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 INFORMATION For Insurance Company Use: BUILDING OWNER'S NAME Policy Number JOSEPH & SHARON L. DOGGETT BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg, No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 1264 WHITEHEART AVENUE STATE ZIP CODE MARCO ISLAND FL 34145 PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 40, BLOCK 206, MARCO BEACH UNIT SEVEN BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): (##°-##'-####" or ##.####) ■ NAD 1927 ■ NAD 1983 USGS Quad Map Other: SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME** B3. STATE 120067 **COLLIER B4. MAP AND PANEL B6. FIRM INDEX DATE** B7. FIRM PANEL B8. FLOOD ZONE(S) B9. BASE FLOOD ELEVATION(S) **B5. SUFFIX** NUMBER 7-20-98 EFFECTIVE/REVISED DATE AE (Zone AO, use depth of flooding) 120426/812 8-3-92 10 E B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. FIS Profile FIRM Community Determined Other (Describe): NAVD 1988 Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 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 (SURVEY REQUIRED) 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 Does the elevation reference mark used appear on the FIRM? Yes No Elevation reference mark used a) Top of bottom floor (including basement or enclosure) 10.2 ft(m) Embossed Seal, and Date D b) Top of next higher floor _. __ft(m) c) Bottom of lowest horizontal structural member (V zones only) -. ft(m) d) Attached garage (top of slab). 8. Oft (m) a e) Lowest elevation of machinery and/or equipment e Number, E Signature, a servicing the building 10.1ft(m) 7.8ft.(m) f) Lowest adjacent grade (LAG) License **q** g) Highest adjacent grade (HAG) 8.1. ft.(m) FL. CERT NO. 4520 ☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 7 i) Total area of all permanent openings (flood vents) in C3h 1000 sq. in. (sq. cm) SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION 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 may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. CERTIFIER'S NAME David B. Bruns LICENSE NUMBER 4520 COMPANY NAME Bruns & Bruns, Inc. TITLE Surveyor ADDRESS CITY STATE ZIP CODE 1072 6th. Avenue N. Naples FL 34102

SIGNATURE

DATE

TELEPHONE 941-261-5965

IMPORTANT: In these spaces, copy the corresponding information from Section A.				For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt.,	Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND B	OX NO.		Policy Number
СПҮ	STATE	**************************************	ZIP CODE	Company NAIC Number
S	ECTION D - SURVEYOR, ENGINEER, OR AF	CHITECT CE	PTIFICATION (CONTINUED)	

COMMENTS COMMENTS	for (1) community official, (2) insurance agent/o	company, and	(3) building owner.	
COMMENTS				
				Check here if attachments
SECTION E - BUILDIN	IG ELEVATION INFORMATION (SURVEY NO	OT REQUIRED	O) FOR ZONE AO AND ZONE A	(WITHOUT BFE)
For Zone AO and Zone A (without BFE), com	plete Items E1 through E4. If the Elevation Cer	tificate is inten	ded for use as supporting informa	ntion for a LOMA or LOMR-F,
Section C must be completed.				
E1. Building Diagram Number _(Select the b represents the building, provide a sketch	uilding diagram most similar to the building for v or photograph.)	vhich this œrtif	ficate is being completed see pa	ages 6 and 7. If no diagram accurately
	ement or enclosure) of the building is $_{-}$ fL(m)			
	(see page 7), the next higher floor or elevated fl	oor (elevation	b) of the building isft.(m)i	in.(cm) above the highest adjacent
grade.	and a surface to the Assessment to the second of	4 42	t total school of	
	oer is available, is the top of the bottom floorele ocal official must certify this information in Sectio		dance with the community's flood	plain management ordinance?
	ECTION F - PROPERTY OWNER (OR OWNE	······································	ENTATIVE) CERTIFICATION	
	epresentative who completes Sections A, B, and			numity inquaried DEED as Zona AO must
sign here.	spresentative who completes occitons A, D, and	I E IOI ZUII C A	(WILLIOUS A PENNA-ISSUED OF CONTIN	idility-ssued bre) of Zone AO must
PROPERTY OWNER'S OR OWNER'S AUTHOR	RIZED REPRESENTATIVE'S NAME	***************************************		
ADDRESS		CITY	STATE	ZIP CODE
SIGNATURE		DATE	TELEF	PHONE
COMMENTS				
				Check here if attachments
	SECTION G - COMMUNITY INF	ORMATION (OPTIONAL)	Oneok riore ii dataoniii oneo
The local official who is authorized by law or o	rdinance to administer the community's floodpla			ins A. B. C. (or E) and G. of this Elevation
Certificate. Complete the applicable item(s) a		ari managama	nicordinarios cum completo cocido	rior i, b, o (or b), and o or ano bottom
G1. The information in Section C was take	en from other documentation that has been sign	ed and embos	sed by a licensed surveyor, engir	neer, or architect who is authorized by
	nformation. (Indicate the source and date of the			
	on E for a building located in Zone A (without a F			e AO.
33. The following information (Items G4-G	69) is provided for community floodplain manage	ement purpose	9 \$.	
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		G6. DATE CERTIFICATE OF COMP	LIANCE/OCCUPANCY ISSUED
O7 This population because of [7]	0-4-6- []01::::			
G7. This permit has been issued for: New G8. Elevation of as built lowest floor (including			# / \	Deturn
G8. Elevation of as-built lowest floor (including basement) of the building is: G9. BFE or (in Zone AO) depth of flooding at the building site is:			,ft.(m) , ft.(m)	Datum: Datum:
	TO DUIGHING SID IS.	-		Datum.
LOCAL OFFICIAL'S NAIVE		TITLE		
COMMUNITY NAME		TELE	PHONE	
SIGNATURE		DATE		
COMMENTS				
				Check here if attachments