## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires July 31, 2002

**ELEVATION CERTIFICATE** Important: Read the instructions on page1 - 7. SECTION A - PROPERTY INFORMATION For Insurance Company Use: **BUILDING OWNER'S NAME** Policy Number LOUIS AND VANESSA VERVILLE BUILDING STREET ADDRESS (Including Apt., Unit, Suite and/or Bldg. Number) OR P.O. ROUTE AND BOX NO. Company NAIC Number 1430 SALVADORE COURT CITY STATE ZIP CODE MARCO ISLAND 34145 PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 11, BLOCK 314, "MARCO BEACH UNIT NINE" PLAT BOOK 6, PAGES 69-73 BUILDING USE (e.g. Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL SOURCE: GPS (Type): LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM ##° - ##' - ##.##" or ##.##°) ☐ USGS Quad Map ☐ Other: NAD 1927 ☐ NAD 1983 SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B3. STATE B2. COUNTY NAME** COLLIER 120426 **B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX B7. FIRM PANEL** B8. FLOOD **B9. BASE FLOOD ELEVATION(S)** NUMBER DATE EFFECTIVE/REVISED DATE (in AO Zones, use depth of flooding) ZONE(S) AUG. 3, 1992 0812 AE B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. Community Determined FIS Profile FIRM Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: X NGVD 1929 X NAVD 1988 X Other (Describe): B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? [] Yes 🔯 No Designation Date: SECTION C - BUILDING ELEVATION INFORMATION C1. Building elevations are based on: 

Construction Drawings\*

Building Under Construction\* \*A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO Complete Items C3a-I below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate to document the datum conversion. Conversion/Comments Datum NGVD 1929 Does the elevation reference mark used appear on the FIRM? 

Yes 

No Elevation reference mark used 5.12' a) Top of bottom floor (including basement or enclosure) b) Top of next higher floor ft. <del>(m)</del> C) Bottom of lowest horizontal structural member (V zones only) ft. <del>(m)</del> ft. <del>(m)</del> e) Lowest elevation of machinery and/or equipment servicing the building ft. <del>(m)</del> I f) Lowest adjacent grade (LAG) ft. <del>(m)</del> ft. <del>(m)</del> g) Highest adjacent grade (HAG) T. ALAN NEAL M h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade P.S.M. #4656 i) Total area of all permanent openings (flood vents) in C3h 965 sq. in. <del>(sq. cm)</del> SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION 4-28-00 This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information in Section A, B, and C on this certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. LICENSE NUMBER CERTIFIER'S NAME P.S.M. #4656 T. ALAN NEAL COMPANY NAME TITLE AMERICAN ENGINEERING CONSULTANTS, Inc. VICE PRESIDENT ZIP CODE CITY STATE ADDRESS 34103 **FLORIDA NAPLES** 790 HARBOUR DRIVE

TELEPHONE

(941) 649-1551

SIGNATURE

DATE

IMPORTANT: In these spaces, copy t	he corresponding inforr	nation from	n Section A.	For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt  1430 SALVADORE COURT	STREET ADDRESS (Including Apt., Unit, Suite and/or Bldg. Number) OR P.O. ROUTE AND BOX NO.			D. Policy Number
MARCO ISLAND	STATE	· · · · · · · · · · · · · · · · · · ·	ZIP CODE 34145	Company NAIC Number
SECTION D – SURopy both sides of this Elevation Certific OMMENTS	cate (1) community officia			
SECTION E- BUILDING ELEVATION  To Zone AO and Zone A (without BFE),  To Transition for a LOMA of LOMR-F, Sector	complete Items E1 throughout the completed.	gh E3. If the	Elevation Certificate	is intended for use as supporting
see pages 6 and 7. If no diagram accomplete top of the bottom floor (including (check one) the highest adjacent grade For Zone AO only: If no flood depth floodplain management ordinance?	urately represents the built basement or enclosure) le. number is available, is the	lding, provi of the build e top of the	de a sketch or photoging is ft. (nh) bottom floor elevate	graph.) in. <del>(cm)</del> above or below d in accordance with the community'
	OPERTY OWNER (OR O		· <u></u>	
e property owner or owner's authorized mmunity-issued BFE) or Zone AO mus	representative who com			
ROPERTY OWNER'S OR OWNER'S AUTH	IORIZED REPRESENTATIVI	E'S NAME		
DDRESS	CITY		STATE	ZIP CODE
GNATURE	DATE		TELEPHONE	
OMMENTS			·	
	· · · · · · · · · · · · · · · · · · ·			Chook hara if attachma
S	ECTION G - COMMUNIT	Y INFORM	IATION (OPTIONAL	Check here if attachme
ne local official who is authorized by lavections A, B, C, (or E), and G of this Elections A in the information in Section C was engineer, or architect who is authorized elevation data in the Comments and E. A community official completed Section 20 and AO.  The following information (Items 6.)	taken from other docume to taken from other docume or local la area below. Section E for a building local la section E for a building la section E for a b	entation that we to certify cated in Zor	plicable item(s) and set has been signed and elevation information are A (without a FEMA	sign below. Id embossed by a licensed surveyor, Indicate the source and date of the source
4. PERMIT NUMBER G5.	DATE PERMIT ISSUED		G6. DATE CERTIFICA	TE OF COMPLIANCE/OCCUPANCY
7. This permit has been issued for:   3. Elevation of as-built lowest floor (incl  4). BFE or (in Zone AO) depth of flooding	luding basement) of the b	·.	Improvement	ft. <del>(m)</del> Datum: ft. <del>(m)</del> Datum:
OCAL OFFICIAL'S NAME		TITLE		
OMMUNITY NAME		TELEPH	ONE	
GNATURE WWW. WILL	DATE	W/25	101	
OMMENTS:				
		·		☐ Check here if attachme
EMA Form 81-31, AUG 99				REPLACES ALL PREVIOUS EDITIO