ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1–9.

<u> </u>		- 6 + 1- : -		O antificante and		5 14	\		(0)			
Cop	v all pages	of this	Elevation	Certificate and a	all attachments	5 TOT (1) community	/ oπiciai,	(2) Insurance	agent/company	, and (3) building owner.

SECTION A – PROPERTY INFO	RMATION	, , (,	FOR INSUF	ANCE COMPANY USE				
A1. Building Owner's Name Policy Number: SUNSET BUILDERS Policy Number:								
A2. Building Street Address (including Apt., Unit, Suite, and/ Box No. 541 HAMMOCK COURT	or Bldg. No.) o	P.O. Route and	Company N	AIC Number:				
CityStateZIP CodeMARCO ISLANDFlorida34145								
 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 20, BLOCK 312 OF MARCO BEACH UNIT NINE, PLAT BOOK 6, PAGES 69 THRU 73, COLLIER COUNTY, FLORIDA. 								
A4. Building Use (e.g., Residential, Non-Residential, Additio	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL							
A5. Latitude/Longitude: Lat. N 25°55'22.62" Long.	W 81°42'33.3	3" Horizontal D	Datum: 🗌 NAD 1	927 🗙 NAD 1983				
A6. Attach at least 2 photographs of the building if the Certif	icate is being u	sed to obtain flood i	nsurance.					
A7. Building Diagram Number1B								
A8. For a building with a crawlspace or enclosure(s):								
a) Square footage of crawlspace or enclosure(s)		N/A sq ft						
b) Number of permanent flood openings in the crawlspa	ce or enclosure	e(s) within 1.0 foot a	bove adjacent gra	ide N/A				
c) Total net area of flood openings in A8.b	N/A sq in							
d) Engineered flood openings? 🗌 Yes 🗵 No								
A9. For a building with an attached garage:								
a) Square footage of attached garage	738.00 sq ft							
b) Number of permanent flood openings in the attached	garage within '	I.0 foot above adjac	ent grade 4					
c) Total net area of flood openings in A9.b	308.00 sq	in						
d) Engineered flood openings? 🛛 Yes 🗍 No								
SECTION B – FLOOD INSUR	ANCE RATE	MAP (FIRM) INFO	RMATION					
B1. NFIP Community Name & Community Number CITY OF MARCO ISLAND 120426	B2. County	Name COLLIER		B3. State Florida				
Number Date E	IRM Panel ffective/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)				
	12021C 0837 H 05-16-2012 Revised Date 05-16-2012 AE 9.0' (N.A.V.D. 1988)							
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:								
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								

ELEVATION CERTIFICATE			OMB No. 1660-0008 Expiration Date: November 30, 2022			
IMPORTANT: In these spaces, copy the correspor	ding information f	rom Section A.	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, a 541 HAMMOCK COURT	Policy Number:					
City	State	ZIP Code	Company NAIC Number			
MARCO ISLAND	Florida	34145				
SECTION C – BUILDING	G ELEVATION INF	ORMATION (SURVEY F	REQUIRED)			
C1. Building elevations are based on: Const *A new Elevation Certificate will be required wh	ruction Drawings* nen construction of t	Building Under Const building is complete.	ruction* X Finished Construction			
C2. Elevations – Zones A1–A30, AE, AH, A (with B Complete Items C2.a–h below according to the Benchmark Utilized: COL 11	e building diagram sp		rto Rico only, enter meters.			
Indicate elevation datum used for the elevation			5. 1900			
□ NGVD 1929 🖾 NAVD 1988 □ O	, 0	TTI) below.				
Datum used for building elevations must be the	same as that used	for the BFE.	Check the measurement used			
a) Top of bottom floor (including basement, cra	awlenaco, or onclosi	uro floor)	Check the measurement used. 10.1 🛪 feet 🗌 meters			
	awispace, or enclosi		23.6 X feet meters			
b) Top of the next higher floor			N/A X feet meters			
c) Bottom of the lowest horizontal structural m	ember (V Zones onl	y)	8.2 × feet meters			
d) Attached garage (top of slab)						
 e) Lowest elevation of machinery or equipmer (Describe type of equipment and location in 	t servicing the build Comments)	ing	10.1 X feet meters			
f) Lowest adjacent (finished) grade next to bu	ilding (LAG)		7.2 X feet meters			
g) Highest adjacent (finished) grade next to bu	uilding (HAG)		8.0 X feet meters			
 h) Lowest adjacent grade at lowest elevation of structural support 	of deck or stairs, incl	uding	N/A X feet meters			
SECTION D – SURVE	YOR, ENGINEER,	OR ARCHITECT CERTI	FICATION			
This certification is to be signed and sealed by a lar I certify that the information on this Certificate repre statement may be punishable by fine or imprisonme	sents my best effort	s to interpret the data ava	by law to certify elevation information. <i>ilable. I understand that any false</i>			
Were latitude and longitude in Section A provided b			Check here if attachments.			
Certifier's Name ANTONIO TRIGO (04.0300)	License Num PLS 2982	nber				
Title			INTONIO TRICINA			
LAND SURVEYOR			RTIFICATION			
Company Name A. TRIGO & ASSOCIATES, INC.			No. 2982 STATE OF			
Address 2223 TRADE CENTER WAY			LAND SUMMER			
City NAPLES	State Florida	ZIP Code 34109				
Signature Antonio Trigo, PLS Digitally signed by Anton	-	Telephone	Ext.			
No.2982 Date: 2020.10.20 17:52:31		(239) 594-8448				
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) A9b. 4 SMART VENTS MODEL 1540-520, RATED AT 200 SQ. FT. EACH C2e. LOWEST EQUIPMENT SERVICING BUILDING IS AIR CONDITIONER AND GENERATOR AT ELEV. 10.1' (N.A.V.D. 1988) POOL EQUIPMENT IS AT ELEV. 7.6' (N.A.V.D. 1988) CROWN OF ROAD OPPOSITE SOUTHEAST PROPERTY LINE = 4.42' (N.A.V.D. 1988) CROWN OF ROAD OPPOSITE NORTHWEST PROPERTY LINE = 4.50' (N.A.V.D. 1988) 						

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATE			Expiration Date: November 30, 2022					
IMPORTANT: In these spaces, copy the correspo	nding informatio	n from Section A.	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, 541 HAMMOCK COURT	and/or Bldg. No.) (or P.O. Route and Box No.	Policy Number:					
City MARCO ISLAND	State Florida	ZIP Code 34145	Company NAIC Number					
I 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 complete Sections A, B,and C. For Items E1–E4, us enter meters.								
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 b) Top of bottom floor (including basement,								
crawlspace, or enclosure) is								
E2. For Building Diagrams 6–9 with permanent floo the next higher floor (elevation C2.b in	a openings provia							
the diagrams) of the building is								
E3. Attached garage (top of slab) isE4. Top of platform of machinery and/or equipment		feet met	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 avail floodplain management ordinance? Yes			accordance with the community's st certify this information in Section G.					
SECTION F – PROPERTY C	WNER (OR OWN	IER'S REPRESENTATIVE)	CERTIFICATION					
The property owner or owner's authorized represent community-issued BFE) or Zone AO must sign here	tative who complet a. The statements i	tes Sections A, B, and E for a n Sections A, B, and E are c	Zone A (without a FEMA-issued or orrect to the best of my knowledge.					
Property Owner or Owner's Authorized Representat	ive's Name							
Address		City	State ZIP Code					
Signature		Date	Telephone					
Comments								
			Check here if attachments.					

OMB No.	1660-0	8000		
Expiration	Date:	November	30,	2022

ELEVATION CERTIFICATE	Expiration Date: November 30, 2022						
IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, S 541 HAMMOCK COURT	No. Policy Number:						
City MARCO ISLAND	State Florida	ZIP Code 34145	Company NAIC Number				
SECTIO	ON G – COMMUNITY	INFORMATION (OPTIC	INAL)				
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.							
	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation						
G2. A community official completed Sect or Zone AO.	ion E for a building loc	ated in Zone A (without	a FEMA-issued or community-issued BFE)				
G3. The following information (Items G4-	-G10) is provided for c	ommunity floodplain ma	nagement purposes.				
G4. Permit Number	G5. Date Permit Iss	ued	G6. Date Certificate of Compliance/Occupancy Issued				
G7. This permit has been issued for:] New Construction [] Substantial Improvem	ent				
G8. Elevation of as-built lowest floor (includin 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 Datum				
Local Official's Name		Title Floodplain Coordinator					
Community Name City of Marco Island		Telephone					
Signature		Date					
Comments (including type of equipment and lo	cation, per C2(e), if ap	plicable)					
REVIEWED By Kelli DeFedericis at 3:48 pm, Oct 30, 2020							
Ву		at 3.40 pm, Oct 3	0, 2020				
			Check here if attachments.				

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Un 541 HAMMOCK COURT	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 Caption FRONT VIEW

10/16/2020

Clear Photo One



Photo Two Caption LEFT SIDE VIEW 10/16/2020

FEMA Form 086-0-33 (12/19)

Replaces all previous editions.

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATE	Continua	tion Page	Expiration Date: November 30, 2022	
IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, St 541 HAMMOCK 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.



REAR VIEW 10/16/2020 Photo Three Caption

Clear Photo Three



RIGHT SIDE VIEW 10/16/2020 Photo Four Caption

Replaces all previous editions.