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And the Committee of the State of the Committee of the Co

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

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28, 2009

vational Flood Insurance Prog	;ram	<u> </u>		important: Rea	id the instructio	ns on pages 1-8.
	•	SEC	CTION A - PR	OPERTY INFORM	ATION	For Insurance Company Use:
A1. Building Owner's Name	3LY		Policy Number			
A2. Building Street Address (in 530 SAND HILL ST.	g. No.) or P.O. R	oute and Box No.	Company NAIC Number			
City MARCO ISLAND			State FLORIDA Z			IP Code 34145
A3. Property Description (Lot LOT 4 BLOCK		bers, Tax Parcel Num MARCO BEAC		ption, etc.)	· · · · · · · · · · · · · · · · · · ·	
44. Building Use (e.g., Reside	ntial, Non-Resid	lential, Addition, Acc	essory, etc.)	RESIDENTIAL GA	RAGE ADDITION	• •
A5. Latitude/Longitude: Lat	25° 55′ 25. 8	3 " N	Long. <u>81°</u>	2'20. 3 " W	Horizontal D	Patum: NAD 1927 NAD 198
A6. Attach at least 2 photograp		ng if the Certificate is	being used to ob	tain flood insurance.		
 No. Building Diagram Number For a building with a craw 		sure(s), provide:		A9. For a b	uilding with an attacl	ned garage, provide:
a) Square footage of crav	N/A sq f		ned garage855 sq ft			
b) No. of permanent flood openings in the crawl space or			TAT / A		openings in the attached garage	
enclosure(s) walls within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b			<u>N/A</u> sq i		ove adjacent grade5 penings in A9.b1000 sq in	
		· · · · · · · · · · · · · · · · · · ·				
······································	SEC	TION B - FLOOD	INSURANCE	RATE MAP (FIRI	M) INFORMATIO	N
B1. NFIP Community Name & Community Number CITY OF MARCO ISLAND 120426			B2. County Na COLLIER	me		B3. State FLORIDA
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index	B'	7. FIRM Panel	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone A
20216 0012	•	Date	Effec	tive/Revised Date	A EC	use base flood depth)
2021C 0812 0. Indicate the source of the I		11/17/05		11/17/05	AE	+12.3'
2. Is the building located in a Designation Date		Resources System (C	CBRS) area or Oth		(OPA)?	Yes No
	SECTIO	N C - BUILDING	ELEVATION	INFORMATION (S	SURVEY REQUI	RED)
	e will be required, AE, AH, A (wi	th BFE), VE, V1-V3	of the building is	•		Finished Construction AR/AO. Complete Items C2.a-g below
according to the building dia Benchmark Utilized	_ "	n nem A7. NCHMARK		Vertical Datum	NC	SVD 1929
Conversion/Comments				· · · · · · · · · · · · · · · · · · ·		
				(Check the measureme	ent used.
a) Top of bottom floor (including basement, crawl space, or en			elosure floor)14.0 feet met			ters (Puerto Rico only)
b) Top of the next higher floor						ters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones			s only)	N/A		ters (Puerto Rico only)
d) Attached garage (top of slab)			milding	10.4 N/A		ters (Puerto Rico only) ters (Puerto Rico only)
 e) Lowest elevation of machinery or equipment servicing the but (Describe type of equipment in Comments) 			numg neet met			icis (i ucito icico omy)
f) Lowest adjacent (finished) grade (LAG)				10.3		ters (Puerto Rico only)
g) Highest adjacent (finis	hed) grade (HAC	G)		10.5	feet me	ters (Puerto Rico only)
	SECTIO	ON D - SURVEY	OR, ENGINEE	R, OR ARCHITEC	T CERTIFICATION	ON 9-4-01
his certification is to be signed formation. <i>I certify that the inunderstand that any false state</i>	formation on thi	is Certificate represei	nts my best efforts	to interpret the data a	vailable.	
Check here if commo		d on back of form.			0000	
Certifier's Name Antonio T			~	License Number 2		nc 9/25/2007
itle Professional Survey				ompany Name A.Trig		
Address 2223 Trade Certains	er way	City Naples	9/25/07	State Florida Telephone (239) 59	ZIP Code 34109	PLS No. 2982
ignature						
MA Form 81-31, Fybrua	ry 2006	5	See reverse si	de for continuation	•	Replaces all previous editie

				·
IMPORTANT: In these spaces, o	For Insurance Company Use:			
Building Street Address (including Apt. 530 SAND HILL ST.	Policy Number			
City MARCO ISLAND	State	Florida	ZIP Code 34145	Company NAIC Number
SECTION	D - SURVEYOR, ENGINEER,	OR ARCHITE	CT CERTIFICATION (CO	NTINUED)
Copy both sides of this Elevation Certifica	te for (1) community official, (2) insur	rance agent/compa	ny, and (3) building owner.	
Comments				
A9 b & c = 5 SMART VENTS @ 20	00 sq in EACH = 1000 sq in			
			•	-
Signature	ANTONIO TRIGO PLS	Date	9/25/07	Check here if attachments
SECTION E - BUILDING ELE	VATION INFORMATION (SUR	VEY NOT REC	UIRED) FOR ZONE AO	AND ZONE A (WITHOUT BFE)
the lowest adjacent grade (LAG). a) Top of bottom floor (including be b) Top of bottom floor (including b) E2. For Building Diagrams 6-8 with per the diagrams) of the building is E3. Attached garage (top of slab) is E4. Top of platform of machinery and/o E5. Zone AO only: If no flood depth no Yes No Unknown. The I	e, if available. Check the measurement me following and check the appropriate asement, crawl space, or enclosure) is a sement, crawl space, or enclosure) is manent flood openings provided in Secretary meters feet meters feet meters are requipment servicing the building is must carried the bottle local official must certify this information of the bottle local official must certify this information of the local official must certify the local official must certify the local official must certify this information of the local official must certify the local official	t used. In Puerto I boxes to show when the control of the control	Rico only, enter meters. ether the elevation is above or beet meters above or d/or 9 (see page 8 of Instruction with the HAG. with the HAG. feet meters above or in accordance with the communication.	below the HAG. below the LAG. s), the next higher floor (elevation C2.b in below the HAG. nity's floodplain management ordinance? IFICATION I or community-issued BFE) or Zone AO ZIP Code
	·	·	·	· · · · · · · · · · · · · · · · · · ·
				Check here if attachment
he local official who is authorized by law of	SECTION G - COMMUN or ordinance to administer the commun			ete Sections A, B, C (or E), and G of this
Elevation Certificate. Complete the applicated The information in Section Care			•	
law to certify elevation informati	ion. (Indicate the source and date of the	_		, engineer, or architect who is authorized by
[Section E for a building located in Zons G4G9.) is provided for community f			d BFE) or Zone AO.
G4. Permit Number	G5. Date Permit Issued		G6. Date Certificate Of Com	pliance/Occupancy Issued
37. This permit has been issued for:	New Construction Sub	stantial Improve	ment	
38. Elevation of as-built lowest floor (include	ding basement) of the building:	• • ——•	feet	R) Datum
39. BFE or (in Zone AO) depth of flooding	at the building site:	·	feet meters (P	R) Datum
Local Official's Name		Title		
Community Name	<u>, , , , , , , , , , , , , , , , , , , </u>	Telepl	none	· · · · · · · · · · · · · · · · · · ·
Signature	——————————————————————————————————————	Date		· · · · · · · · · · · · · · · · · · ·
Comments				
<u> </u>		·	· · · · · · · · · · · · · · · · · · ·	
·	•	·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	, <u>, , , , , , , , , , , , , , , , , , </u>		·	Check here if attachements

FEMA Form 81-31, February 2006

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Replaces all previous editions