### 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 INSUR	ANCE COMPANY USE
A1. Building Owner's Name  MCD CAPITAL LLC  Policy Number:						per:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  556 5TH AVE						AIC Number:	
City MARCO ISLANI	D			State Florida		ZIP Code 34145	
		nd Block Numbers, Ta ANDS, RECORDED				,	ГҮ
A4. Building Use (e.	.g., Residen	tial, Non-Residential,	Addition,	, Accessory,	etc.) RESIDEN	TIAL	
A5. Latitude/Longitu	ıde: Lat. <u>2</u>	5°56'30.93"N	Long. 8	1°41'.59.79"W	/ Horizontal	Datum: NAD 1	927 × NAD 1983
A6. Attach at least 2	2 photograp	hs of the building if the	e Certific	ate is being u	sed to obtain flood	d insurance.	
A7. Building Diagrar	m Number	1A					
A8. For a building w	ith a crawls	pace or enclosure(s):					
a) Square foota	age of crawl	space or enclosure(s)			N/A sq ft		
b) Number of pe	ermanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ide N/A
c) Total net area	a of flood op	penings in A8.b		N/A sq in	l		
d) Engineered f	flood openin	gs? Yes 🗵 N	No				
A9. For a building wi	th an attach	ed garage:					
a) Square footage of attached garageN/A sq ft							
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0							
c) Total net area of flood openings in A9.b N/A sq in							
d) Engineered flood openings?							
, -	a, anglioched licea spermige.						
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
	B1. NFIP Community Name & Community Number B2. County Name B3. State CITY OF MARCO ISLAND 120426 COLLIER Florida						B3. State Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	e Base Flood Depth)
12021C0828	Н	05-16-2012	05-16-2	vised Date 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)? 🗌 Yes 🗵 No							
Designation Date: CBRS DPA							
				_ <del>_</del>			

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			Expiration Bato. November 66, 2022
IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and 556 5TH AVE	d/or Bldg. No.) or P.O. Rou	ite and Box No.	Policy Number:
,	State ZIP Florida 3414	Code 45	Company NAIC Number
SECTION C - BUILDING	ELEVATION INFORMAT	TION (SURVEY R	EQUIRED)
*A new Elevation Certificate will be required whe	n construction of the buildi		
C2. Elevations – Zones A1–A30, AE, AH, A (with BF Complete Items C2.a–h below according to the b Benchmark Utilized: COL 11		in Ítem A7. In Puert	
Indicate elevation datum used for the elevations	in items a) through h) belo	W.	
☐ NGVD 1929 ☒ NAVD 1988 ☐ Oth Datum used for building elevations must be the s	er/Source:		
Datum used for building elevations must be the s	dille as that used for the L	л ட.	Check the measurement used.
a) Top of bottom floor (including basement, crav	vlspace, or enclosure floor	)	7.1 × feet meters
b) Top of the next higher floor			N/A  feet  meters
c) Bottom of the lowest horizontal structural mer	nhar (\/ Zanas anly)		N/A  feet  meters
·	liber (v Zones only)	-	N/A × feet meters
<ul> <li>d) Attached garage (top of slab)</li> <li>e) Lowest elevation of machinery or equipment (Describe type of equipment and location in C</li> </ul>	servicing the building		10.5 ⋉ feet
f) Lowest adjacent (finished) grade next to build	,		6.5 $\overline{\times}$ feet $\overline{}$ meters
, , , , , ,	,		
g) Highest adjacent (finished) grade next to build	ding (HAG)		6.7 X feet meters
h) Lowest adjacent grade at lowest elevation of structural support	deck or stairs, including		N/A feet meters
SECTION D - SURVEYO	OR, ENGINEER, OR ARC	CHITECT CERTIF	ICATION
This certification is to be signed and sealed by a land I certify that the information on this Certificate representatement may be punishable by fine or imprisonment	ents my best efforts to inte	rpret the data availa	law to certify elevation information. able. I understand that any false
Were latitude and longitude in Section A provided by	a licensed land surveyor?	⊠Yes □ No	Check here if attachments.
Certifier's Name MIGUEL J. GARAY	License Number 6594		Manufactura (1974)
Title PROFESSIONAL SURVEYOR AND MAPPER			TICHE GARY
Company Name PRISMA LAND SURVEYORS, LLC			No. LS 6594
Address 1325 SE 47TH STREET, SUITE A			No. LS 6594  No. LS 6594  STATE OF  STATE OF  SUPPRYSHIPMENT  SUPPRYSHIPMENT
City CAPE CORAL	State Florida	ZIP Code 33904	Maria Surveya
Signature Miguel Signature Miguel Signature Miguel Garay DN: c-mkignal Loary, on-prisma Land Surveyors, LLC, on-prisma LLC, on-pr	Date 02-02-2021	Telephone (239) 440-7828	Ext.
Copy all pages of this Elevation Certificate and all attach	nments for (1) community of	ficial, (2) insurance	agent/company, and (3) building owner.
Comments (including type of equipment and location, C2e WINDOW AC EQUIPMENT Crown of Road: 5.65' NAVD88	per C2(e), if applicable)		

## **ELEVATION CERTIFICATE**

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IMPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSURA	NCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 556 5TH AVE					r:	
City MA	/ RCO ISLAND	State Florida	ZIP Code 34145	Company NA	C Number	
	SECTION E – BUILDING FOR Z		ORMATION (SURVEY IN EA (WITHOUT BFE)	NOT REQUIRED)		
con	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 the highest adjacent grade (HAG) and the low a) Top of bottom floor (including basement,		LAG).	_	_	
	crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is				or below the HAG.  or below the LAG.	
E2.	For Building Diagrams 6–9 with permanent flo the next higher floor (elevation C2.b in the diagrams) of the building is	ood openings provide	d in Section A Items 8 an	nd/or 9 (see pages 1		
E3.	Attached garage (top of slab) is		feet _ r	meters 🔲 above o	or Delow the HAG.	
E4.	Top of platform of machinery and/or equipment servicing the building is	nt	feet r	meters 🔲 above o	or Delow the HAG.	
E5.	Zone AO only: If no flood depth number is available floodplain management ordinance? Yes		ne bottom floor elevated own. The local official n			
	SECTION F - PROPERTY	OWNER (OR OWNE	R'S REPRESENTATIV	E) CERTIFICATION		
The	e property owner or owner's authorized represe nmunity-issued BFE) or Zone AO must sign her	ntative who complete e. The statements in	es Sections A, B, and E f Sections A, B, and E are	or Zone A (without a e correct to the best	FEMA-issued or of my knowledge.	
Pro	perty Owner or Owner's Authorized Representa	ative's Name				
Add	dress		City	State	ZIP Code	
Sig	nature		Date	Telephone		
Cor	mments					
				Check	there if attachments.	

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MPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Su 556 5TH AVE						
City MARCO ISLAND	State Florida	ZIP Code 34145	Company NAIC Number			
SECTIO	N G – COMMUNIT	TY INFORMATION (OPTIO	NAL)			
Sections A, B, C (or E), and G of this Elevation	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.					
			gned and sealed by a licensed surveyor, cate the source and date of the elevation			
G2. A community official completed Section or Zone AO.	on E for a building	located in Zone A (without	a FEMA-issued or community-issued BFE)			
G3. The following information (Items G4–	G10) is provided fo	or community floodplain ma	nagement purposes.			
G4. Permit Number	G5. Date Permit	Issued	G6. Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for:	] New Constructior	n   Substantial Improvem	ent			
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	Local Official's Name Title					
Community Name		Telephone				
Signature		Date				
Comments (including type of equipment and location, per C2(e), if applicable)						
			Check here if attachments.			

#### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

See Instructions for Item A6.

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Building Street Address (including A 556 5TH AVE	o. Policy Number:		
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 02/02/2021

Clear Photo One



Photo Two

Photo Two Caption 02/02/2021

Clear Photo Two

#### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

**Continuation Page** 

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IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt 556 5TH AVE	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 02/02/2021

Clear Photo Three



Photo Four

Photo Four Caption 02/02/2021

Clear Photo Four