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

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency National Flood Insurance Program

Important: Read the instructions on pages 1-8.

SECTION A - P	For Insurance Company Use:						
A1. Building Owner's Name FRANCIS SHEEHAN	Policy Number						
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or	Company NAIC Number						
382 YELLOWBIRD STREET	ZIP Code						
City _MARCO ISLAND	State FLORIDA		14145				
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Leg-	al Description, etc.)						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, et		I le sime esta l Di	NAD 1007 NAD 1000				
A5. Latitude/Longitude: Lat. 25 56 81n Long. 081 43 12w Horizontal Datum: NAD 1927 NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.							
A7. Building Diagram Number 1							
A8. For a building with a crawl space or enclosure(s), provide: a) Square footage of crawl space or enclosure(s) n/a square footage.		uilding with an attac uare footage of attac	hed garage, provide:				
 a) Square footage of crawl space or enclosure(s) n/a so b) No. of permanent flood openings in the crawl space or 			hed garage <u>460</u> sq ft openings in the attached garage				
enclosure(s) walls within 1.0 foot above adjacent grade n/a			ove adjacent grade 2				
c) Total net area of flood openings in A8.b n/a so	դ in c) Tot	al net area of flood o	ppenings in A9.b 288 sq in				
SECTION B - FLOOD INSURANCE	E RATE MAP (FIRM	I) INFORMATION					
B1. NFIP Community Name & Community Number B2. County			B3. State				
COLLIER COUNTY 120426 COLLIER			FLORIDA				
	37. FIRM Panel ctive/Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)				
	/17/05	AE	8 ' NAVD 1988				
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood	***************************************	***************************************	1 0 1000				
FIS Profile FIRM Community Determined Other (Describe)							
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe)							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) a Designation Date n/a		ted Area (OPA)?	Yes X No				
Designation Date n/a CBRS OPA							
SECTION C - BUILDING ELEVATION	N INFORMATION (S	URVEY REQUIR	ED)				
C1. Building elevations are based on: Construction Drawings*	Building Under Cor		ED) Finished Construction				
C1. Building elevations are based on: Construction Drawings* *A new Elevation Certificate will be required when construction of the build	Building Under Cording is complete.	nstruction* X	Finished Construction				
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IMPORTANT, in these ages	IMPORTANT: In these spaces, copy the corresponding information from Section A.			
Building Street Address (including Apt	For Insurance Company Use: Policy Number			
382 YELLOWBIRD STREET	1 Shoy Humbon			
City	State	ZIP Code	Company NAIC Number	
MARCO ISLAND	FL	34145	<u> </u>	
SECTION	N D - SURVEYOR, ENGINEER, OR ARC	CHITECT CERTIFICATION (CC	NTINUED)	
Copy both sides of this Elevation Certi	ificate for (1) community official, (2) insurance	e agent/company, and (3) building or	wner.	
Comments				
C2E. AIR CONDITIONER				
Centerline Road Elevation: 5.86				
Signature	D	ate 3/19/2009	Check here if attachments	
OF OTHER DESIGNATION OF ITS	WATION INCODMATION (CUDVEY NO			
SECTION E - BUILDING ELE	VATION INFORMATION (SURVEY NO	T REQUIRED) FOR ZONE AO	AND ZONE A (WITHOUT BEE)	
For Zones AO and A (without BFE), c	complete Items E1-E5. If the Certificate is inte	ended to support a LOMA or LOMR-	F request, complete Sections A, B,	
and C. For Items E1-E4, use natural	grade, if available. Check the measurement	used. In Puerto Rico only, enter me	eters.	
	r the following and check the appropriate box	es to show whether the elevation is	above or below the highest adjacent	
grade (HAG) and the lowest adjacet and the lo	acent grade (LAG). basement, crawl space, or enclosure) is <u>n/a</u>	X feet meters	above or below the HAG.	
b) Top of bottom floor (including	basement, crawl space, or enclosure) is n/a	X feet meters	above or below the LAG.	
	permanent flood openings provided in Section	n A Items 8 and/or 9 (see page 8 of meters above or below		
(elevation C2.b in the diagrams) E3. Attached garage (top of slab) is		l meters	rue nas.	
	nd/or equipment servicing the building is n/a	X feet meters	above or below the HAG.	
E5. Zone AO only: If no flood depth	number is available, is the top of the bottom	floor elevated in accordance with th	e community's floodplain management	
ordinance? 🗌 Yes 🔲 No [Unknown. The local official must certify th	nis information in Section G.		
		VC DEDDECENTATIVE CEDI	IFICATION!	
	N F - PROPERTY OWNER (OR OWNER			
The property owner or owner's authori	ized representative who completes Sections A ements in Sections A, B, and E are correct to	A, B, and E for Zone A (without a FE the best of my knowledge	EMA-issued or community-issued BFE)	
Property Owner's or Owner's Authorize		the best of my knowledge.		
Property Owner's or Owner's Authorize	ed Representative's Name			
Address	City	State	ZIP Code	
Cignoture	Date	Teleph	one	
Signature		Гоюрп		
Comments				
			[]	
			Check here if attachments	
	SECTION G - COMMUNITY INFO		1 0 0 1 0 0 (a 5)	
The local official who is authorized by la	aw or ordinance to administer the community's nplete the applicable item(s) and sign below.	s floodplain management ordinance Check the measurement used in Ite	can complete Sections A, B, C (or E), ems G8, and G9.	
	was taken from other documentation that has			
G1. The information in Section C is authorized by law to certify	elevation information. (Indicate the source ar	nd date of the elevation data in the	Comments area below.)	
G2. A community official complete	ed Section E for a building located in Zone A (without a FEMA-issued or commun	ity-issued BFE) or Zone AO.	
G3. The following information (Iter	ms G4G9.) is provided for community floodp	lain management purposes.		
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Com	npliance/Occupancy Issued	
G7. This permit has been issued for:	New Construction Substantial In	nprovement		
G8. Elevation of as-built lowest floor (inc	cluding basement) of the building:		(PR) Datum	
G9. BFE or (in Zone AO) depth of floodi	ing at the building site:		PR) Datum	
Local Official's Name	*	Title		
Community Name		Telephone		
Cianatura		Date		
Signature				
Comments				
			Check here if attachments	
			OHEOR REICH ARAUMHEIRS	

FEMA Form 81-31, February 2006

Replaces all previous editions

Building Photographs See Instructions for Item A6.

			For Insurance Company Use:
Building Street Address (includin	g Apt., Unit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number
382 YELLOWBIRD STREET			
City	State	ZIP Code	Company NAIC Number
MARCO ISLAND	FL	34145	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.





Front Property Picture

3/19/2009

Rear Property Picture

3/19/2009

Right Property Picture

Left Property Picture