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

National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

# **ELEVATION CERTIFICATE**

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION	FOR INSUR	ANCE COMPANY USE			
A1. Building Owner's Name ALBAUGH, DENNIS R	Policy Numb	per:			
<ul> <li>A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.</li> <li>511 SAND HILL CT</li> </ul>	Company N	AIC Number:			
City State MARCO ISLAND Florida	State ZIP Code				
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 7, BLOCK 308, MARCO BEACH UNIT 9					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL					
A5. Latitude/Longitude: Lat. 25° 55' 27.8616" Long81° 42' 18.8922" Horizontal Datur	n: NAD 1	927 🗵 NAD 1983			
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insur	ance.				
A7. Building Diagram Number1B					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) N/A sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above	e adjacent gra	ade N/A			
c) Total net area of flood openings in A8.bN/A sq in					
d) Engineered flood openings?					
A9. For a building with an attached garage:					
a) Square footage of attached garage 1008 sq ft		3			
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade6					
c) Total net area of flood openings in A9.b 804.4 sq in					
d) Engineered flood openings?   Yes  No					
TO SERVICE DATE WAS FIRM WEDDING.					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION  B1. NFIP Community Name & Community Number B2. County Name B3. State					
B1. NFIP Community Name & Community Number CITY OF MARCO ISLAND 120426  B2. County Name COLLIER		Florida			
B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date B8. Flood Zone(s	(Zor	e Flood Elevation(s) ne AO, use Base nd Depth)			
12021 C 0837 H 05/16/2012 05/16/2012 AE		9.0			
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:  FIS Profile X FIRM Community Determined Other/Source:					
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?   Yes   No					
Designation Date: CBRS DPA					

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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
			Policy Number:	
City Sta MARCO ISLAND Flo	te ZIP rida 341	Code 45	Company NAIC Number	
SECTION C - BUILDING EL	EVATION INFORMAT	TION (SURVEY RE	EQUIRED)	
C1. Building elevations are based on: Construction  *A new Elevation Certificate will be required when concerning to the suite Benchmark Utilized: COL 11  Indicate elevation datum used for the elevations in it NGVD 1929 NAVD 1988 Other/S Datum used for building elevations must be the same  a) Top of bottom floor (including basement, crawled) Top of the next higher floor  c) Bottom of the lowest horizontal structural members of Attached garage (top of slab)  e) Lowest elevation of machinery or equipment sem (Describe type of equipment and location in Comf) Lowest adjacent (finished) grade next to building	on Drawings*	ding Under Construent is complete. FE), AR, AR/A, AR/A, In Item A7. In Puert NAVD 88 w.  BFE.  10.0 23.5 N/A. 7.4 10.0 5.5	Check the measurement used.  Feet meters  Check the measurement used.  Check the measurement used.  Feet meters  Check the measurement used.  Feet meters  Check the measurement used.  Feet meters  Feet meters  Feet meters  Feet meters  Feet meters	
g) Highest adjacent (finished) grade next to building		<u>8</u> . <u>0</u>	X feet meters	
Lowest adjacent grade at lowest elevation of dec structural support	ck or stairs, including	N/A	X feet	
SECTION D – SURVEYOR,	ENGINEER, OR ARC	HITECT CERTIFI	CATION	
This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment un Were latitude and longitude in Section A provided by a lice	s my best efforts to inter oder 18 U.S. Code, Sect	pret the data availa tion 1001.	law to certify elevation information.  ble. I understand that any false  Check here if attachments.	
Certifier's Name	License Number		William De	
ANTONIO TRIGO (16.0241)  Title  LAND SURVEYOR  Company Name  A.TRIGO & ASSOCIATES INC.  Address 2223 TRADE CENTER WAY	LS 2982		Plase o Seal Land	
City NAPLES	State Florida	ZIP Code 34109	" MEGISTE	
Signature	Date 04/03/2018	Telephone (239) 594-8448		
Copy all pages of this Elevation Certificate and all attachme Comments (including type of equipment and location, per A9b= SMART VENT MODEL #1540-520, C2e= A/C UNIT	C2(e), if applicable)		igent/company, and (3) building owner.	

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IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, an 511 SAND HILL CT	nd/or Bldg. No.) or P.O.	Route and Box No.	Policy Number:	
City MARCO ISLAND		ZIP Code 34145	Company NAIC Number	
SECTION E – BUILDING EI FOR ZON	LEVATION INFORMA	TION (SURVEY NOT	REQUIRED)	
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended 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 meters.  E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).  a) Top of bottom floor (including basement, crawlspace, or enclosure) is				
			certify this information in Section G.	
SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION  The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.				
Property Owner or Owner's Authorized Representative	s's Name			
Address	City	Sta	ate ZIP Code	
Signature	Date	Tel	lephone	
Comments				
			Check here if attachments.	

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IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 511 SAND HILL CT			Policy Number:	
City MARCO ISLAND	State Florida	ZIP Code 34145	Company NAIC Number	
SECTION	ON G - COMMUNITY INFOR	MATION (OPTIONAL)		
The local official who is authorized by law or o Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, er	Certificate. Complete the ap	mmunity's floodplain mar plicable item(s) and sign	nagement ordinance can complete below. Check the measurement	
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)				
G2. A community official completed Sector Zone AO.	tion E for a building located in	Zone A (without a FEMA	A-issued or community-issued BFE)	
G3. The following information (Items G4-	-G10) is provided for commu	nity floodplain manageme	ent purposes.	
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued	
16-07171			ompliance occupancy issued	
G7. This permit has been issued for:	New Construction Subs	stantial Improvement		
G8. Elevation of as-built lowest floor (includin of the building:	g basement)	feet	meters Datum	
G9. BFE or (in Zone AO) depth of flooding at	the building site:	feet	meters Datum	
G10. Community's design flood elevation:		feet	meters Datum	
Local Official's Name Title Floodplain Coordinator				
Community Name	Tele	ephone		
City of Marco Island				
Signature Date				
Comments (including type of equipment and lo	ocation, per C2(e), if applicable	e)		
REVIEWED				
By kdefedericis at 5:17 pm, Apr 13, 2018				
			Check here if attachments.	

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

See Instructions for Item A6.

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IMPORTANT: In these spaces, copy the corresponding information from Section A.  Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 511 SAND HILL CT			FOR INSURANCE COMPANY USE Policy Number:
MARCO ISLAND	Florida	34145	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption FRONT VIEW 4/3/2018



Photo Two Caption LEFT SIDE VIEW 4/3/2018

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

Continuation Page

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	t., Unit, Suite, and/or Bldg. No.)	t., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  State ZIP Code

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

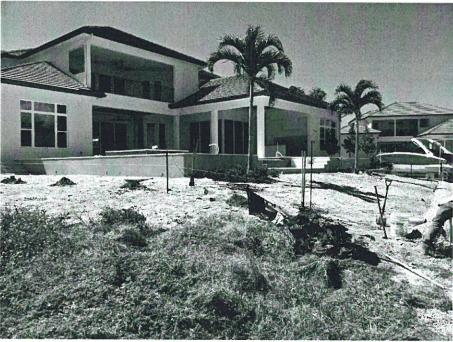


Photo Three Caption REAR VIEW 4/3/2018



Photo Four

Photo Four Caption RIGHT SIDE VIEW 4/3/2018

### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

Continuation Page

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		20-20-00 No. 20-20-00-00-00-00-00-00-00-00-00-00-00-0		
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 Box No. 511 SAND HILL CT			Policy Number:	
City	State	ZIP Code	Company NAIC Number	
MARCO ISLAND	Florida	34145		

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo Five Caption VENT 4/3/2018

Photo Six

Photo Six Caption