ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

-													
Con	aanen lle v	of this	Flevation	Cortificato ar	d all at	tachmonte t	for (1) community	/ official	(2) incurance	agent/company	and (3) building owner.
υup					ս նո նւ				/ Unicial,		agentioumpany		/ Dunung Owner.

	SECTION A - PROPERTY		MATION	,, (_) ····		ANCE COMPANY USE			
A1. Building Owner's Nam ROBERT JERRY NEL	e				Policy Num				
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1630 NORTH COPELAND DRIVE									
City State ZIP Code MARCO ISLAND Florida 34145									
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 21, BLOCK 419 OF MARCO BEACH UNIT THIRTEEN, PLAT BOOK 6, PAGES 92 THROUGH 99, COLLIER COUNTY, FLORIDA.									
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) ACCESSORY									
A5. Latitude/Longitude: L	at. N 25°55'01.41"	Long.	W 81°42'21.4	8" Horizontal	Datum: 🗌 NAD 1	927 🛛 NAD 1983			
A6. Attach at least 2 photo	graphs of the building if th	e Certific	ate is being u	sed to obtain flood	insurance.				
A7. Building Diagram Num	ber <u>1B</u>								
A8. For a building with a ci	rawlspace or enclosure(s):								
a) Square footage of o	crawlspace or enclosure(s)			N/A sq ft					
b) Number of permane	ent flood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ide N/A			
c) Total net area of flo	od openings in A8.b		N/A sq in						
d) Engineered flood o	penings? 🗌 Yes 🖂 I	No							
A9. For a building with an a	ttached garage:								
a) Square footage of a	ttached garage		N/A sq ft						
b) Number of permane	ent flood openings in the at	tached g	arage within	1.0 foot above adja	cent grade N/A				
c) Total net area of flo	od openings in A9.b		N/A sq	in					
d) Engineered flood op	penings? 🗌 Yes 🖂 I	٩o							
	SECTION B – FLOOD	INSURA	1	. ,	ORMATION	i			
B1. NFIP Community Nam CITY OF MARCC	•		B2. County	Name COLLIER		B3. State Florida			
B4. Map/Panel B5. Su Number	iffix B6. FIRM Index Date	Effe	RM Panel ective/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)			
12021C 0837 H	12021C 0837 H 05-16-2012 Revised Date 05-16-2012 AE 9.0' (N.A.V.D. 1988)								
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:									
_									

ELEVATION CERTIFICATE	OMB No. 1660-0008 Expiration Date: November 30, 2022 FOR INSURANCE COMPANY USE					
IMPORTANT: In these spaces, copy the correspo						
Building Street Address (including Apt., Unit, Suite, a 1630 NORTH COPELAND DRIVE	and/or Bldg. No.) o	or P.O. Rout	e and Box No.	Policy	Number:	
City MARCO ISLAND	ZIP C 3414		Compa	Company NAIC Number		
SECTION C – BUILDIN	G ELEVATION I	NFORMAT	ON (SURVEY R	EQUIRE	ED)	
 C1. Building elevations are based on: □ Cons *A new Elevation Certificate will be required will C2. Elevations – Zones A1–A30, AE, AH, A (with B Complete Items C2.a–h below according to the Benchmark Utilized: <u>COL 16</u> Indicate elevation datum used for the elevation □ NGVD 1929 ⊠ NAVD 1988 □ C Datum used for building elevations must be the a) Top of bottom floor (including basement, cr 	BFE), VE, V1–V30 e building diagram Verti ns in items a) throu other/Source: e same as that us	of the buildin), V (with BF n specified ir ical Datum: ugh h) below ed for the Bf	E), AR, AR/A, AR I Item A7. In Puer N.A.V.D	R/AE, AR. to Rico c 0. 1988	/A1–A30, / only, enter	
b) Top of the next higher floor	1	,		N/A	× feet	meters
c) Bottom of the lowest horizontal structural m	ember (V Zones (only)		N/A	× feet	meters
d) Attached garage (top of slab)		only)		N/A	⊥ ⊠ feet	meters
 e) Lowest elevation of machinery or equipmen (Describe type of equipment and location in 	nt servicing the bu Comments)	uilding		N/A	⊠ feet	meters
f) Lowest adjacent (finished) grade next to bu	uilding (LAG)			5.7	imes feet	meters
g) Highest adjacent (finished) grade next to b	uilding (HAG)			7.0	\times feet	meters
 h) Lowest adjacent grade at lowest elevation structural support 	of deck or stairs, i	ncluding		N/A	imes feet	meters
SECTION D – SURVE	YOR, ENGINEE	R, OR ARC		ICATIO	N	
This certification is to be signed and sealed by a la I certify that the information on this Certificate repre- statement may be punishable by fine or imprisonm Were latitude and longitude in Section A provided b	esents my best eff ent under 18 U.S.	forts to interp Code, Secti	oret the data avail	able. I ur	nderstand	that any false
Certifier's Name DAVID C. HOLMAN (00.0118)	License N PSM 6279				11111111111111111111111111111111111111	C. HOI
Title LAND SURVEYOR				11111	OP ** CERT	e if attachments.
Company Name A. TRIGO & ASSOCIATES, INC.				11111	∳ No ∿ STA	ATE OF
Address 2223 TRADE CENTER WAY				(00)	ST/ S*****^/ S******	ORIDA *** 02
City NAPLES	State Florida		ZIP Code 34109		1111,00 St	urveyor
Signature wid	Date 09-03-202	20	Telephone (239) 594-8448	Ext.		
Copy all pages of this Elevation Certificate and all atta	achments for (1) co	ommunity off	icial, (2) insurance	agent/co	ompany, an	nd (3) building owner.
Comments (including type of equipment and location A4 ACCESSORY USE IS 705 SQ. FT. DETA AT 200 SQ. FT. EACH C2a. FLOOR OF DETACHED GARAGE AT 6.7	CHED GARAGE	• /	ART VENTS MOD	DEL 1540	-520, RAT	ED

OMB No.	1660-0	0008		
Expiration	Date:	November	30,	2022

ELEVATION CERTIFICATE			Expiration Date: November 30, 2022					
IMPORTANT: In these spaces, copy the correspo	onding information	on from Section A.	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, 1630 NORTH COPELAND DRIVE	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 E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)								
For Zones AO and A (without BFE), complete Items complete Sections A, B,and C. For Items E1–E4, us enter meters.	s E1–E5. If the Ce se natural grade, i	rtificate is intended to support f available. Check the measu	t a LOMA or LOMR-F request, rement used. In Puerto Rico only,					
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).a) Top of bottom floor (including basement,								
crawlspace, or enclosure) is		feet 🗌 met	ers above or below the HAG.					
b) Top of bottom floor (including basement, crawlspace, or enclosure) is		feet met	ers above or below the LAG.					
E2. For Building Diagrams 6–9 with permanent floo the next higher floor (elevation C2.b in	od openings provid	led in Section A Items 8 and/	or 9 (see pages 1–2 of Instructions),					
the diagrams) of the building is		feet met	ters above or below the HAG.					
E3. Attached garage (top of slab) is		feet met	ters above or below the HAG.					
E4. Top of platform of machinery and/or equipmen servicing the building is	t	feet 🗌 met	ters above or below the HAG.					
E5. Zone AO only: If no flood depth number is avail floodplain management ordinance? Yes			accordance with the community's st certify this information in Section G.					
SECTION F – PROPERTY (OWNER (OR OWI	NER'S REPRESENTATIVE)	CERTIFICATION					
The property owner or owner's authorized represen community-issued BFE) or Zone AO must sign here	tative who comple e. The statements	tes Sections A, B, and E for 2 in Sections A, B, and E are c	Zone A (without a FEMA-issued or my knowledge.					
Property Owner or Owner's Authorized Representa	tive's Name							
Address		City	State ZIP Code					
Signature		Date	Telephone					
Comments								
			Check here if attachments.					

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE								
Building Street Address (including Apt., Unit, St	No.	Policy Number:						
1630 NORTH COPELAND DRIVE								
City MARCO ISLAND	State Florida	ZIP Code 34145		Company NAIC Number				
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.							
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)								
G2. A community official completed Secti or Zone AO.	on E for a building lo	ocated in Zone A (without a	a FEMA	A-issued or community-issued BFE)				
G3. The following information (Items G4–	G10) is provided for	community floodplain mar	nageme	ent purposes.				
G4. Permit Number	G5. Date Permit Is	ssued		Date Certificate of Compliance/Occupancy Issued				
G7. This permit has been issued for:] New Construction	Substantial Improveme	ent					
G8. Elevation of as-built lowest floor (including of the building:	g basement)	[feet	meters Datum				
G9. BFE or (in Zone AO) depth of flooding at t	the building site:	[feet	meters Datum				
G10. Community's design flood elevation:		[feet	meters Datum				
Local Official's Name		Title Floodpl	ain	Coordinator				
Community Name City of Marco I	Island	Telephone						
Signature		Date						
Comments (including type of equipment and loc	cation, per C2(e), if a	ipplicable)						
	Revi	ewed						
	KDeFedericis 09/14/2020 12:10:02 PM							
				Check here if attachments.				

ELEVATION CERTIFICATE

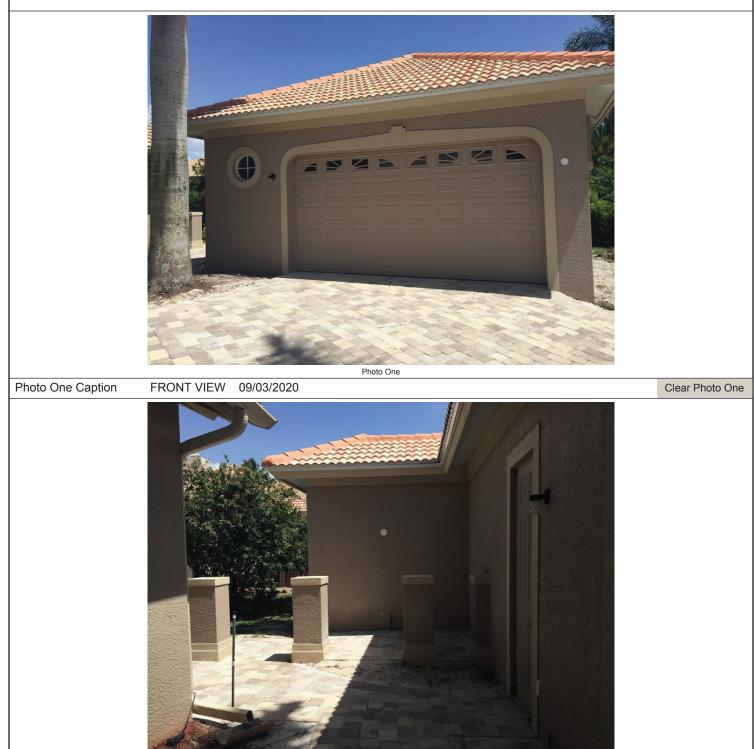
BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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

IMPORTANT: In these spaces, copy the o	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Un 1630 NORTH COPELAND DRIVE	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.



09/03/2020 LEFT SIDE VIEW Photo Two Caption

Clear Photo Two

Photo Two

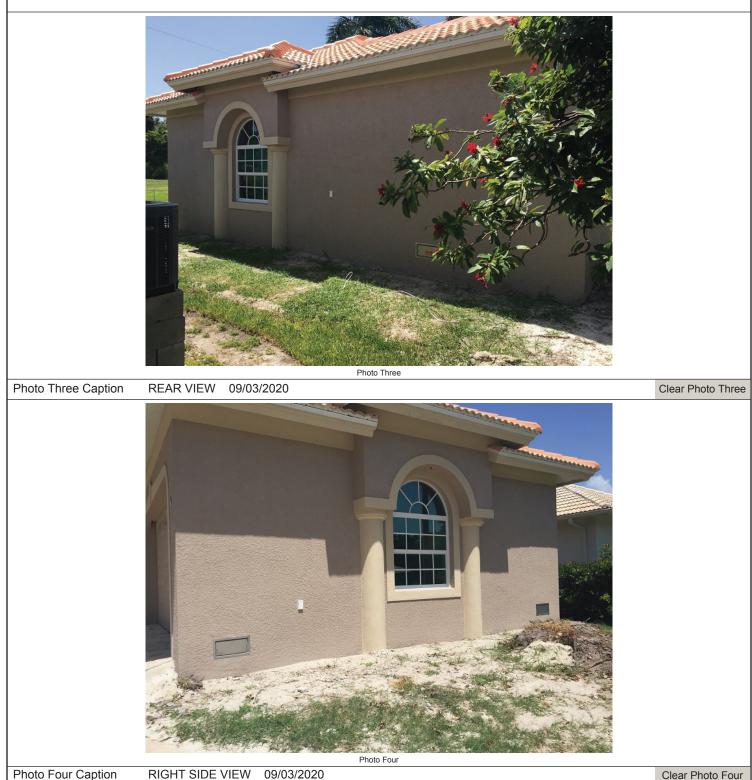
ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

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

ELEVATION CERTIFICATE	Continua	tion Page	Expiration Date: November 30, 2022		
IMPORTANT: In these spaces, copy the cor	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, S 1630 NORTH COPELAND 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.



RIGHT SIDE VIEW Photo Four Caption FEMA Form 086-0-33 (12/19)

Replaces all previous editions.