2 State the /	/AE, AR// datum uc/	41-A30, AR/AH, AR/AO ed. If the datum is different from
				ecined in ite	II CZ. Otale life (aatuiii ust	su. Il the ubtuill is unfolcint iloi
		i Section H. Conveti	t the datum to t				
Calcalation. Cos the				hat used for	the BFE. Show t	field mea	surements and datum convers
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IMPORTANT: In these spaces,	For Insurance Company Use:				
BUILDING STREET ADDRESS (Incli 725 Nautilus Court		والمستنب والمناز والمرجون والمستنب النفاق والمام أأثث والمستنب والمنازع والمتا	er) OR P.O. ROUTE	AND BOX NO.	Policy Number
CITY Marco Island		STATE FL		ZIP CODE 34145	Company NAIC Number
					NITIALI IESA
Copy both sides of this Elevation COMMENTS	O – SURVEYOR. El Certificate (1) com	 	المستحدد وخبيها لنضون المناون الخالة المتاوية		
·	n of machinery and	or equipment sev	icing the building	is located on Ro	of
	- Or madrim or y arran	- OI Oquipilione oov			
				<u> </u>	
SECTION E-BUILDING ELEV	ATION INFORMAT	ION (SURVEY N	OT REQUIRED) F	OR ZONE AO	and ZONE A (WITHOUT BFE)
The property owner or owner's autommunity-issued BFE) or Zone A PROPERTY OWNER'S OR OWNER ADDRESS	(Select the building am accurately reprected in accurately and accurately	be completed. g diagram most singletes the building or enclosure) of the de, if available). ge 7), the next high plete items C3. however servicing the available, is the top label, is the top label, which was a label, which was a label, is the top label. WNER (OR OWN tive who complete the complete servicing the label, which was a label. PRESENTATIVE'S I CITY	milar to the building, provide a sketch building is ft. ther floor or elevate and C3.i on front of the bottom floor. The local officient of the bottom floors. The local officient of the Sections A, B, and C3.i on front of the bottom floors. The local officient of the bottom floors.	ng for which this or photograph.) (m) in. (encoder form. (m) in.(cm) or elevated in according to the content of the co	certificate is being completed — a) above or below (check on b) of the building is ft.(m) above or below (check one) cordance with the community's his information in Section G. IFICATION
SIGNATURE		DATE	TELEPHO	NE	
COMMENTS					
			······································		
					Check here if attachments
	SECTION G	- COMMUNITY I	NFORMATION (C	PTIONAL)	
The local official who is authorized Sections A, B, C, (or E), and G of the G1. The information in Section engineer, or architect who elevation data in the Commoder A community official completion A community official completion (in Eq. (in the following information (in G3. The following information (in G3. (in the following information (in G3. (in the following information (in G3. (in the following information (in the following in the following information (in the following information (in the following in the f	this Elevation Certification Communication of the C	ther documentationate or local law to a building located	he applicable item on that has been some certify elevation in Zone A (without	i(s) and sign belonged and embed and embed and embed and embed and embed in the second and embed are second as the second area of the second and embed are second as the second area of	ow. ossed by a licensed surveyor, cate the source and date of the d or community issued BFE) or
G4. PERMIT NUMBER	G5. DATE PERMI				F COMPLIANCE/OCCUPANCY
G7. This permit has been issued for G8. Elevation of as-built lowest floor G9. BFE or (in Zone AO) depth of	or (including basem	ent) of the buildin	antial Improvemen		ft. (m) Datum:ft. (m) Datum:
LOCAL OFFICIAL'S NAME			TITLE		
COMMUNITY NAME			ELEPHONE		
SIGNATURE 3	5	DATE	1-6-5		
COMMENTS:	V				
				······································	
					☐ Check here if attachments