16-00338 17-09097 ECURITY 16-07254

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

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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	INFOR	MATION		FOR INSUF	RANCE COMPANY USE
A1. Building Owner's Name COLE FLORIDA TRUST				Policy Num	ber:
A2. Building Street Address (including Apt., Unit, Suite Box No.396 RAYMOND CT	, and/o	r Bldg. No.) or P.O.	Route and	Company N	AIC Number:
City MARCO ISLAND		State Florida		ZIP Code 34145	
A3. Property Description (Lot and Block Numbers, Tax LOT 25, BLOCK 20, HIDEAWAY BEACH	Parcel	Number, Legal De	scription, etc.)	*	1
A4. Building Use (e.g., Residential, Non-Residential, A	ddition,	, Accessory, etc.)	RESIDENTIAL	i i i	
A5. Latitude/Longitude: Lat. 26° 17' 17.109" L	_ong. <u>-</u> 8	31° 48' 24.372"	Horizontal Datum	☐ NAD 1	927 × NAD 1983
A6. Attach at least 2 photographs of the building if the	Certific	ate is being used to	obtain flood insura	nce.	
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 cra	wlspac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gra	ade N/A
c) Total net area of flood openings in A8.b N/A	A s	q in			,
d) Engineered flood openings? Yes X No)				
A9. For a building with an attached garage:					
		ft			
a) Square footage of attached garage1044					
 b) Number of permanent flood openings in the atta 	ached g	jarage within 1.0 for	ot above adjacent gi	ade	6
c) Total net area of flood openings in A9.b 804.4 sq in					
d) Engineered flood openings? X Yes No	0				
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number	ISUKA	B2. County Name		ION	B3. State
CITY OF MARCO ISLAND 120426		COLLIER			Florida
B4. Map/Panel B5. Suffix B6. FIRM Index	ם כו	DM Danal	D0 Flood 7(a)	DO Des	- Flood Flourition(s)
B4. Map/Panel B5. Suffix B6. FIRM Index Date	Ef	RM Panel fective/	B8. Flood Zone(s)	(Zoi	se Flood Elevation(s) ne AO, use Base
12021 C 0828 H 05/16/2012	05/16	evised Date /2012	AE	FIOC	od Depth) 8.0'
B10. Indicate the source of the Base Flood Elevation (BFE) da	ata or base flood de	pth entered in Item	B9:	
☐ FIS Profile ☒ FIRM ☐ Community Determ				(18)	
B11. Indicate elevation datum used for BFE in Item B9:	: 🔲 N	GVD 1929 ⊠ NA	VD 1988	er/Source:	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? The Section 1. No.					
Designation Date: CBRS OPA					

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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. 396 RAYMOND CT			Policy Number:
City MARCO ISLAND		ZIP Code 34145	Company NAIC Number
SECTION C - BUILDING	ELEVATION INFORM	MATION (SURVEY R	EQUIRED)
 C1. Building elevations are based on: Constraint *A new Elevation Certificate will be required wh C2. Elevations – Zones A1–A30, AE, AH, A (with B Complete Items C2.a–h below according to the 	en construction of the bu FE), VE, V1–V30, V (with	h BFE), AR, AR/A, AR	C/AE, AR/A1–A30, AR/AH, AR/AO.
Benchmark Utilized: COL 14		um: NAVD 88	
Indicate elevation datum used for the elevations ☐ NGVD 1929 ☒ NAVD 1988 ☐ Ot Datum used for building elevations must be the	her/Source:		
			Check the measurement used.
a) Top of bottom floor (including basement, crab) Top of the next higher floor	wispace, or enclosure to	oor) <u>0</u> N/A	X feet meters
c) Bottom of the lowest horizontal structural me	ember (V Zones only)	N/A	X feet _ meters
d) Attached garage (top of slab)	smoot (v Zones omy)	4.5	X feet meters
e) Lowest elevation of machinery or equipment (Describe type of equipment and location in	servicing the building Comments)	<u>9</u> . <u>0</u>	X feet meters
f) Lowest adjacent (finished) grade next to buil	ding (LAG)	<u>4</u> . <u>3</u>	x feet meters
g) Highest adjacent (finished) grade next to but	lding (HAG)	<u>6</u> . <u>0</u>	💹 feet 🗌 meters
 h) Lowest adjacent grade at lowest elevation o structural support 	f deck or stairs, including	N/A	X feet meters
SECTION D - SURVEY	OR, ENGINEER, OR A	ARCHITECT CERTIF	CICATION
This certification is to be signed and sealed by a land I certify that the information on this Certificate representatement may be punishable by fine or imprisonment	ents my best efforts to in	nterpret the data avail.	y law to certify elevation information. able. I understand that any false
Were latitude and longitude in Section A provided by	a licensed land surveyo	or? ⊠Yes □No	○ Check here if attachments.
Certifier's Name ANTONIO TRIGO (16.0194)	License Number LS 2982		2 80
Title LAND SURVEYOR			
Company Name A.TRIGO & ASSOCIATES INC.	Place 3		
Address 2223 TRADE CENTER WAY			3.66
City NAPLES	State Florida	ZIP Code 34109	"III, MECISTA
Signature	Date 04/03/2018	Telephone (239) 594-8448	
Copy all pages of this Elevation Certificate and all attack			agent/company, and (3) building owner.
Comments (including type of equipment and location A9b= SMART VENTS MODEL #1540-520 CERTIFIE NAVD			NIT, POOL EQUIPMENT IS AT 6.0'

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the correspon	ding information f	rom Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, ar \$96 RAYMOND CT	nd/or Bldg. No.) or F	P.O. Route and Box No.	Policy Number:
City MARCO ISLAND	State Florida	ZIP Code 34145	Company NAIC Number
SECTION E – BUILDING EI FOR ZON		RMATION (SURVEY NO E A (WITHOUT BFE)	T REQUIRED)
For Zones AO and A (without BFE), complete Items E complete Sections A, B,and C. For Items E1–E4, use enter meters.	1–E5. If the Certific natural grade, if av	cate is intended to support ailable. Check the measu	a LOMA or LOMR-F request, rement used. In Puerto Rico only,
E1. Provide elevation information for the following and the highest adjacent grade (HAG) and the lowesta) Top of bottom floor (including basement,	d check the approp adjacent grade (LA	riate boxes to show wheth AG).	ner the elevation is above or below
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet met	ers above or below the HAG.
crawlspace, or enclosure) is E2. For Building Diagrams 6–9 with permanent flood	openings provided	in Section A Items 8 and/	
the next higher floor (elevation C2.b in the diagrams) of the building is		feet met	
E3. Attached garage (top of slab) is		feet met	ers above or below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is		feet met	ers above or below the HAG.
E5. Zone AO only: If no flood depth number is availabed floodplain management ordinance? Yes			accordance with the community's t certify this information in Section G.
SECTION F - PROPERTY OW	NER (OR OWNER	'S REPRESENTATIVE)	CERTIFICATION
The property owner or owner's authorized representati community-issued BFE) or Zone AO must sign here. T	ive who completes he statements in S	Sections A, B, and E for 2 ections A, B, and E are co	Zone A (without a FEMA-issued or orrect to the best of my knowledge.
Property Owner or Owner's Authorized Representative	s's Name		
Address	Ci	ity	State ZIP Code
Signature	Da	ate 7	elephone
Comments			-
			Section 1
			Check here if attachments.

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IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or F 396 RAYMOND CT	P.O. Route and Box No.	Policy Number:		
City State MARCO ISLAND Florida	ZIP Code 34145	Company NAIC Number		
SECTION G - COMMUNITY INFO	ORMATION (OPTIONAL)			
The local official who is authorized by law or ordinance to administer the Sections A, B, C (or E), and G of this Elevation Certificate. Complete the used in Items G8–G10. In Puerto Rico only, enter meters.	community's floodplain ma applicable item(s) and sig	anagement ordinance can complete n below. Check the measurement		
G1. The information in Section C was taken from other documentate engineer, or architect who is authorized by law to certify elevated data in the Comments area below.)				
G2. A community official completed Section E for a building located or Zone AO.	d in Zone A (without a FEN	IA-issued or community-issued BFE)		
G3. The following information (Items G4–G10) is provided for common comm	nunity floodplain managen	nent purposes.		
G4. Permit Number G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued		
G7. This permit has been issued for: New Construction S	ubstantial Improvement			
G8. Elevation of as-built lowest floor (including basement) of the building:	fee	t meters Datum		
G9. BFE or (in Zone AO) depth of flooding at the building site:	fee	t meters Datum		
G10. Community's design flood elevation:	fee	t meters Datum		
Local Official's Name	Title Floodplain	Coordinator		
Community Name Telephone City of Marco Island				
Signature Date				
Comments (including type of equipment and location, per C2(e), if applicable)				
		*		
REVIEWED				
By kdefedericis at 11:11 am, Apr 27, 2018				
		Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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City MARCO ISLAND	State Florida	ZIP Code 34145	Company NAIC Number

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 4/17/2018

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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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. 396 RAYMOND CT			FOR INSURANCE COMPANY USE Policy 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.

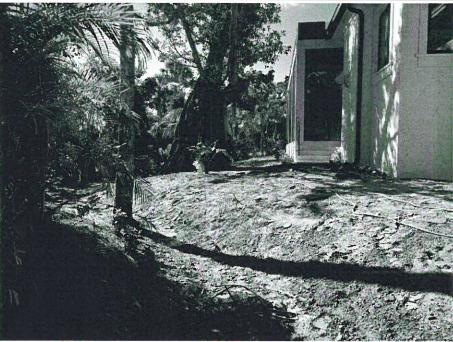


Photo Three

Photo Three Caption REAR VIEW 4/3/2018



Photo Four

Photo Four Caption RIGHT SIDE VIEW 4/3/2018

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

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City MARCO ISLAND	State Florida	ZIP Code 34145	Company NAIC Number

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

Photo Five Caption TYPICAL VENT 4/17/2018