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 INSI	URANCE COMPANY USE	
A1. Building Owner's Name Marco Island BTS Retail, LLC					Policy Nu	mber:	
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 440 W Elkcam Cir 					Company NAIC Number:		
City Marco Island							
		and Block Numbers, Ta ords Book 5325, Page		cel Number, Legal D	Description, etc.)		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Non-Residential							
A5. Latitude/Long	itude: Lat. 2	5 57'07"	Long.	81 43'28"	Horizontal Datum	: NAD	1927 X NAD 1983
A6. Attach at leas	t 2 photograp	hs of the building if the	e Certif	icate is being used	- to obtain flood insura	nce.	00000000 00 1000000000
A7. Building Diag	ram Number	1B					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	otage of craw	space or enclosure(s)		N/A sq ft			
b) Number of	permanent fl	ood openings in the cra	awlspa	ce or enclosure(s) v	within 1.0 foot above	adjacent gi	rade 0
c) Total net a	rea of flood o	penings in A8.b)	sq in			
d) Engineered	d) Engineered flood openings?						
A9. For a building with an attached garage:							
a) Square footage of attached garageN/A sq ft							
b) Number of	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0						
c) Total net ar	c) Total net area of flood openings in A9.b 0 sq in						
d) Engineered	d) Engineered flood openings?						
- (m-1)	e E	CTION B. FLOOD IN	ICLIDA	NOE DATE MAD	/FIDM INFODMAT		
B1. NFIP Commun		CTION B – FLOOD IN	SURA	B2. County Name		ION	D2 Ctata
City of Marco Island		ommunity Number		Collier		-	B3. State Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/ Revised Date		B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)		
12021C / 0828	Н	05/16/2012		05/16/2012	AE	1100	8.0'
B10. Indicate the se	ource of the E	Base Flood Elevation (E	BFE) da	ata or base flood de	pth entered in Item B	9:	
FIS Profile	▼ FIRM [Community Determi	ned [Other/Source:			
B11. Indicate eleva	tion datum us	ed for BFE in Item B9:	□ N	GVD 1929 🗵 NA	VD 1988	/Source: _	
B12. Is the building	located in a	Coastal Barrier Resour	ces Sv	stem (CBRS) area	or Otherwise Protecte	ed Area (O	PA)? ☐ Yes ☑ No
	B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date:						
			-				

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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. Policy Number: 440 W Elkcam Cir City State ZIP Code Company NAIC Number Marco Island Florida 34145 SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) Construction Drawings* Building Under Construction* C1. Building elevations are based on: X Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. C2. 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 C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: COL. 18 Vertical Datum: NAVD 88 Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 🔀 NAVD 1988 ☐ Other/Source: Datum used for building elevations must be the same as that used for the BFE. Check the measurement used. 9 0 a) Top of bottom floor (including basement, crawlspace, or enclosure floor) X feet meters N/A b) Top of the next higher floor X feet meters N/A c) Bottom of the lowest horizontal structural member (V Zones only) x feet meters N/A d) Attached garage (top of slab) X feet meters e) Lowest elevation of machinery or equipment servicing the building 12 3 X feet meters (Describe type of equipment and location in Comments) 3.6 f) Lowest adjacent (finished) grade next to building (LAG) X feet ☐ meters g) Highest adjacent (finished) grade next to building (HAG) 8.7 X feet meters N/A Lowest adjacent grade at lowest elevation of deck or stairs, including X feet meters structural support 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 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. Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No X Check here if attachments. Certifier's Name License Number Donald L. Saintenoy III LS 6761 111 Professional Surveyor & Mapper Company Name Q. Grady Minor & Associates, P.A. Address 3800 Via Del Rey City State ZIP Code **Bonita Springs** Florida 34134 Signature Date Telephone 03/30/2017 (239) 947-1144 Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner. Comments (including type of equipment and location, per C2(e), if applicable) C2e.) Is the bottom of an electrical meter.

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Building Street Address (including Apt., Unit, Suite, and/or B	IMPORTANT: In these spaces, copy the corresponding information from Section A.			
440 W Elkcam Cir	ldg. No.) or P.O. Rout	e and Box No.	Policy Number:	
City State Marco Island Florida	ZIP 0 3414		Company NAIC Number	
SECTION E – BUILDING ELEVAT FOR ZONE AO	TION INFORMATION AND ZONE A (WITH		REQUIRED)	
For Zones AO and A (without BFE), complete Items E1–E5. complete Sections A, B,and C. For Items E1–E4, use natural enter meters.	grade, if available. Cl	neck the measure	ment used. In Puerto Rico only,	
E1. Provide elevation information for the following and check the highest adjacent grade (HAG) and the lowest adjace a) Top of bottom floor (including basement,	nt grade (LAG).	s to snow whethe	r the elevation is above or below	
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet mete	s above or below the HAG.	
crawlspace, or enclosure) is	2.	feet meter	_	
E2. For Building Diagrams 6–9 with permanent flood opening the next higher floor (elevation C2.b in the diagrams) of the building is		feet meter		
E3. Attached garage (top of slab) is	·	feet ☐ meter		
E4. Top of platform of machinery and/or equipment servicing the building is	[feet meter	s above or below the HAG.	
E5. Zone AO only: If no flood depth number is available, is th floodplain management ordinance? Yes No	e top of the bottom flo	or elevated in accordance of the contract of t	cordance with the community's ertify this information in Section G.	
SECTION F - PROPERTY OWNER (C	R OWNER'S REPRE	SENTATIVE) CE	RTIFICATION	
The property owner or owner's authorized representative who community-issued BFE) or Zone AO must sign here. The state	completes Sections A, ements in Sections A,	, B, and E for Zo B, and E are corr	ne A (without a FEMA-issued or ect to the best of my knowledge.	
Property Owner or Owner's Authorized Representative's Name	е			
Address	City	Sta	te ZIP Code	
Address Signature	City		te ZIP Code	
Signature				

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IMPORTANT: In these spaces, copy the corresponding information from Section A.					FOR INSU	JRANCE COMPANY USE		
Building Street Address (including Apt., Unit, 440 W Elkcam Cir	Suite, and/or Bldg	. No.) or P.O	. Route and Box		Policy Nur	THE RESIDENCE OF THE PARTY OF T		
City Marco Island	State Florida		ZIP Code 34145		Company	NAIC Number		
SECT	ION G - COMMU	NITY INFOR	MATION (OPTIC	ONAL)				
The local official who is authorized by law or of Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, e	n Certificate. Com	nister the cor	nmunity's floodp plicable item(s) a	lain mana and sign b	gement or elow. Che	dinance can complete ck the measurement		
G1. The information in Section C was ta engineer, or architect who is authori data in the Comments area below.)	ken from other do zed by law to cert	cumentation ify elevation	that has been si information. (Ind	igned and licate the s	sealed by source and	a licensed surveyor, I date of the elevation		
G2. A community official completed Second Tone AO.	tion E for a buildin	ig located in 2	Zone A (without	a FEMA-i	ssued or c	community-issued BFE)		
G3. The following information (Items G4-	G3. The following information (Items G4–G10) is provided for community floodplain management purposes.							
G4. Permit Number 16-04977	G5. Date Perm	it Issued		G6. Dat Con	e Certifica npliance/C	te of occupancy Issued		
G7. This permit has been issued for:	New Construction	on 🔲 Substa	antial Improveme	ent				
G8. Elevation of as-built lowest floor (including of the building:	g basement)			feet	meters	Datum		
G9. BFE or (in Zone AO) depth of flooding at t	the building site:		[feet	meters	Datum		
G10. Community's design flood elevation:				feet [meters	Datum		
Local Official's Name		Title	[100d0]	ain l	(and	nata		
Community Name City of Marco Icl	and	Telepl	none (
Signature		Date	4.11.1	7				
Comments (including type of equipment and loc	ation, per C2(e), it	fapplicable)						
						1		
					☐ Chec	k here if attachments.		

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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City	State	ZIP Code	Company NAIC 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 Caption Front of building, 3/28/2017

ELEVATION CERTIFICATE



Photo Two

Photo Two Caption Right side of building, 3/28/2017

BUILDING PHOTOGRAPHS

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Continuation Page

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Building Street Address (including 440 W Elkcam Cir	Apt., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	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 Three

Photo Three Caption Back of building, 3/28/2017



Photo Four

Photo Four Caption Left side of building, 3/28/2017

FEMA Form 086-0-33 (7/15)