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	FOR INSURANCE COMPANY USE		
A1. Building Owner's Name Kevin Corliss/ Michelle Corliss	Policy Number:		
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 609 Somerset Court 	Company NAIC Number:		
City State Marco Island Florida	ZIP Code 34145		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Parcel No.: 58770680003			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential			
A5. Latitude/Longitude: Lat. N25°95'31.7" Long. W 81°73'65.8" Horizontal Datur	n: ☐ NAD 1927 🔀 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) N/A sq ft			
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above	adjacent grade N/A		
c) Total net area of flood openings in A8.b sq in			
d) Engineered flood openings?			
A9. For a building with an attached garage:			
a) Square footage of attached garage 572.00 sq ft			
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent g	rade 3		
c) Total net area of flood openings in A9.b 393.00 sq in			
d) Engineered flood openings? Yes No			
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMA B1. NFIP Community Name & Community Number B2. County Name			
B1. NFIP Community Name & Community Number City of Marco Island 120426 B2. County Name Collier	B3. State Florida		
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date B8. Flood Zone(s) B9. B	ase Flood Elevation(s) Zone AO, use 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 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	g information from S	ection A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 609 Somerset Court			Policy Number:
City Sta Marco Island Flo		P Code 145	Company NAIC Number
SECTION C - BUILDING EL	EVATION INFORMA	ATION (SURVEY RI	EQUIRED)
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when concerning to the build Elevations – Zones A1–A30, AE, AH, A (with BFE), Complete Items C2.a—h below according to the build Benchmark Utilized: COL14 Indicate elevation datum used for the elevations in item NGVD 1929 NAVD 1988 Other/S Datum used for building elevations must be the same a) Top of bottom floor (including basement, crawlspub) Top of the next higher floor c) Bottom of the lowest horizontal structural member d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment sem (Describe type of equipment and location in Comf) Lowest adjacent (finished) grade next to building g) Highest adjacent (finished) grade next to building	on Drawings* But construction of the built VE, V1–V30, V (with ding diagram specified Vertical Datum tems a) through h) belonged as that used for the pace, or enclosure floor (V Zones only) wicing the building intents) (LAG)	uilding Under Construding is complete. BFE), AR, AR/A, AR/A in Item A7. In Puertin: N.A.V.D. 1988 ow.	uction*
 h) Lowest adjacent grade at lowest elevation of dec structural support 	k or stairs, including		N/A X feet meters
SECTION D - SURVEYOR,	ENGINEER, OR AR	CHITECT CERTIFIC	CATION
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? Yes X No Check here if attachments.			
Certifier's Name	License Number		
Kenneth Sarrio Title Professional Surveyor and Mapper Company Name Benchmark Land Services, Inc.	6348		No. 6348
Address 1807 J&C Blvd.			STATE OF S
City Naples	State Florida	ZIP Code 34109	2/Sgrve)
Signature Kenneth Sarrio Digitally signed by Kenneth Sarrio Date: 2020.12.03 15:58:38-05'00'	Date 11-27-2020	Telephone (239) 591-0778	Ext.
Copy all pages of this Elevation Certificate and all attachmen	nts for (1) community o	fficial, (2) insurance a	gent/company, and (3) building owner.
Comments (including type of equipment and location, per Item in C2.e) is A/C equipment. Items in A9.b) are "Smart of space each for a total of 1000 sq. in. of venting space &	Vents" brand name ve	ents that have been peparate walls.	predetermined to allow for 200 sq. in.

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City State Marco Island Florida	ZIP Code 34145	Company NAIC Number
SECTION E – BUILDING ELEVATION FOR ZONE AO ANI	I INFORMATION (SURVEY NOT D ZONE A (WITHOUT BFE)	REQUIRED)
For Zones AO and A (without BFE), complete Items E1–E5. If the complete Sections A, B,and C. For Items E1–E4, use natural gradenter meters.	e Certificate is intended to support de, if available. Check the measure	a LOMA or LOMR-F request, ement used. In Puerto Rico only,
E1. Provide elevation information for the following and check the the highest adjacent grade (HAG) and the lowest grade	appropriate boxes to show whether ade (LAG).	er the elevation is above or below
a) Top of bottom floor (including basement, crawlspace, or enclosure) is b) Top of bottom floor (including basement,	feet mete	ers above or below the HAG.
crawlspace, or enclosure) is	feet	
E2. For Building Diagrams 6–9 with permanent flood openings pr the next higher floor (elevation C2.b in the diagrams) of the building is	rovided in Section A Items 8 and/or	
E3. Attached garage (top of slab) is		
E4. Top of platform of machinery and/or equipment servicing the building is	feet mete	rs above or below the HAG.
E5. Zone AO only: If no flood depth number is available, is the to floodplain management ordinance? Yes No	p of the bottom floor elevated in ac	_
SECTION F - PROPERTY OWNER (OR C	OWNER'S REPRESENTATIVE) C	ERTIFICATION
The property owner or owner's authorized representative who concommunity-issued BFE) or Zone AO must sign here. The stateme	noletes Sections A. B. and F for 7	one A (without a FEMA issued or
Property Owner or Owner's Authorized Representative's Name		
Address	City St	rate ZIP Code
Signature	Date Te	elephone
Comments		
		☐ Check here if attachments.

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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
Building Street Address (including Ap 609 Somerset Court	t., Unit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:	
City Marco Island	State Florida	ZIP Code 34145	Company NAIC Number	
	SECTION G - COMMUNITY IN	FORMATION (OPTIONAL)		
The local official who is authorized by Sections A, B, C (or E), and G of this used in Items G8–G10. In Puerto Ric	Elevation Certificate. Complete th	e community's floodplain mar le applicable item(s) and sign	nagement ordinance can complete below. Check the measurement	
G1. The information in Section 6 engineer, or architect who is data in the Comments area	C was taken from other documents s authorized by law to certify eleva below.)	ation that has been signed ar ation information. (Indicate the	nd sealed by a licensed surveyor, e source and date of the elevation	
G2. A community official comple or Zone AO.	eted Section E for a building locate	ed in Zone A (without a FEMA	A-issued or community-issued BFE)	
G3. The following information (If	tems G4–G10) is provided for com	nmunity floodplain manageme	ent purposes.	
G4. Permit Number	G5. Date Permit Issue	- O. D	ate Certificate of ompliance/Occupancy Issued	
G7. This permit has been issued for:	New Construction	Substantial Improvement		
G8. Elevation of as-built lowest floor (including basement) of the building:				
G9. BFE or (in Zone AO) depth of flo	G9. BFE or (in Zone AO) depth of flooding at the building site: feet meters			
G10. Community's design flood elevat	ion:	feet	meters Datum	
Local Official's Name		Title Floodplain Cod	ordinator	
Community Name		Telephone		
City of Marco				
Signature	1	Date		
Comments (including type of equipment)	REVIEWED By Kelli DeFedericis at 9			
			Check here if attachments.	

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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City Marco Island	State Florida	ZIP Code 34145	Company NAIC Number

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:11/27/2020

Clear Photo One



Photo Two

Photo Two Caption REAR VIEW:11/27/2020

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Ap 609 Somerset Court	ot., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
City Marco Island	State Florida	ZIP Code 34145	Company NAIC Number

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 SIDE VIEW:11/27/2020

Clear Photo Three



Photo Fou

Photo Four Caption SIDE VIEW:11/27/2020

Clear Photo Four