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

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

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.

SECT	ION A - PROPERTY IN	FORMATION	FC	R INSURANCE COMPANY USE
A1. Building Owner's Name 193 South Heathwood Drive, LL	C		Po	licy Number:
A2. Building Street Address (inc Box No. 193 South Heathwood Drive	luding Apt., Unit, Suite, a	and/or Bldg. No.) or P.O.	Route and Co	mpany NAIC Number:
City		State	ZIF	^o Code
Marco Island		Florida	34	145
A3. Property Description (Lot ar Lot 7, Block 269, MARCO BEA			scription, etc.)	
A4. Building Use (e.g., Resident	ial, Non-Residential, Add	dition, Accessory, etc.)	Residential	
A5. Latitude/Longitude: Lat. N2	25°56'00.5" Lo	ng. W81°42'52.6"	Horizontal Datum: [☐ NAD 1927 × NAD 1983
A6. Attach at least 2 photograph	ns of the building if the Co	ertificate is being used to	o obtain flood insurance	9.
A7. Building Diagram Number	1B			
A8. For a building with a crawlsr	pace or enclosure(s):			
a) Square footage of crawls		N/A sq ft		
b) Number of permanent flo	od openings in the crawl	Ispace or enclosure(s) w	ithin 1.0 foot above ad	jacent grade N/A
c) Total net area of flood op		sq in		
d) Engineered flood opening				
d) Engineered nood opening	gs: L Yes A No			
A9. For a building with an attach	ed garage:			
a) Square footage of attach	ed garage440	sq ft		
b) Number of permanent flo	od openings in the attac	hed garage within 1.0 foo	ot above adjacent grad	le3
c) Total net area of flood op	enings in A9.b 365	sq in		
d) Engineered flood opening	gs? ⊠ Yes □ No			
d) Engineered need eperim.	,			
SE	CTION B - FLOOD INS	URANCE RATE MAP	(FIRM) INFORMATIO	N
B1. NFIP Community Name & Co	ommunity Number 0426	B2. County Name Collier		B3. State Florida
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	B7. FIRM Panel Effective/	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)
12021C 0837 H	05/16/2012	Revised Date 05/16/2012	AE	8.0'
B10. Indicate the source of the B				
☐ FIS Profile ☒ FIRM [Community Determine	ed U Other/Source: _		
B11. Indicate elevation datum us	sed for BFE in Item B9:	☐ NGVD 1929 ☐ NA	VD 1988 Other	Source:
B12. Is the building located in a		es System (CBRS) area	or Otherwise Protecte	d Area (OPA)? ☐ Yes ⊠ No
			or Otherwise Protecte	d Area (OPA)? ☐ Yes ☒ No
B12. Is the building located in a	Coastal Barrier Resourc		or Otherwise Protecte	d Area (OPA)? ☐ Yes ⊠ No

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

IMPORTANT: In these spaces, copy the correspond	ding information fro	om Section A.	FOR INSURANCE COMPANY US
Building Street Address (including Apt., Unit, Suite, an 193 South Heathwood Drive	d/or Bldg. No.) or P.	O. Route and Box No.	Policy Number:
Marca Island	State Florida	ZIP Code 34145	Company NAIC Number
SECTION C - BUILDING	ELEVATION INFO	RMATION (SURVEY RI	EQUIRED)
	uction Drawings* [In construction of the E), VE, V1–V30, V (in puilding diagram spe Vertical D in items a) through her/Source: ame as that used for in/Ispace, or enclosure inber (V Zones only)	Building Under Construence building is complete. With BFE), AR, AR/A, AR/Ciffied in Item A7. In Puerto Patum: N.A.V.D. 1988 Display below. The BFE. The floor) 9. 4 N/A. N/A. N/A. 6. 5	AE, AR/A1–A30, AR/AH, AR/AO. o Rico only, enter meters. Check the measurement used.
f) Lowest adjacent (finished) grade next to build g) Highest adjacent (finished) grade next to build h) Lowest adjacent grade at lowest elevation of distructural support SECTION D – SURVEYO	ing (LAG) ing (HAG) leck or stairs, includi	ARCHITECT CERTIFIC	
This certification is to be signed and sealed by a land so a certify that the information on this Certificate representatement may be punishable by fine or imprisonment. Were latitude and longitude in Section A provided by a	under 18 U.S. Code,	Section 1001.	aw to certify elevation information. le. I understand that any false Check here if attachments.
Certifier's Name Kenneth Sarrio Title Professional Surveyor and Mapper Company Name Benchmark Land Services, Inc. Address 1807 J&C Blvd. City Naples Signature	License Number 6348 State Florida Date	ZIP Code 34109 Telephone	Mace 120 Seal Page 120 Seal Pa
Copy all pages of this Elevation Certificate and all attachm Comments (including type of equipment and location, peter in C2.e) is A/C equipment. The road elevation is 4.3 Smart Vent" brand vents rated at 200 sq. inches of flow wo separate walls.	er C2(e), if applicable	(239) 591-0778 y official, (2) insurance age	

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in ottration in the operator, copy in our or operator,				FOR INSURANCE COMPANY	USE
	ding Street Address (including Apt., Unit, Suite, and South Heathwood Drive	d/or Bldg. No.) or P.O.	Route and Box No.	Policy Number:	
City		State Florida	ZIP Code 34145	Company NAIC Number	
	SECTION E – BUILDING EL FOR ZONE	EVATION INFORMA E AO AND ZONE A	TION (SURVEY NO (WITHOUT BFE)	OT REQUIRED)	
com	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.	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).				
	Top of bottom floor (including basement, crawlspace, or enclosure) is		feet _ me	eters above or below the H	AG.
	 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet me	eters above or below the L	AG.
E2.	For Building Diagrams 6–9 with permanent flood of the next higher floor (elevation C2.b in	penings provided in S	ection A Items 8 and	I/or 9 (see pages 1–2 of Instructions)),
	the diagrams) of the building is		feet me	eters above or below the H	AG.
E3.	Attached garage (top of slab) is		feet _ me	eters above or below the H	AG.
E4.	Top of platform of machinery and/or equipment servicing the building is		feet _ me	eters above or below the H	AG.
E5.	E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.				
	SECTION F - PROPERTY OWN	NER (OR OWNER'S F	REPRESENTATIVE)	CERTIFICATION	
The	property owner or owner's authorized representativ munity-issued BFE) or Zone AO must sign here. The	ve who completes Sec ne statements in Secti	tions A, B, and E for ons A, B, and E are	Zone A (without a FEMA-issued or correct to the best of my knowledge.	
Prop	perty Owner or Owner's Authorized Representative	s Name			
Add	ress	City		State ZIP Code	
Sign	nature	Date		Telephone	
Con	nments			5	
				Check here if attachmen	ts.

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.	FOR INSURANCE COMPANY USI
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 193 South Heathwood Drive	Policy Number:
City	
Marco Island State ZIP Code Florida 34145	Company NAIC Number
SECTION G – COMMUNITY INFORMATION (OPTIONAL)	
The local official who is authorized by law or ordinance to administer the community's floodplain mana Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign to used in Items G8–G10. In Puerto Rico only, enter meters.	agement ordinance can complete below. Check the measurement
G1. The information in Section C was taken from other documentation that has been signed and engineer, or architect who is authorized by law to certify elevation information. (Indicate the data in the Comments area below.)	d sealed by a licensed surveyor, source and date of the elevation
G2. A community official completed Section E for a building located in Zone A (without a FEMA-or Zone AO.	issued or community-issued BFE)
G3. The following information (Items G4–G10) is provided for community floodplain management	nt purposes.
G4. Permit Number G5. Date Permit Issued G6. Da Col	te Certificate of mpliance/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:	metersDatum
G9. BFE or (in Zone AO) depth of flooding at the building site:	meters Datum
G10. Community's design flood elevation: feet Local Official's Name	meters Datum
Title	
Community Name Telephone	-
Signature Date	
Comments (including type of equipment and location, per C2(e), if applicable)	
	,
	Check here if attachments.

BUILDING PHOTOGRAPHS

OMB No. 1660-0008 Expiration Date: November 30, 2018 See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
Building Street Address (including Ap 193 South Heathwood Drive	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 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: 04/04/2018

ELEVATION CERTIFICATE

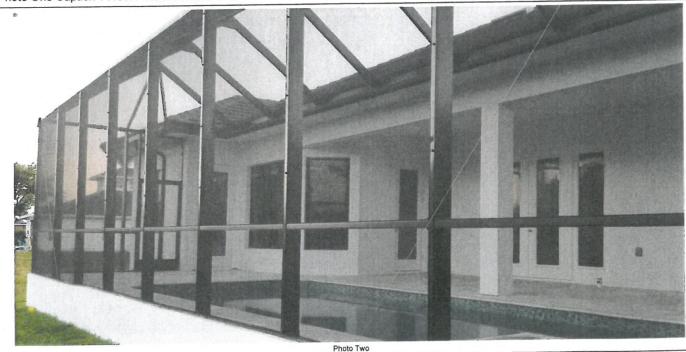


Photo Two Caption REAR VIEW: 04/04/2018

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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

		Expiration Date: November 30, 2018
esponding informati uite, and/or Bldg. No.)	or P.O. Route and Box No.	FOR INSURANCE COMPANY USE Policy Number:
State Florida	ZIP Code 34145	Company NAIC Number
	esponding informati uite, and/or Bldg. No.) State	Florida 21F Code

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.

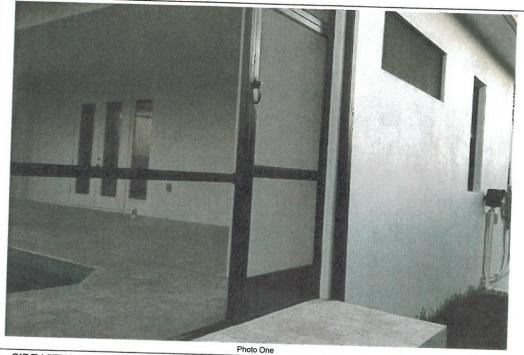


Photo One Caption SIDE VIEW: 04/04/2018

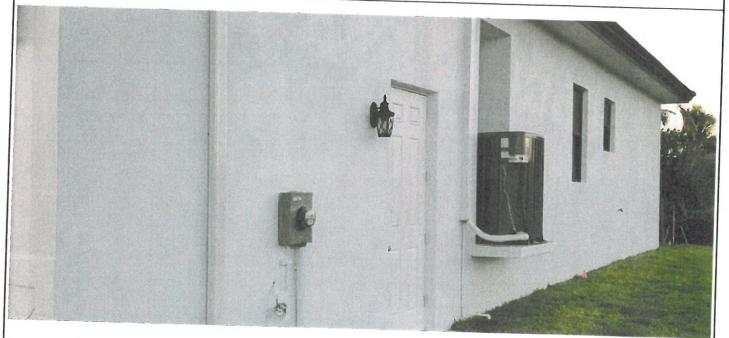


Photo Two