ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1–9.

\sim	20110	ll nagaa i	of this Elovatic	n Cortificate and a	all attachmonte for	$(1) \sim$	ommunity official	(2)) insurance agent/company	ond (?) huilding ownor
υu	JUV a	li baues (UI IIIIS EIEVAIIU	II CEILIICALE AILU A					insulance adent/company	. anu to	b) bullullu owner.

SEC	TION A – PROPERTY	INFORI		, ()	FOR INSUF	RANCE COMPANY USE		
A1. Building Owner's Name RB MARCO LLC					Policy Num	ber:		
A2. Building Street Address (ind Box No. 90 ANCHOR COURT								
CityStateZIP CodeMARCO ISLANDFlorida34145								
A3. Property Description (Lot a LOT 16, BLOCK 69, MARC				• • •	ER COUNT	Y, FL		
A4. Building Use (e.g., Resider	itial, Non-Residential, A	ddition	Accessory, etc.)	RESIDENTIAL				
A5. Latitude/Longitude: Lat. N	25°56'18.29"	Long. <u>M</u>	/ 81°41'44.49"	Horizontal Datur	n: 🗌 NAD 1	1927 🛛 NAD 1983		
A6. Attach at least 2 photograp	hs of the building if the	Certific	ate is being used to	o obtain flood insur	ance.			
A7. Building Diagram Number	1B							
A8. For a building with a crawls	pace or enclosure(s):							
a) Square footage of crawl	space or enclosure(s)		N/A sq ft					
b) Number of permanent fl	ood openings in the cra	wlspac	e or enclosure(s) w	ithin 1.0 foot above	e adjacent gra	ade N/A		
c) Total net area of flood o	penings in A8.bN	A s	q in					
d) Engineered flood openir	ngs? 🗌 Yes 🗵 No	C						
A9. For a building with an attacl	ned garage:							
a) Square footage of attacl	ned garage 1048		sq ft					
b) Number of permanent fl				ot above adiacent	orade	6		
c) Total net area of flood o		62	sq in					
d) Engineered flood openir								
	ngs? 🗙 Yes 🗌 N	0						
SE	ECTION B - FLOOD IN	ISURA	NCE RATE MAP			_		
B1. NFIP Community Name & C	•		B2. County Name			B3. State		
CITY OF MARCO ISLAND	120426		COLLIER			Florida		
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	E1	IRM Panel fective/ evised Date	B8. Flood Zone(s	(Zo	se Flood Elevation(s) ne AO, use Base od Depth)		
12021C 0829 H	05/16/2012		05/16/2012	AE		(N.A.V.D.1988)		
B10. Indicate the source of the	Base Flood Elevation (BFE) da	ata or base flood de	epth entered in Iter	n B9:			
🗌 FIS Profile 🖂 FIRM	Community Determ	nined [Other/Source: _	·				
B11. Indicate elevation datum ι	used for BFE in Item B9): 🗌 N	GVD 1929 🛛 NA	VD 1988 🗌 O	her/Source:			
B12. Is the building located in a	B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🛛 No							
Designation Date:	Designation Date:							

ELEVATION CERTIFICATE	OMB No. 1660-0008 Expiration Date: November 30, 2018		
IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/o 90 ANCHOR COURT	-		Policy Number:
		ZIP Code 34145	Company NAIC Number
SECTION C – BUILDING EI		MATION (SURVEY R	EQUIRED)
 C1. Building elevations are based on: Constructi *A new Elevation Certificate will be required when one constructions – Zones A1–A30, AE, AH, A (with BFE) 	construction of the bu , VE, V1–V30, V (with	h BFE), AR, AR/A, AR	
Complete Items C2.a–h below according to the bui Benchmark Utilized: <u>COL 11</u>	ilding diagram specifi Vertical Dati		•
Indicate elevation datum used for the elevations in NGVD 1929 X NAVD 1988 Other, Datum used for building elevations must be the sar	/Source:		
a) Top of bottom floor (including basement, crawls	anaco, or enclosure f	loor) 9.1	Check the measurement used.
	pace, or enclosure in	<u></u>	
	or (V Zones only)	<u> </u>	
 c) Bottom of the lowest horizontal structural memb d) Attached garage (top of slab) 	er (v zones oniy)	<u> </u>	X feet
 e) Lowest elevation of machinery or equipment se (Describe type of equipment and location in Cor 	rvicing the building mments)	<u> </u>	X feet meters
f) Lowest adjacent (finished) grade next to buildin		<u> </u>	X feet I meters
g) Highest adjacent (finished) grade next to buildir		<u> </u>	X feet meters
 h) Lowest adjacent grade at lowest elevation of de structural support 	,		X feet ☐ meters
SECTION D – SURVEYOR	, ENGINEER, OR /	ARCHITECT CERTIF	
This certification is to be signed and sealed by a land su I certify that the information on this Certificate represent statement may be punishable by fine or imprisonment u	ts my best efforts to i	interpret the data availa	y law to certify elevation information. able. I understand that any false
Were latitude and longitude in Section A provided by a l	licensed land survey	or? 🛛 Yes 🗌 No	Check here if attachments.
Certifier's Name ANTONIO TRIGO(18.0084)	License Number LS 2982		
Title LAND SURVEYOR			TONIO TROUT
Company Name A. TRIGO & ASSOCIATES INC.			No. 2982
Address 2223 TRADE CENTER WAY			CORIDA SUM
City NAPLES	State Florida	ZIP Code 34109	CARGONIA CONTRACTOR
Signature Antonio Trigo, PLS No.2982 Digitally signed by Antonio Trigo, PLS No.2982 Date: 2019.12.19 15:04:55 -05'00'	s Date 12/17/2019	Telephone (239) 594-8448	
Copy all pages of this Elevation Certificate and all attachm	ients for (1) communi	y official, (2) insurance	agent/company, and (3) building owner.
Comments (including type of equipment and location, pe A9b. 6 SMART VENTS MODEL 1540-520, RATED AT C2e. LOWEST EQUIPMENT SERVICING BUILDING POOL EQUIPMENT AT ELEV. 6.2' (N.A.V.D. 19 CROWN OF ROAD OPPOSITE EAST PROPERTY LIN CROWN OF ROAD OPPOSITE SOUTHWEST PROPE	T 200 SQ. FT. EACH IS AIR CONDITION 988) IE = ELEV. 5.00' (N.A	ER AT ELEV. 9.1' (N.A A.V.D. 1988)	N.V.D. 1988)

OMB No.	1660-0008	
Expiratior	n Date: November 30, 2	2018

ELEVATION CERTIFICATE			Expiration Date	: November 30, 2018
IMPORTANT: In these spaces, copy the cor	responding informatio	n from Section A.	FOR INSURA	NCE COMPANY USE
Building Street Address (including Apt., Unit, S 90 ANCHOR COURT	Suite, and/or Bldg. No.) o	or P.O. Route and Box No	D. Policy Number	:
City MARCO ISLAND	State Florida	ZIP Code 34145	Company NAI	C Number
SECTION E – BUILD	DING ELEVATION INF OR ZONE AO AND ZO	ORMATION (SURVEY NE A (WITHOUT BFE)	NOT REQUIRED)	
For Zones AO and A (without BFE), complete complete Sections A, B,and C. For Items E1–E enter meters.				
 E1. Provide elevation information for the follow the highest adjacent grade (HAG) and the a) Top of bottom floor (including baseme) 	e lowest adjacent grade		nether the elevation is	above or below
crawlspace, or enclosure) is b) Top of bottom floor (including baseme	· · · · · · · · · · · ·	feet 🔲	meters 🗌 above or	r 🔲 below the HAG.
crawlspace, or enclosure) is	·	feet 🔲	meters 🗌 above or	r 🗌 below the LAG.
E2. For Building Diagrams 6–9 with permaner the next higher floor (elevation C2.b in	nt flood openings provid	ed in Section A Items 8 a	nd/or 9 (see pages 1-	-2 of Instructions),
the diagrams) of the building is	· · ·	feet	meters 🗌 above or	r 🗌 below the HAG.
E3. Attached garage (top of slab) is		feet	meters 🗌 above or	r 🔲 below the HAG.
E4. Top of platform of machinery and/or equip servicing the building is	oment	feet 🔲	meters 🗌 above o	r
E5. Zone AO only: If no flood depth number is floodplain management ordinance?		the bottom floor elevated nown. The local official r		
SECTION F – PROPER	RTY OWNER (OR OWN	IER'S REPRESENTATIV	E) CERTIFICATION	
The property owner or owner's authorized repr community-issued BFE) or Zone AO must sigr	resentative who complet here. The statements i	tes Sections A, B, and E t n Sections A, B, and E ar	for Zone A (without a re correct to the best o	FEMA-issued or of my knowledge.
Property Owner or Owner's Authorized Repres	sentative's Name			
Address		City	State	ZIP Code
Signature		Date	Telephone	
Comments				
			Check	here if attachments.

OMB No.	1660-0008		
Expiration	Date: Novembe	er 30, 2	2018

IMPORTANT: In these spaces, copy the corre	Γ	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, St 90 ANCHOR COURT	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 90 ANCHOR COURT						
City MARCO ISLAND	State Florida	ZIP Code 34145		Company NAIC Number			
SECTIO	ON G – COMMUNITY IN	FORMATION (OPTIO	NAL)				
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	dinance to administer th Certificate. Complete th	e community's floodpla	ain man				
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)							
G2. A community official completed Section or Zone AO.	on E for a building locate	ed in Zone A (without a	a FEMA	-issued or community-issued BFE)			
G3. The following information (Items G4-	G10) is provided for con	nmunity floodplain mar	nageme	nt purposes.			
G4. Permit Number	G5. Date Permit Issue	d		ate Certificate of ompliance/Occupancy Issued			
G7. This permit has been issued for:] New Construction	Substantial 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	the building site:	[feet	meters Datum			
G10. Community's design flood elevation:		[] feet	meters			
Local Official's Name		Title Floodpla	in Co	oordinator			
Community Name City of Marco Is	land	Telephone					
Signature		Date					
Comments (including type of equipment and loc	cation, per C2(e), if appli	cable)					
				_			
REVIEWED							
By Kelli DeFedericis at 1:46 pm, Jan 15, 2020							
				Check here if attachments.			

ELEVATION CERTIFICATE

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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

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Building Street Address (including Apt 90 ANCHOR COURT	Policy Number:		
City	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 VIEW 12/17/2019



Photo Two Caption LEFT SIDE VIEW 12/17/2019

ELEVATION CERTIFIC

BUILDING PHOTOGRAPHS Continuation Page

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

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IMPORTANT: In these spaces, copy the o	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Un 90 ANCHOR COURT	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 Caption REAR VIEW



Photo Four

RIGHT SIDE VIEW 12/17/2019 Photo Four Caption

City MARCO ISLAND		State Florida	ZIP Code 34145	Company NAIC Number
	aphs than will f View" and "Rea e foundation with			notographs below. Identify all photographs and "Left Side View." When applicable, or vents, as indicated in Section A8.
Photo Five Caption TYF	PICAL VENT	Phot 12/17/2019	o Five	
Photo Six Contion		Pho	to Six	

BUILDING PHOTOGRAPHS

Continuation Page

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.

OMB No. 1660-0008

Policy Number:

Expiration Date: November 30, 2018 FOR INSURANCE COMPANY USE

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

ELEVATION CERTIFICATE

90 ANCHOR COURT