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 INSURANCE COMPANY USE | | |
|---|---------------------------|--|--|
| A1. Building Owner's Name Joseph E. & Clare T. Rocco Jr. Policy Number: | | | |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: 380 Hazelcrest Street | | | |
| City State Marco Island Florida | ZIP Code 34145 | | |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 9, Block 290, Marco Beach Unit 8, as recorded in PB 6, Pg(s) 63, Collier County, Florida | | | |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential | | | |
| A5. Latitude/Longitude: Lat. N25°55'44.6" Long. W81°42'32.8" Horizontal Datur | n: NAD 1927 X 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) o sq ft | | | |
| b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above | e adjacent grade0 | | |
| c) Total net area of flood openings in A8.b o sq in | | | |
| d) Engineered flood openings? ☐ Yes ☒ No | | | |
| A9. For a building with an attached garage: | | | |
| a) Square footage of attached garage sq ft | | | |
| b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent | grade4 | | |
| c) Total net area of flood openings in A9.b 512* sq in | | | |
| d) Engineered flood openings? 💌 Yes 🗌 No | | | |
| SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMA | ATION | | |
| B1. NFIP Community Name & Community Number B2. County Name | B3. State | | |
| CITY OF MARCO ISLAND 120426 COLLIER | Florida | | |
| B4. Map/Panel B5. Suffix B6. FIRM Index B7. FIRM Panel B8. Flood Zone(s | ´ (Zone AO, use Base ` ´ | | |
| 12021C0837 H 05/16/2012 Revised Date 05/16/2012 AE | Flood Depth) 8 | | |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: | | | |
| ☐ FIS Profile ☑ FIRM ☐ Community Determined ☐ Other/Source: | | | |
| B11. Indicate elevation datum used for BFE in Item B9: 🔲 NGVD 1929 🗵 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 | | | |
| | | | |

ELEVATION CERTIFICATE

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

| 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. 380 Hazelcrest Street | | | Policy Number: | |
| ity State ZIP Code | | | Company NAIC Number | |
| Marco Island Flo | rida 341 | 45 | | |
| SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) | | | | |
| C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when constructions. | <u> </u> | ding Under Constru na is complete. | ction* 🗵 Finished Construction | |
| C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), Complete Items C2.a–h below according to the builbenchmark Utilized: DN3775 | VE, V1-V30, V (with B | FE), AR, AR/A, AR/ in Item A7. In Puert | AE, AR/A1–A30, AR/AH, AR/AO. o Rico only, enter meters. | |
| Indicate elevation datum used for the elevations in i | tems a) through h) belo | | | |
| Datum used for building elevations must be the sam | | BFE. | Check the measurement used. | |
| a) Top of bottom floor (including basement, crawlsp | pace, or enclosure floor | 8.9 | X feet meters | |
| b) Top of the next higher floor | , | , | | |
| c) Bottom of the lowest horizontal structural member | er (V Zones only) | N/A | 🔀 feet 🗌 meters | |
| d) Attached garage (top of slab) | • | <u> 6. 4 </u> | 🔀 feet 🗌 meters | |
| e) Lowest elevation of machinery or equipment ser (Describe type of equipment and location in Con | vicing the building nments) | <u>8</u> . <u>8</u> | x feet meters | |
| f) Lowest adjacent (finished) grade next to building | g (LAG) | <u> 6.</u> 7 | x feet meters | |
| g) Highest adjacent (finished) grade next to building | g (HAG) | <u> </u> | x feet meters | |
| h) Lowest adjacent grade at lowest elevation of dec structural support | ck or stairs, including | N/A. | 🕱 feet 🗌 meters | |
| SECTION D – SURVEYOR | , ENGINEER, OR ARC | CHITECT CERTIF | ICATION | |
| 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 li | censed land surveyor? | ⊠Yes □No | Check here if attachments. | |
| Certifier's Name | License Number | | *************************************** | |
| John Pacetti Title | 6916 | | - PACEX | |
| Professional Surveyor and Mapper | | | S CERTIFICA ? | |
| Company Name | | | No. 6916 | |
| Marco Surveying & Mapping, LLC Address | | | STATE OF | |
| 3825 Beck Boulevard, Suite 725 | | | FLORIDA | |
| City Naples | State Florida | ZIP Code 34114 | Survey Survey | |
| Signature Digitally signed by John Pacetti Date: 2018.08.31 12:42:10 -04'00' | Date 07/16/2018 | Telephone (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, pe A9a Square footage was derived from the Collier County Vent Model #1540-520, certified to cover 200 ft² each for was no access to the structure. C2e is the A/C pad (S. si the base flood elevation shown hereon, consult applicab County Property Appraiser structure was built in 1998. | Property Appraiser's w a total net flood covera ide). Local jurisdictions | ige of 800 ft². C2a is may have elevation | s the front door threshold as there requirements more restrictive than | |
| WO# 18-417, FB170, PG6, 07/16/2018; Revised to add i | now amost vests along | 040 | | |

ELEVATION CERTIFICATE

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

| MPORTANT: In these spaces, copy the correspond | | | FOR INSURANCE COMPANY USE | | |
|---|---|---|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and 380 Hazelcrest Street | d/or Bldg. No.) or P.O. Rou | ute and Box No. | Policy Number: | | |
| | | Code | Company NAIC Number | | |
| | Florida 341 | | | | |
| SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) | | | | | |
| For Zones AO and A (without BFE), complete Items E1 complete Sections A, B,and C. For Items E1–E4, use n enter meters. | –E5. If the Certificate is in atural grade, if available. | tended to support a Check the measure | LOMA or LOMR-F request, ment used. In Puerto Rico only, | | |
| 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 | · | ☐ feet ☐ meter | s above or below the HAG. | | |
| Top of bottom floor (including basement, crawlspace, or enclosure) is | · | ☐ feet ☐ meter | s above or below the LAG. | | |
| E2. For Building Diagrams 6–9 with permanent flood o | penings provided in Section | on A Items 8 and/or | 9 (see pages 1–2 of Instructions), | | |
| the next higher floor (elevation C2.b in the diagrams) of the building is | | ☐ feet ☐ meter | s above or below the HAG. | | |
| E3. Attached garage (top of slab) is | · | ☐ feet ☐ meter | s above or below the HAG. | | |
| E4. Top of platform of machinery and/or equipment servicing the building is | | ∏feet ∏meter | rs | | |
| E5. Zone AO only: If no flood depth number is availabl floodplain management ordinance? Yes | | | | | |
| SECTION F - PROPERTY OWN | NER (OR OWNER'S REP | RESENTATIVE) CE | ERTIFICATION | | |
| The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The | ve who completes Section he statements in Sections | s A, B, and E for Zo A, B, and E are cor | ne A (without a FEMA-issued or rect to the best of my knowledge. | | |
| Property Owner or Owner's Authorized Representative | 's Name | | | | |
| Address | City | Sta | ate ZIP Code | | |
| Signature | Date | Te | lephone | | |
| Comments | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | ☐ Check here if attachments. | | |

ELEVATION CERTIFICATE

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

| IMPORTANT: In these spaces, copy the corre | esponding informatio | on 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. 380 Hazelcrest Street | | | Policy Number: | |
| City Marco Island | State Florida | ZIP Code 34145 | Company NAIC Number | |
| SECTION | ON G - COMMUNITY I | NFORMATION (OPTIONAL) | | |
| The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.) | Certificate. Complete ter meters. en from other documer | the applicable item(s) and signates and signates and signates are signed at the signates are signed at the signates are signed at the signates are signates and signates are signates at the signates at the signates at the signates are signates at the signates are signates at the signates are signates at the signates at the signates are signates at the signates at th | n below. Check the measurement and sealed by a licensed surveyor, | |
| G2. A community official completed Section Zone AO. | on E for a building loca | ated in Zone A (without a FEM | A-issued or community-issued BFE) | |
| G3. The following information (Items G4- | -G10) is provided for co | ommunity floodplain managen | nent purposes. | |
| G4. Permit Number | G5. Date Permit Issu | | Date Certificate of Compliance/Occupancy Issued | |
| G7. This permit has been issued for: | New Construction |] Substantial Improvement | | |
| G8. Elevation of as-built lowest floor (including of the building: | g basement) | 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 City of Marco Islan | đ | Telephone | | |
| Signature | | Date | | |
| | IEWED | olicable) 42 pm, Feb 11, 2019 | | |
| | | | Check here if attachments. | |

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

| 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. 380 Hazelcrest Street | | | Policy Number: |
| 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

Photo One Caption: Front View



Photo Two

Photo Two Caption: Side View

BUILDING PHOTOGRAPHS

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

ELEVATION CERTIFICATE Continuation Page

| 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. 380 Hazelcrest Street | | | Policy Number: |
| City | State | ZIP Code | Company NAIC Number |
| Marco Island | Florida | 34145 | 3333 |

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



Photo Four

Photo Four Caption : A/C View

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008

ELEVATION CERTIFICATE

Expiration Date: November 30, 2018

| 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. 380 Hazelcrest Street | | | Policy Number: |
| City | State | ZIP Code | Company NAIC Number |
| Marco Island | Florida | 34145 | 232 |

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 : Vent View



Photo Six

Photo Six Caption :Vent View