#### 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.

		CTION A - PROPERT	Y INFO	RMATION		FOR INSI	JRANCE COMPANY USI
A1. Building Owner's Name  James L. Earl and Maria Alice Earl  Policy Number:							
A2. Building Stre			te and	or Bldg No ) or P (	) Pouto and		
DOX NO.	A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company 540 Hammock Court					Company	NAIC Number:
City				Ct-t-			
Marco Island				State Florida		ZIP Code 34145	
A3. Property Des	cription (Lot	and Block Numbers, Ta	ax Parc	el Number, Legal D	escription, etc.)		
		Unit 9, as recorded in ntial, Non-Residential,					
A5. Latitude/Long							
	The second second		1000 M	N81°42'34.96"	Horizontal Datum		1927 × NAD 1983
A7. Building Diagr		ohs of the building if the	e Certifi	cate is being used	to obtain flood insura	ince.	
1		space or enclosure(s):					
		space or enclosure(s):					
				0 sq ft			
		ood openings in the cra			vithin 1.0 foot above	adjacent gi	rade0
				sq in			
d) Engineered	i flood openir	ngs? 🗌 Yes 🗵 N	0				
A9. For a building	with an attach	ned garage:					
a) Square foo	tage of attach	ned garage596		sq ft			
b) Number of	permanent flo	ood openings in the atta	ached (	garage within 1.0 fo	ot above adjacent gr	ade	0
			0	sg in	,		
d) Engineered flood openings?  Yes  No							
	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMAT	ION	
B1. NFIP Communi CITY OF MARCO I				B2. County Name			B3. State
CITT OF WARCOT	SLAND 1	20426		COLLIER			Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date		RM Panel	B8. Flood Zone(s)	B9. Bas	e Flood Elevation(s)
12021C0837	н	05/16/2012	Re	fective/ evised Date		Floo	ne AO, use Base od Depth)
		03/10/2012	05/16/	2012	AE	9	
B10. Indicate the se	ource of the F	Base Flood Elevation (E	REE) da	ata or base flood do	nth entered in Item [	20.	
		Community Determi			pin entered in item i	o9.	
B11. Indicate eleva	tion datum us	sed for BFE in Item B9:	∐ No	GVD 1929 × NA	VD 1988	r/Source: _	
B12. Is the building	located in a	Coastal Barrier Resour	ces Sy	stem (CBRS) area	or Otherwise Protect	ed Area (O	PA)? ☐ Yes ☒ No
Designation Date: CBRS DPA							

10 KICH

**ELEVATION CERTIFICATE** OMB No. 1660-0008 IMPORTANT: In these spaces, copy the corresponding information from Section A. Expiration Date: November 30, 2018 Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. FOR INSURANCE COMPANY USE Policy Number: City State ZIP Code Company NAIC Number Marco Island Florida 34145 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. |X Finished Construction 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. Vertical Datum: NAVD88 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. a) Top of bottom floor (including basement, crawlspace, or enclosure floor) \_\_\_ Check the measurement used. 10.3 × feet b) Top of the next higher floor 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 6 8 e) Lowest elevation of machinery or equipment servicing the building X feet meters (Describe type of equipment and location in Comments) 10 1 X feet meters f) Lowest adjacent (finished) grade next to building (LAG) 5 8 g) Highest adjacent (finished) grade next to building (HAG) X feet meters 7.2 X feet h) Lowest adjacent grade at lowest elevation of deck or stairs, including meters N/A structural support X feet meters 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 Check here if attachments. Certifier's Name License Number David J. Hyatt 5834 Title Professional Surveyor and Mapper Company Name Marco Surveying & Mapping, LLC Place 3825 Beck Boulevard, Suite 725 Here City State Naples ZIP Code Florida 6-21-2018 34114 Signature Date Telephone 06/21/2018 (239) 389-0026 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) A9a Square footage was derived from the Collier County Property Appraiser's website. C2a is the front door threshold as there was no access to the structure. C2b There is a second floor to the home that was inaccessible. C2e is the elevation for both the NW and the SE A/C pad's. There's a wall A/C unit in the garage (S. side) at elevation 7.7', NAVD88. Local jurisdictions may have elevation requirements more restrictive than the base flood elevation shown hereon, consult with the applicable building department regarding any design decisions. According to the Collier County Property Appraiser structure was built in 2003. WO# 18-364 jd/t8, FB166, PG18, 06/21/2018

#### **ELEVATION CERTIFICATE**

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

IMPORTANT: In these spaces, copy the correspon	iding information fr	om Section A	Expiration Bate. November 30, 2018
Dulluling Street Address (including Apt., Unit Suite a	nd/or Bldg. No.) or P.	O. Route and Box No.	FOR INSURANCE COMPANY USI Policy Number:
S TO TIAMINIOCK COUIT		The second secon	r oney Number.
City Marco Island	State	ZIP Code	Company NAIC Number
	Florida	34145	
SECTION E – BUILDING E FOR ZON	LEVATION INFORM NE AO AND ZONE	MATION (SURVEY N	OT REQUIRED)
For Zones AO and A (without BEE), complete Itams F	1 55 1511 6 115		
enter meters.	matural grade, il avail	lable. Check the meas	urement used. In Puerto Rico only,
E1. Provide elevation information for the following and the highest adjacent grade (HAG) and the lowest	d check the appropria	ate boxes to show whe	ther the elevation is above or below
a) Top of bottom floor (including basement, crawlspace, or enclosure) is	3.220 (2) (6)	-	
b) Top of bottom floor (including basement		feet me	eters above or below the HAG.
crawispace, or enclosure) is		feet me	ters above or below the LAG.
E2. For Building Diagrams 6–9 with permanent flood of the next higher floor (elevation C2.b in	penings provided in	Section A Items 8 and	/or 9 (see pages 1.2 of last water)
the next higher floor (elevation C2.b in the diagrams) of the building is			2000
E3. Attached garage (top of slab) is			ters above or below the HAG.
E4. Top of platform of machinery and/or oquipment		feet _ me	ters above or below the HAG.
servicing the building is		feet met	ters above or below the HAG.
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	e, is the top of the bo	ttom floor elevated in a	accordance with the community
floodplain management ordinance?   Yes	No Unknown.	The local official mus	st certify this information in Section G.
SECTION F - PROPERTY OWN	NER (OR OWNER'S	REPRESENTATIVE) (	CERTIFICATION
The property owner or owner's authorized representation			
	is statements in occi	ions A, B, and E are co	orrect to the best of my knowledge.
Property Owner or Owner's Authorized Representative's	Name		1 (
Address 1	11 3000	E F	34145
540 Hammocke CT	City	10 9	state ZIP Code
Signature	Date	10 C	37 300 1995 elephone
loomes t East			elephone
Comments			
			1
			Check here if attachments.

# **ELEVATION CERTIFICATE**

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

IMPORTANT: In these spaces, col	ay the comment		Expiration Date: November 30,
Building Street Address (including A	by the corresponding information for t.pt., Unit, Suite, and/or Bldg. No.) or F	rom Section A.	FOR INSURANCE COMPANY
540 Hammock Court	Policy Number:		
City	State		100 - CONTS
Marco Island	Florida	ZIP Code	Company NAIC Number
		34145	
The least of the	SECTION G - COMMUNITY INFO	RMATION (OPTIONAL)	
G1. The information in Section engineer, or architect who data in the Comments area	C was taken from other documentation is authorized by law to certify elevation below.)	on that has been signed an	d sealed by a licensed surveyor, source and date of the elevation
G2. A community official comple or Zone AO.	eted Section E for a building located in	n Zone A (without a FEMA	issued or community-issued BFE
co more renowing information (i	tems G4-G10) is provided for commu	nity floodplain managemen	nt purposes.
G4. Permit Number		948.	
- Control of	G5. Date Permit Issued	G6. Da	te Certificate of mpliance/Occupancy Issued
G7. This permit has been issued for:	☐ New Construction ☐ Subs	stantial Improvement	
<ol> <li>Elevation of as-built lowest floor ( of the building.</li> </ol>	including basement)	mprovement	
of the building:		feet [	meters Datum
9. BFE or (in Zone AO) depth of float	d'		
9. BFE or (in Zone AO) depth of floo		feet [	meters Datum
10. Community's design flood elevation	on:	feet	meters Datum
ocal Official's Name	Title		
	Title		
ommunity Name	Tolor	h	
Market and Parket and	reiep	hone	
gnature	D. 1		
	Date		
mments (including to a continuo			
mments (including type of equipment	and location, per C2(e), if applicable)		
		*	

### **BUILDING PHOTOGRAPHS**

## **ELEVATION CERTIFICATE**

See Instructions for Item A6.

OMB No. 1660-0008

Section A. Route and Box No.	Expiration Date: November 30, 2018  FOR INSURANCE COMPANY USE Policy Number:
	1 oney Number:
IP Code	Company NAIC Number
	CIP Code 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 indicated in Section A8. If submitting more shotographs than will fit on this page, use the Centinuation Base. vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One Caption Front View, 06/21/2018



Photo Two

### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

the corresponding information from Carting	IMPORTANT: In these spaces, copy the a	Continue	ation Page	OMB No. 1660-0008 Expiration Date: November 30, 2018
Marco Island State ZIP Code Company NAIC Number	540 Hammock Court	FOR INSURANCE COMPANY USE		
	SENSE AND ADDRESS			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 Three

Photo Three Caption Side (NE) and Garage View, 06/21/2018



Photo Four

Photo Four Caption Side (SE) View, 06/21/2018

### **BUILDING PHOTOGRAPHS**

ELEVATION CERTIFICATE	Continua	HOTOGRAPHS ation Page	OMB No. 1660-0008
IMPORTANT: In these spaces, copy the cor Building Street Address (including Apt Main	roeponding inf		Expiration Date: November 30, 2018
Building Street Address (including Apt., Unit, \$ 540 Hammock Court	Suite, and/or Bldg. No.)	or P.O. Route and Box No.	FOR INSURANCE COMPANY USE Policy Number:
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 Caption Rear (NW) View, 06/21/2018



Photo Six Caption Rear (SE) View, 06/21/2018