House PERMIT # 023560 778 Sea Ct.

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

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

Important: Read the instructions on pages 1 - 7.

	SECTION A -	PROPERTY OWNER IN	FORMATION	For Insurance Company Use:		
BUILDING OWNER'S NAME				Policy Number		
Michael & Lisa Ward BUILDING STREET ADDRESS (Including		or Bldg. No.) OR P.O. ROUT	E AND BOX NO.	Company NAIC Number		
778 Sea Ct.	وروي والمستاب والمتاف والمستاب والمتاب		CTATE			
CMY Marco Island			STATE Florida	34145 ZIP CODE		
PROPERTY DESCRIPTION (Lot and Bloc			ı, etc.)			
Lot 3, Block 231, BUILDING USE (e.g., Residential, Non-res			nte area if necessory)			
residential			nes em ca, a mesessea y.,			
LATITUDE/LONGITUDE (OPTIONAL)	HORIZONT		CE: GPS (Type):_	ر مسمور موسود می به در به در می مورد نخیص می به در به در به این است کرد می است کا در به در به در به در به در د به معمور می مورد می در به در به در به می در از باز به می کرد که در سال کرد می کرد می کند بیز با در کاند می در د		
(##° - ##' - ##.##° or ##.####°)	NAD 1927	NAD 1983	USGS Quad M	ap Other:		
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP COMMUNITY NAME & COMMU		B2. COUNTY NAME				
City of Marco 120	,	Collier		B3. STATE Florida		
B4. MAP AND PANEL B5. SUFFIX	B6. FIRM INDEX		B8. FLOOD	B9. BASE FLOOD ELEVATION(S)		
NUMBER 120426 0803 F	7/20/98	EFFECTIVE/REVISED 7/20/98	DATE ZONE(S) AE	(Zone AO, use depth of flooding)		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.						
FIS Profile x FIRM	-	y Determined Oth		······································		
B11. Indicate the elevation datum used	,	• •	• •	· · · · · · · · · · · · · · · · · · ·		
B12. Is the building located in a Coastal	Bamer Kesources	System (CBRS) area or (Otherwise Protected A	rea (OPA)? Yes No		
Designation Date:						
SECTION	ON C - BUILDING I	ELEVATION INFORMATI	ON (SURVEY REQUI	RED)		
C1. Building elevations are based on:	•			Xx Finished Construction		
*A new Elevation Certificate will be	•	•	•			
C2. Building Diagram Number1 (S	•	_	·	s 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 C3.a-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 Sect	—	-				
	·			to document the datum conversion.		
Datum Conversion			oon o, do approprieto,	to document and detail compension.		
Elevation reference mark useds			rence mark used appe	ear on the FIRM? _ Yes x No		
a) Top of bottom floor (including			11 (M) =			
b) Top of next higher floor	•]	n/a ft.(#4) 0	PSM No. 2982		
C) Bottom of lowest horizontal str	•	zones only)	1/a ft.(m) # #			
d) Attached garage (top of slab)	•	0/0 = 0	<u>8</u> .4.(ħħ) 音音	9/8/03		
e) Lowest elevation of machiner		_				
servicing the building (Descri		area.)	11 . U ft.(m) & = = 7 . 9 ft.(m) & = = = = = = = = = = = = = = = = = =			
g) Highest adjacent (finished) gra	•		8 4 ft. (filt) 2 5			
h) No. of permanent openings (fl	•	ft. above adiacent grade				
☐ i) Total area of all permanent op						
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION 11-20-12						
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 Sections A, B, and C on this certificate represents my best efforts to interpret the data available.						
i understand that any false statement i	nay be punishable	by fine or imprisonment u		ection 1001.		
CERTIFIER'S NAME Antonio Trig	0		LICENSE NUMBER	No. 2982		
Time Professional Surve	Non 2 Manna	COMPANY NAM				
ADDRESS 2 To 1 C 1			STATE	sociates. Inc. ZPCODE		
SIGNATURE Trade Center	Way	N	aples	FL 34109		
		DATE 9/	8/03 TELEPH	(239)594-8448		
EMA Form 81-31 IIII 00	CCC DC\/E	PSE SIDE EOD CONTIN		LACES ALL DESMOUS EDITIONS		

MPORTANT: In these space	ces, copy the corresponding information	n from Section A.	For Insurance Company Use:
·	(Including Apt., Unit, Suite, and/or Bidg. No.) O		Policy Number
Y	STATE	ZIF	CODE Company NAIC Number
Marco Island		orida 34145	
	TION D - SURVEYOR, ENGINEER, OR		
	tion Certificate for (1) community official,	(2) insurance agent/company	y, and (3) building owner.
COMMENTS	·		
	· · · · · · · · · · · · · · · · · · ·		
	······································		
		·	
CECTION E BILL DING	ELEVATION INFORMATION (SUDVEY	NOT DECILIDED) FOR ZON	Check here if attachment
ندر بروان در از	ELEVATION INFORMATION (SURVEY		
	hout BFE), complete Items E1. through E4 MR-F, Section C must be completed.	I. II the Elevation Certificate	is intended for use as supporting
	(Select the building diagram most	similar to the building for wh	ich this certificate is being completed -
	diagram accurately represents the buildin		
- · · · · · · · · · · · · · · · · · · ·	r (including basement or enclosure) of the	• • •	_in.(cm) above or below
	djacent grade. (Use natural grade, if avail	•	neation by of the besitaline to
——————————————————————————————————————	with openings (see page 7), the next high n) above the highest adjacent grade. Con		·
	ood depth number is available, is the top		·
	rdinance? Yes No Unkno	·	lacksquare
SEC	TION F - PROPERTY OWNER (OR OWN	IER'S REPRESENTATIVE)	CERTIFICATION
• • •	's authorized representative who complete		
·	ommunity-issued BFE) or Zone AO must a	ign here. The statements in	Sections A, B, C, and E are correct to
the best of my knowledge. PROPERTY OWNER'S OR OW	NER'S AUTHORIZED REPRESENTATIVE'S N	AME	
		· · · · · · · · · · · · · · · · · · ·	**************************************
ADDRESS			STATE ZIP CODE
SIGNATURE		ATE	TELEPHONE
COMMENTS		<u> </u>	
		MICABLE ATIONS (ARTICULA)	Check here if attachments
	SECTION G - COMMUNITY I	· · · · · · · · · · · · · · · · · · ·	
	ized by law or ordinance to administer the of this Elevation Certificate. Complete the	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	ction C was taken from other documentation		
engineer, or architect	who is authorized by state or local law to	——————————————————————————————————————	· · · · · · · · · · · · · · · · · · ·
	Comments area below.)	. 7	
Zone AO.	ompleted Section E for a building located	In Zone A (Without a FEMA-I	ssued or community-issued BFE) or
	tion (Items G4-G9) is provided for commu	nity floodplain management	purposes.
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		ATE OF COMPLIANCE/OCCUPANCY
		ISSUED	
	ed for: New Construction Su		
	t floor (including basement) of the building of flooding at the building site is:) is:	ft.(m) Datum:
OCAL OFFICIAL'S NAME	TO HOUSING at the building site is.		ft.(m) Datum:
		{	
COMMUNITY NAME		TELEPHONE	
SIGNATURE	7-11	DATE -03	
COMMENTS	V Comment of the second of the		
		<u></u>	
			Chack hara if attachment
			Check here if attachments