# U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

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

# 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					ANCE COMPANY USE	
A1. Building Owner's Bloom, Bryan M.	A1. Building Owner's Name  Bloom, Bryan M.  Policy Number:					
A2. Building Street A Box No. 810 Kendall Drive	ddress (including Apt., Unit, Suite	e, and/or Bldg. No.) o	r P.O. Route and	Company N	AIC Number:	
City Marco Island		State Florida		ZIP Code 34145		
	tion (Lot and Block Numbers, Ta) 5, MARCO BEACH UNIT TWELV	· · · · · · · · · · · · · · · · · · ·		2.)		
A4. Building Use (e.g	g., Residential, Non-Residential, A	Addition, Accessory,	etc.) Residentia	l		
A5. Latitude/Longitud	de: Lat. N 25* 57'31.46"	Long. W 81*44'31.17	" Horizontal	Datum: NAD 1	927 × NAD 1983	
A6. Attach at least 2	photographs of the building if the	Certificate is being u	used to obtain flood	I insurance.	_	
A7. Building Diagram	Number 1B					
A8. For a building wit	th a crawlspace or enclosure(s):					
a) Square footag	ge of crawlspace or enclosure(s)		N/A sq ft			
b) Number of pe	rmanent flood openings in the cra	wispace or enclosure	e(s) within 1.0 foot	above adjacent gra	de N/A	
c) Total net area	of flood openings in A8.b	N/A sq ir	1			
d) Engineered flo	ood openings? Yes X N	0				
	h an attached garage:	600.00 am 8				
	ge of attached garage					
	rmanent flood openings in the atte	ached garage within	1.0 foot above adja	acent grade 4		
c) Total net area	of flood openings in A9.b	800.00 sq	in			
d) Engineered flo	ood openings? X Yes N	lo				
	SECTION B - FLOOD I	NSURANCE RATE	MAP (FIRM) INF	ORMATION		
B1. NFIP Community City of Marco Isla	Name & Community Number and 120426	B2. County Collier	Name		B3. State Florida	
B4. Map/Panel I	B5. Suffix B6. FIRM Index Date	B7. FIRM Panel Effective/ Revised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) Base Flood Depth)	
12021C 0828	H 05-16-2012	05-16-2012	AE	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 X NAVD 1988 Other/Source:						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Tyes 🔀 No						
Designation Date:   CBRS OPA						

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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. 810 Kendall Drive			Policy Number:	
· · · · · · · · · · · · · · · · · · ·	rate ZIP orida 3414	Code 45	Company NAIC Number	
SECTION C - BUILDING E	LEVATION INFORMAT	ION (SURVEY RE	EQUIRED)	
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)  C1. Building elevations are based on:				
<ul> <li>g) Highest adjacent (finished) grade next to buildi</li> <li>h) Lowest adjacent grade at lowest elevation of design and the second s</li></ul>			6.68 🗵 feet 🔲 meters	
structural support			7.12 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?				
Certifier's Name	License Number		Martha 1816	
Miguel J. Garay  Title Professional Surveyors and Mapper  Company Name PRISMA LAND SURVEYORS, LLC  Address 524 W. Archer Pkwy	LS 6594		Pi ce i ce	
City Cape Coral	State Florida	ZIP Code 33904		
Signature WAT Caray	Date 04-15-2020	Telephone (305) 305-9448	Ext.	
Copy all pages of this Elevation dertificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.				
Comments (including type of equipment and location, p C2(e) Central air conditioner exterior. Crown of road elevation = 4.52'. Pool equipment elevation = 6.97'. SmartVent Model 1540-510 installed 4 Vents x 200 squares inches = 800 square foot of covered			•	

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Building Street Address (including Apt., Unit, Suite, and 810 Kendall Drive	or Bldg. No.) or P.O. Rou	te and Box No.	Policy Number:		
l	tate ZIP lorida 3414	Code 45	Company NAIC Number		
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 no enter meters.  E1. Provide elevation information for the following and the highest adjacent grade (HAG) and the lewest at 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 flood op the next higher floor (elevation C2.b in the diagrams) of the building is  E3. Attached garage (top of slab) is	atural grade, if available. ( check the appropriate box djacent grade (LAG).	Check the measure tes to show whethe feet meter feet meter	r the elevation is above or below  above or below the HAG. above or below the LAG. above or below the LAG. above or below the LAG. above or below the HAG. above or below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is		☐ feet ☐ meter			
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	o, is the top of the bottom No Unknown. The	floor elevated in ac			
SECTION F - PROPERTY OWN	ER (OR OWNER'S REP	RESENTATIVE) CE	RTIFICATION		
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	e who completes Sections e 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	St	ate ZIP Code		
Signature	Date	Те	lephone		
Comments					
			Check here if attachments.		

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MPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, St 810 Kendall Drive	No. Policy Number:		
City	State	ZIP Code	Company NAIC Number
Marco Island	Florida	34145	L
SECTIO	N G - COMMUNIT	Y INFORMATION (OPTIC	ONAL)
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	er the community's floodp ite the applicable item(s) a	lain management ordinance can complete and sign below. Check the measurement
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)	en from other documed by law to certify	nentation that has been si elevation information. (Ind	gned and sealed by a licensed surveyor, icate the source and date of the elevation
G2. A community official completed Section or Zone AO.	on E for a building l	ocated in Zone A (without	a FEMA-issued or community-issued BFE)
G3. The following information (Items G4-	G10) is provided for	community floodplain ma	anagement purposes.
G4. Permit Number	G5. Date Permit I	ssued	G6. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	] New Construction	Substantial Improvem	nent
G8. Elevation of as-built lowest floor (including of the building:	) basement)		feet meters Datum
G9. BFE or (in Zone AO) depth of flooding at t	he building site:		feet meters Datum
G10. Community's design flood elevation:	*****		feet meters Datum
Local Official's Name		Title Floodplai	n Coordinator
Community Name		Telephone	
City of Marco Island			
Signature		Date	
Comments (including type of equipment and loc	cation, per C2(e), if	applicable)	
RFV	IEWED		
		at 2:16 pm, May 05,	2020
29 101			, 2020
			Check here if attachments

# **BUILDING PHOTOGRAPHS**

#### ELEVATION CERTIFICATE

See Instructions for Item A6.

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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 04/15/2020

Clear Photo One



Photo Two Caption Rear View 04/15/2020

Clear Photo Two

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# **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

Continuation Page

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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.  810 Kendall Drive			FOR INSURANCE COMPANY USE Policy Number:
TVIAI CO ISIANO	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

Photo Three Caption Right Side View 04/15/2020

Clear Photo Three



Photo Four Caption Left Side View 04/15/2020

Clear Photo Four

# **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

Continuation Page

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Building Street Address (including 810 Kendall 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

Photo Three Caption SmartVent 04/15/2020

Clear Photo Three

Photo Fau

Photo Four Caption 04

04/15/2020 N/A

Clear Photo Four