## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires July 31, 2002 003143

## ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

|   |  | SECTION A -                                  | PROPERTY OWNER INFORMATION             | •                                      | For Insurance Company Use:             |  |
|---|--|--|--|--|--|--|
| BUILDING OWNER'S NAME   |  |  |  |  | Policy Number                          |  |
| RONALD & JULIA SMITI  |  |  |  |  |  |  |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.  900 SCOTT DRIVE  |  |  |  |  | Company NAIC Number                    |  |
| CITY<br>MARCO ISLAND  |  |  | STATE                                  | ZIP COD                                | E                                      |  |
| PROPERTY DESCRIPTION (L   | ot and Block Numbers   | Tax Parcel Number Tegal F                    | Description etc.)                      | 34145                                  |  |  |
| LOT 7, BLOCK 404, MAI   |  | · •  |  |  |  |  |
| BUILDING USE (e.g., Residenti   | al, Non-residential, Ad  | dition, Accessory, etc. Use C                | omments section if necessary.)         | <del></del>                            |  |  |
| RESIDENTIAL   |  | 1 (A) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C |  |  | · · · · · · · · · · · · · · · · · · ·  |  |
| LATITUDE/LONGITUDE (OPTI<br>( ### - ### - ##### or ########   |  | HORIZONTAL DATUM: NAD 1927 NAD 19            | _                                      | ☐ GPS (Type):<br>☐ USGS Quad Map       | Other:                                 |  |
| ( 111 111 1111 OI 1111111111111111111111  | · · · · · · · · · · · · · · · · · · ·  |  | ,uo                                    | OCOO QUUU IVICIP                       |  |  |
| ر بر کامل در بر   | ر بند با در  | SECTION B - FLOOD                            | INSURANCE RATE MAP (FIRM) INF          | ORMATION                               |  |  |
| 1   |  |  | 32. COUNTY NAME                        | ME B3. STATE                           |  |  |
| 120067  | ~  |  | COLLIER                                | <u> </u>                               | <u></u>                                |  |
| B4. MAP AND PANEL   | B5. SUFFIX   | B6. FIRM INDEX DATE                          | B7. FIRM PANEL                         | B8. FLOOD ZONE(S)                      | B9. BASE FLOOD ELEVATION(S)            |  |
| NUMBER  |  | 7-20-98                                      | EFFECTIVE/REVISED DATE                 | AE                                     | (Zone AO, use depth of flooding)       |  |
| 120426/812  | E  |  | 8-3-92                                 |  | 11                                     |  |
| B10. Indicate the source of the   | Base Flood Elevat  | ion (BFE) data or base flo                   | od depth entered in B9.                | ······································ | ······································ |  |
|   | FIRM   | Community Dete                               |  | ribe):                                 |  |  |
| B11. Indicate the elevation da  | tum used for the BF  | E in B9: 🔯 NGVD 1929                         | NAVD 1988                              | Other (Describe):                      |  |  |
| 312. Is the building located in   | a Coastal Barrier Re   | esources System (CBRS)                       | area or Otherwise Protected Area (OP   | A)? Yes No                             | Designation Date                       |  |
|   |  | SECTION C - BUILDING                         | ELEVATION INFORMATION (SURV            | EY REQUIRED)                           |  |  |
| C1. Building elevations are ba  | sed on: Constr   | uction Drawings*                             | Building Under Construction*           | Finished Construction                  |  |  |
| *A new Elevation Certifica  | ate will be required v   | vhen construction of the b                   | uilding 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 da   | tum to that used for   | the BFE. Show field mea                      | surements and datum conversion calcu   | lation. Use the space prov             | vided or the Comments area of          |  |
| Section D or Section G, a   | is appropriate, to do  | cument the datum conver                      | sion.                                  |  |  |  |
| Datum Conversi  | on/Comments  |  |  |  |  |  |
| Elevation reference mark  | usedDoes   | the elevation reference m                    | ark used appear on the FIRM? [] Ye     | s 🛛 No                                 | <u></u>                                |  |
| a) Top of bottom floor  | (including basemer   | nt or enclosure)                             | 11.2 ft.(m)                            | - <del>- 0</del>                       | V >.                                   |  |
| ☐ b) Top of next higher f   | loor   |  | . ft(m)                                | $\tilde{\omega}$                       | <b>5</b> /2                            |  |
| C) Bottom of lowest ho  |  | nember (V zones only)                        | ft.(m)                                 | ossed                                  |  |  |
| d) Attached garage (to  | op of slab)  | ,  | 8.6ft.(m)                              | Embo<br>and D                          |  |  |
| (Lowest elevation of  | -  | equipment                                    |  | ញ់ <b>ប៊ែ</b>                          |  |  |
| servicing the buildi  | <u>-</u>   | • •<br>·                                     | <u>11</u> . <u>1</u> ft(m)             | se Number,<br>Signature,               | 11/1//                                 |  |
| T) Lowest adjacent gra  | ade (LAG)  | -  | 8.4ft.(m)                              | N S S                                  | 5-28-01                                |  |
| g) Highest adjacent gr  | •  | •  | 8. <u>5</u> ft.(m)                     | age of                                 | FL. CERT NO. 4520                      |  |
| h) No. of permanent of  | • •  | s) within 1 ft. above adiace                 | <del>-</del> ' -                       | icensi                                 | . I'L, ULIVI NU. 4020                  |  |
| i) Total area of all pen  |  | •  | —                                      | 1                                      |  |  |
|   | ار معالم المعالم المعا |  | OR, ENGINEER, OR ARCHITECT CE          | RTIFICATION                            | 11-1-18                                |  |
| This cortification is to be   | alanad and analad  |  |  |  | rmation                                |  |
|   | <del></del> r  | •  | gineer, or architect authorized by law | •                                      | ·                                      |  |
| I certify that the information in Sections 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. |  |  |  |  |  |  |
| CERTIFIER'S NAME David B. Bruns   |  |  |  |  |  |  |
| TITLE Surveyor  |  | ······································       | COMPANY NAME BI                        | uns & Bruns, Inc.                      |  |  |
| ADDRESS   |  | ······································       | CITY                                   | STATE                                  | ZIP CODE                               |  |
| 1072 6th. Avenue N.   | _  |  | Naples                                 | FL                                     | 34102                                  |  |
| SIGNATURE   |  | · · · · · · · · · · · · · · · · · · ·        | DATE                                   | TELEPH                                 |  |  |
| //////  | 77   |  | 5-28-01                                | 941-26                                 | 1-5965                                 |  |

| IMPORTANT: In these spaces, copy the   | For Insurance Company Use:   |  |  |  |  |  |
|--|--|--|--|--|--|--|
|  | Init, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.   | <del>, de prijeste <u>d</u>ie en en de septe de la proposition de la proposition de la proposition de la proposition de la p</del> | Policy Number                              |  |  |  |
| CITY   | STATE  | ZIP CODE   | Company NAIC Number                        |  |  |  |
| SE   | CTION D - SURVEYOR, ENGINEER, OR ARCHITECT C   | ERTIFICATION (CONTINUED)   |  |  |  |  |
| Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.   |  |  |  |  |  |  |
| COMMENTS   | —  |  | · ····································     |  |  |  |
|  | - <del></del>  | ······································   | · · · · · · · · · · · · · · · · · · ·      |  |  |  |
| ——————————————————————————————————————   | <del></del>  | <del></del>  |  |  |  |  |
| ——————————————————————————————————————   |  | ······································   | Check here if attachments                  |  |  |  |
| SECTION E - BUILDIN  | G ELEVATION INFORMATION (SURVEY NOT REQUIR   | ED) FOR ZONE AO AND ZONE A   |  |  |  |  |
|  | olete Items E1 through E4. If the Elevation Certificate is inte  | ended for use as supporting informat   | ion for a LOMA or LOMR-F,                  |  |  |  |
| Section C must be completed. E1. Building Diagram Number _(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.)  |  |  |  |  |  |  |
| E2. The top of the bottom floor (including basement or enclosure) of the building is ft.(m) in.(cm) [ above or [ ] below (check one) the highest adjacent grade.  E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is ft.(m) in.(cm) above the highest adjacent   |  |  |  |  |  |  |
| grade.  E4. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?   |  |  |  |  |  |  |
|  | per is available, is the top of the bottom floor elevated in accordal official must certify this information in Section G. | ordance with the community's floodp  | iain management ordinance?                 |  |  |  |
| والمتناور المتناول والمتناور والمتاور والمتاور والمتناور والمتناور والمتناور والمتاور والمتاور والمتناور و | CTION F - PROPERTY OWNER (OR OWNER'S REPRE   | SENTATIVE) CERTIFICATION   |  |  |  |  |
| The property owner or owner's authorized resign here.  | presentative who completes Sections A, B, and E for Zone   | A (without a FEMA-issued or comm   | unity-issued BFE) or Zone AO must          |  |  |  |
| PROPERTY OWNER'S OR OWNER'S AUTHOR   | RIZED REPRESENTATIVE'S NAME  | ······································   | ·  |  |  |  |
| ADDRESS  | CITY   | STATE  | ZIP CODE                                   |  |  |  |
| SIGNATURE  | DATE   | TELEP  | HONE                                       |  |  |  |
| COMMENTS   | ·  |  | ·  |  |  |  |
|  |  | ······································   | Check here if attachments                  |  |  |  |
|  | SECTION G - COMMUNITY INFORMATION  | N (OPTIONAL)   |  |  |  |  |
| •  | rdinance to administer the community's floodplain manager  |  | ns A, B, C (or E), and G of this Elevation |  |  |  |
| Certificate. Complete the applicable item(s) as  |  | manad hu a linanaad ama araa araa araa   | war an architant cales in a dha dhadh i le |  |  |  |
|  | en from other documentation that has been signed and emb<br>information. (Indicate the source and date of the elevation d  |  | eet, or architect who is authorized by     |  |  |  |
| G2. A community official completed Section   | on E for a building located in Zone A (without a FEMA-issue  | d or community-issued BFE) or Zon  | e AO.                                      |  |  |  |
| ·  | 39) is provided for community floodplain management purpo  | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~   | <del></del>                                |  |  |  |
| G4. PERMIT NUMBER  | G5. DATE PERMIT ISSUED   | G6. DATE CERTIFICATE OF COMP   | PLIANCE/OCCUPANCY ISSUED                   |  |  |  |
| G7. This permit has been issued for: New   | •  | ······································   |  |  |  |  |
| G8. Elevation of as-built lowest floor (including G9. BFE or (in Zone AO) depth of flooding at t   | *  | ft.(m)   | Datum:                                     |  |  |  |
| LOCAL OFFICIAL'S NAME  |  | TLE ft.(m)   | Datum:                                     |  |  |  |
| COMMUNITY NAME   | <del></del>  | LEPHONE  | ······································     |  |  |  |
| SIGNATURE 1/   |  |  | <del></del>                                |  |  |  |
| COMMENTS   |  | 4TE 6/4/01   | ······································     |  |  |  |
|  | ·  | <del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>   |  |  |  |  |
| ·  |  | ·  | ·  |  |  |  |
| <del></del>  |  | <del></del>  | Check here if attachments                  |  |  |  |
|  |  |  |  |  |  |  |