Important: Follow the instructions on pages 1–9.

<u></u>		af the Elevention			1)	· • · · · · · · · / · / · / · · · · / · · · · · / ·	insurance agent/company	and (0) hould be a second on
(.on	/ all hades	of this Elevation	Certificate and al	Latracoments for (I) community	$I \cap \Pi \cap \Pi \cap I$	Insurance adent/company	and (3) building owner
O U P			oon inoute und un				mourance agena company	, and (of ballang owner.

SECTION A – PROPERTY INFORMATION FOR INSURANCE COMPANY USE						
A1. Building Owner's Name JASON BAILEY and LISA					Policy Num	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 440 BALD EAGLE DRIVE						IAIC Number:
City State ZIP Code						
MARCO ISLAND Florida 34145						
A3. Property Description (Lot ar LOT 12, BLOCK 258, MARC				•	7 THRU 54,	COLLIER COUNTY, FL
A4. Building Use (e.g., Residen	tial, Non-Residential, Ad	ldition,	Accessory, etc.)	RESIDENTI	AL.	
A5. Latitude/Longitude: Lat.	N 25°56'54.07" Lo	ong	W 81°43'19.63"	Horizontal Datur	n: 🗌 NAD ´	1927 🗙 NAD 1983
A6. Attach at least 2 photograp	ns of the building if the C	Certific	ate is being used to	obtain flood insur	ance.	
A7. Building Diagram Number	1B					
A8. For a building with a crawls	pace or enclosure(s):					
a) Square footage of crawle	space or enclosure(s) _		N/A sq ft			
b) Number of permanent flo	ood openings in the craw	lspace	e or enclosure(s) w	ithin 1.0 foot above	e adjacent gr	ade N/A
c) Total net area of flood op	enings in A8.bN/A	s	q in			
d) Engineered flood openin	gs? 🗌 Yes 🖂 No					
A9. For a building with an attach	ned garage:					
a) Square footage of attach		:	sq ft			
b) Number of permanent flo				ot above adjacent	orade	3
c) Total net area of flood op			sq in			
d) Engineered flood openin						
SE	CTION B – FLOOD INS	SURA	NCE RATE MAP	(FIRM) INFORMA		
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	Ef	IRM Panel fective/ evised Date	B8. Flood Zone(s	Zo (Zo	se Flood Elevation(s) ne AO, use Base od Depth)
12021C 0828 H						
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 OPA						

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/or 440 BALD EAGLE DRIVE	Policy Number:		
City Stat MARCO ISLAND Flor		° Code 145	Company NAIC Number
SECTION C – BUILDING ELI	EVATION INFORMA	TION (SURVEY F	REQUIRED)
 C1. Building elevations are based on: □ Constructio *A new Elevation Certificate will be required when constructions – Zones A1–A30, AE, AH, A (with BFE), Complete Items C2.a–h below according to the build Benchmark Utilized: COL 15 Indicate elevation datum used for the elevations in item □ NGVD 1929 × NAVD 1988 □ Other/S Datum used for building elevations must be the same 	onstruction of the build VE, V1–V30, V (with I ling diagram specified Vertical Datun ems a) through h) bel Source:	ding is complete. BFE), AR, AR/A, Al I in Item A7. In Pue n:N.A.V.D. 19 ow.	R/AE, AR/A1–A30, AR/AH, AR/AO. rto Rico only, enter meters.
, i i i i i i i i i i i i i i i i i i i			Check the measurement used.
a) Top of bottom floor (including basement, crawlsp	ace, or enclosure floc		
b) Top of the next higher floor		<u> </u>	
c) Bottom of the lowest horizontal structural membe	r (V Zones only)	<u> </u>	X feet meters
d) Attached garage (top of slab)		<u> </u>	X feet 🗌 meters
 e) Lowest elevation of machinery or equipment service (Describe type of equipment and location in Com) 	ricing the building ments)	<u> </u>	X feet meters
f) Lowest adjacent (finished) grade next to building	(LAG)	<u> </u>	X feet meters
g) Highest adjacent (finished) grade next to building	I (HAG)	<u> </u>	X feet 🗌 meters
 h) Lowest adjacent grade at lowest elevation of dec structural support 	k or stairs, including	<u> </u>	x feet meters
SECTION D – SURVEYOR,	ENGINEER, OR AF	CHITECT CERTI	FICATION
This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment un	my best efforts to inte	erpret the data avai	by law to certify elevation information. lable. I understand that any false
Were latitude and longitude in Section A provided by a lic			Check here if attachments.
Certifier's Name ANTONIO TRIGO (19.0070)	License Number PLS 2982		
Title LAND SURVEYOR			RTIFICA
Company Name A. TRIGO & ASSOCIATES, INC.			No. 2982 STATE OF CONTRACTOR
Address 2223 TRADE CENTER WAY			CORIDA SU
City NAPLES	State Florida	ZIP Code 34109	LAND LAND
Signature Antonio Trigo, PLS No.2982 Digitally signed by Antonio Trigo, PLS No.2982 Date: 2019.12.10 13:54:33 -05'00'	Date 12/09/2019	Telephone (239) 594-8448	
Copy all pages of this Elevation Certificate and all attachme	nts for (1) community	official, (2) insurance	e agent/company, and (3) building owner.
Comments (including type of equipment and location, per A9b. 3 SMART VENTS MODEL 1540-520 RATED AT 2 C2e. LOWEST EQUIPMENT SERVICING BUILDING IS POOL EQUIPMENT AT ELEV. 6.9' (N.A.V.D. 198 CROWN OF ROAD OPPOSITE THE NORTHWEST PRO CROWN OF ROAD OPPOSITE THE SOUTHEAST PRO	200 SQ. FT EACH S WATER HEATER A 8) DPERTY LINE AT ELI	EV. 4.58' (N.A.V.D.	1988)

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

ELEVATION CERTIFICATE		Expiration Date: November 30, 2018				
IMPORTANT: In these spaces, copy the correspor	Г	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, a 440 BALD EAGLE DRIVE	nd/or Bldg. No.)	or P.O. Route and Box	No.	Policy Number:		
City MARCO ISLAND	State Florida	ZIP Code 34145		Company NAIC Number		
SECTION E – BUILDING E FOR ZO		FORMATION (SURVE ONE A (WITHOUT BFI		REQUIRED)		
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B,and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.						
 E1. Provide elevation information for the following at the highest adjacent grade (HAG) and the lowes a) Top of bottom floor (including basement, 			whether	the elevation is above or below		
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet	_ meters			
crawlspace, or enclosure) is	· · · · ·		meters			
E2. For Building Diagrams 6–9 with permanent floor the next higher floor (elevation C2.b in	l openings provid		_			
the diagrams) of the building is E3. Attached garage (top of slab) is		feet	_ meters ☐ meters			
E4. Top of platform of machinery and/or equipment						
servicing the building is			_ meters			
E5. Zone AO only: If no flood depth number is availa floodplain management ordinance?				ordance with the community's ertify this information in Section G.		
SECTION F – PROPERTY O	WNER (OR OW	IER'S REPRESENTAT	IVE) CE	RTIFICATION		
The property owner or owner's authorized representa community-issued BFE) or Zone AO must sign here.	ative who comple The statements	tes Sections A, B, and in Sections A, B, and E	E for Zon are corre	e A (without a FEMA-issued or ect to the best of my knowledge.		
Property Owner or Owner's Authorized Representativ	ve's Name					
Address		City	Stat	te ZIP Code		
Signature		Date	Tele	ephone		
Comments						
				Check here if attachments.		

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

IMPORTANT: In these spaces, copy the corre		FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, St 440 BALD EAGLE DRIVE	No.	Policy Number:				
City MARCO ISLAND	State Florida	ZIP Code 34145		Company NAIC Number		
		Y INFORMATION (OPTIO	,			
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	Certificate. Comple	ter the community's floodpla ete the applicable item(s) and	ain maı nd sign	nagement ordinance can complete below. Check the measurement		
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 Secti or Zone AO.	on E for a building	located in Zone A (without a	a FEM/	A-issued or community-issued BFE)		
G3. The following information (Items G4–	G10) is provided fo	r community floodplain mar	nagem	ent purposes.		
G4. Permit Number	G5. Date Permit	Issued		Date Certificate of Compliance/Occupancy Issued		
G7. This permit has been issued for:] New Constructior	n 🗌 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 t	the building site: _		_ feet	meters Datum		
G10. Community's design flood elevation:	-		feet	meters Datum		
Local Official's Name		Title Floodplain Coo	ordinato	r		
Community Name City of Marco Island		Telephone				
Signature		Date				
Comments (including type of equipment and loc	cation, per C2(e), if	applicable)				
REVIEW	'ED					
		29 am. Dec 13. 2019				
By Kelli DeFedericis at 11:29 am, Dec 13, 2019						
				Check here if attachments.		

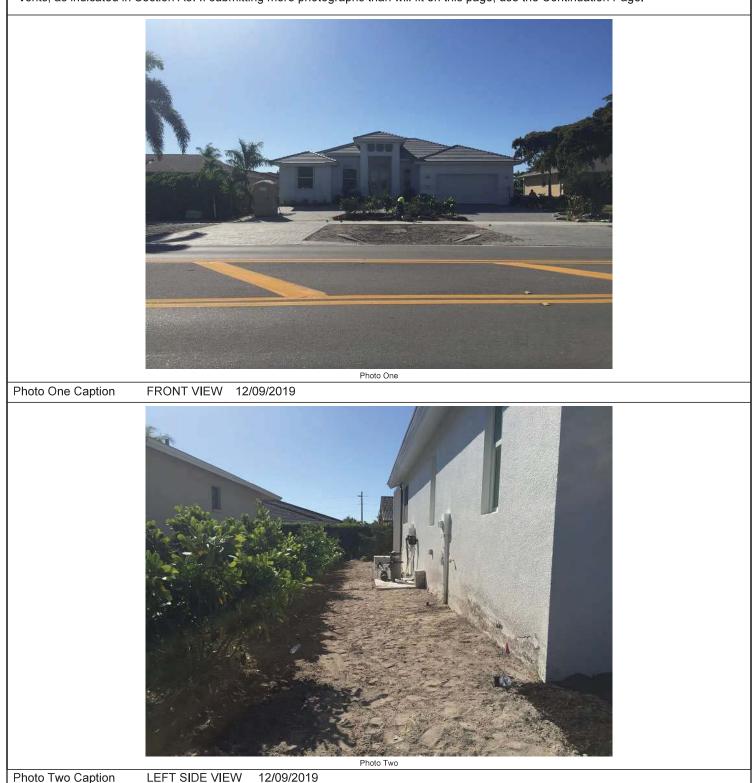
BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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

IMPORTANT: In these spaces, copy th	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., 440 BALD EAGLE DRIVE	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.



BUILDING PHOTOGRAPHS

Continuation Page

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

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., L 440 BALD EAGLE DRIVE	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 12/09/2019



Photo Four Caption RIGHT SIDE VIEW 12/09/2019

Building Street Address (including 440 BALD EAGLE DRIVE	g Apt., Unit, Suite, and/or Bldg. No.) (or P.O. Route and Box No	p. Policy Number:
City MARCO ISLAND	State Florida	ZIP Code 34145	Company NAIC Number
with: date taken: "Front View"	than will fit on the preceding page and "Rear View"; and, if require idation with representative examples	d. "Right Side View" a	tographs below. Identify all photographs nd "Left Side View." When applicable, vents, as indicated in Section A8.
		ALING KIT NOW Market Particular Market Particula	
Photo Five Caption TYPICAL	_ VENT 12/09/2019		
	Photo	Six	
Photo Six Caption			

ELEVATION CERTIFICATE Continuation Page IMPORTANT: In these spaces, copy the corresponding information from Section A.

BUILDING PHOTOGRAPHS Continuation Page

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

FOR INSURANCE COMPANY USE

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