# **ELEVATION CERTIFICATE**

**Important:** Follow the instructions on pages 1–9.

C				Cartificate and		5 11		, official	( <b>0</b> ) in a second of	a a a a t / a a ma a a a u	and (2	
Copy	y all pages (	or this	Elevation	Certificate and	all attachments	10r ( 1	) community	/ omcial,	(Z) Insurance	agent/company.	and (3	) building owner.

SECTION A – PROPERTY INFORMATION FOR INSURANCE COMPANY USE							
A1. Building Owner's Name MICHAEL and MELANIE MARTYN		Policy Number:					
<ul> <li>A2. Building Street Address (including Apt., Unit, Suite, and/or Box No.</li> <li>457 ADIRONDACK COURT</li> </ul>	Bldg. No.) or P.O. Route and	Company NAIC Number:					
City	State	ZIP Code					
MARCO ISLAND	Florida	34145					
<ul> <li>A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)</li> <li>LOT 8, BLOCK 195 OF MARCO BEACH UNIT SEVEN, PLAT BOOK 6, PAGES 55 THROUGH 62, COLLIER COUNTY, FLORIDA.</li> </ul>							
A4. Building Use (e.g., Residential, Non-Residential, Addition,	Accessory, etc.) RESIDE	ENTIAL					
A5. Latitude/Longitude: Lat. N 25°55'33.91" Long.	W 81°43'11.77" Horizontal Datur	m: 🗌 NAD 1927 🛛 🗙 NAD 1983					
A6. Attach at least 2 photographs of the building if the Certifica	te is being used to obtain flood insur	ance.					
A7. Building Diagram Number 1B							
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	e adjacent grade N/A					
c) Total net area of flood openings in A8.b	N/A sq in						
d) Engineered flood openings? Yes X No							
A9. For a building with an attached garage:	515.00 or #						
a) Square footage of attached garage							
b) Number of permanent flood openings in the attached ga	rage within 1.0 foot above adjacent	grade 3					
c) Total net area of flood openings in A9.b	231.00 sq in						
d) Engineered flood openings? 🛛 Yes 🗌 No							
SECTION B – FLOOD INSURA	NCE RATE MAP (FIRM) INFORM	ATION					
	B2. County Name	B3. State					
CITY OF MARCO ISLAND 120426	COLLIER	Florida					
	M Panel B8. Flood B9. I ctive/ Zone(s) (	Base Flood Elevation(s) Zone AO, use Base Flood Depth)					
12021C 0836 H 05-16-2012 05-16-20		8.0'					
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:	Designation Date:						

ELEVATION CERTIFICATE				OMB No. Expiratior		008 November 30, 2022	
IMPORTANT: In these spaces, copy the correspond	ing information	from Section A.	1	FOR INS	URANC	E COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.       Policy Number:         457 ADIRONDACK COURT       Policy Number:							
	State Florida	ZIP Code 34145	(	Compan	V NAIC N	Number	
SECTION C – BUILDING	ELEVATION IN	FORMATION (SI		QUIRED	)		
<ul> <li>C1. Building elevations are based on: □ Construction Drawings* □ Building Under Construction* × Finisher *A new Elevation Certificate will be required when construction of the building is complete.</li> <li>C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AF Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter m Benchmark Utilized: COL 12 Vertical Datum: N.A.V.D. 1988</li> <li>Indicate elevation datum used for the elevations in items a) through h) below.</li> </ul>							
Datum used for building elevations must be the s		d for the BFE.					
<ul><li>a) Top of bottom floor (including basement, crav</li><li>b) Top of the next higher floor</li></ul>				10.2	k the me ≺∫ feet ≺∫ feet	easurement used.	
c) Bottom of the lowest horizontal structural mer	nber (V Zones or	1y)		N/A	< feet	meters	
d) Attached garage (top of slab)	× ×			7.6	< feet	meters	
e) Lowest elevation of machinery or equipment (Describe type of equipment and location in C	servicing the buil Comments)	ding		<u>10.2</u>	< feet	meters	
f) Lowest adjacent (finished) grade next to build	ling (LAG)			6.7	< feet	meters	
g) Highest adjacent (finished) grade next to build	ding (HAG)			7.9	< feet	meters	
<ul> <li>h) Lowest adjacent grade at lowest elevation of structural support</li> </ul>	deck or stairs, in	cluding		<u>N/A</u>	< feet	meters	
SECTION D – SURVEY	DR, ENGINEER	, OR ARCHITEC		ATION			
This certification is to be signed and sealed by a land I certify that the information on this Certificate represen- statement may be punishable by fine or imprisonmen	ents my best effo	rts to interpret the	data availab	aw to ce le. I unde	rtify elev erstand t	ration information. that any false	
Were latitude and longitude in Section A provided by	a licensed land s	urveyor? 🛛 🗙 Yes	s 🗌 No	Cł	neck her	e if attachments.	
Certifier's Name ANTONIO TRIGO (20.0223)	License Nu PLS 2982	mber					
Title LAND SURVEYOR					ANTO ANTO	NIO TRIGO	
Company Name A. TRIGO & ASSOCIATES, INC.					No ST	ATE OF	
Address 2223 TRADE CENTER WAY					STERED STERED	LAND SURVICE	
City NAPLES	State Florida	ZIP Cc 34109	ode				
Signature Antonio Trigo, PLS No.2982 Digitally signed by Antonio T PLS No.2982 Date: 2021.06.16 10:02:04 -04	06 15 2021	Teleph (239) 5	ione 594-8448	Ext.			
Copy all pages of this Elevation Certificate and all attach	nments for (1) con	nmunity official, (2)	insurance ag	gent/com	pany, an	d (3) building owner.	
Comments (including type of equipment and location, per C2(e), if applicable) A9b. 3 SMART VENTS MODEL 1540-520, RATED AT 200 SQ. FT. EACH C2e. LOWEST EQUIPMENT IS AIRCONDITIONER AND WATER HEATER AT ELEV. 9.2' POOL EQUIPMENT IS AT ELEV. 7.0' CROWN OF ROAD OPPOSITE NORTH PROPERTY LINE = 4.10' CROWN OF ROAD OPPOSITE SOUTH PROPERTY LINE = 3.91'							

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

ELEVATION CERTIFICATE	Expiration Date: November 30, 2022				
IMPORTANT: In these spaces, copy the correspor	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, a 457 ADIRONDACK COURT	nd/or Bldg. No.) o	or P.O. Route and Box No.	Policy Number:		
City MARCO ISLAND	State Florida	ZIP Code 34145	Company NAIC Number		
SECTION E – BUILDING E FOR ZO	LEVATION INF NE AO AND ZO	ORMATION (SURVEY N NE A (WITHOUT BFE)	OT REQUIRED)		
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.					
<ul><li>E1. Provide elevation information for the following ar the highest adjacent grade (HAG) and the lowes</li><li>a) Top of bottom floor (including basement,</li></ul>			ther the elevation is above or below		
crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is		feet m			
E2. For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in	l openings provid				
the diagrams) of the building is			eters above or below the HAG.		
E3. Attached garage (top of slab) is E4. Top of platform of machinery and/or equipment		feet [_] m	eters above or below the HAG.		
servicing the building is			eters above or below the HAG.		
E5. Zone AO only: If no flood depth number is availa floodplain management ordinance?  Yes			accordance with the community's ust certify this information in Section G.		
SECTION F – PROPERTY O	WNER (OR OWN	IER'S REPRESENTATIVE	CERTIFICATION		
The property owner or owner's authorized representa community-issued BFE) or Zone AO must sign here.	ative who complet The statements i	tes Sections A, B, and E fo n Sections A, B, and E are	r Zone A (without a FEMA-issued or correct to the best of my knowledge.		
Property Owner or Owner's Authorized Representativ	ve'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 457 ADIRONDACK COURT	No. Policy Number:					
City MARCO ISLAND	State Florida	ZIP Code 34145	Company NAIC Number			
SECTION	SECTION G – COMMUNITY INFORMATION (OPTIONAL)					
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, icate the source and date of the elevation			
G2. A community official completed Sector 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			
Local Official's Name		Title Floodplain coo	ordinator			
Community Name City of Marco island		Telephone				
Signature		Date				
Comments (including type of equipment and lo	cation, per C2(e), if ap	plicable)				
	<b>VIEWED</b> Kelli DeFedericis	at 2:58 pm, Jun 25	5. 2021			
			·)			
			Check here if attachments.			

### **ELEVATION CERTIFICATE**

## **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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

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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.



LEFT SIDE VIEW Photo Two Caption

06/15/2021

Photo Two

### **ELEVATION CERTIFICATE**

# **BUILDING PHOTOGRAPHS**

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

ELEVATION CERTIFICATE	Continua	tion Page	Expiration Date: November 30, 2022		
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Building Street Address (including Apt., Unit, S 457 ADIRONDACK 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** 06/15/2021 Photo Three Caption

**Clear Photo Three** 



06/15/2021 **RIGHT SIDE VIEW** Photo Four Caption

Clear Photo Four

Replaces all previous editions.