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.

					FOR INSUF	RANCE COMPANY USE
A1. Building Owner's Name				Policy Num	ber:	
	Robert J. Whitman & Izabella B. Whitman					
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.					Company N	AIC Number:
1825 Dogwood Drive - Garage						
City Marco Island			State Florida		ZIP Code 34145	
A3. Property Description (Lot	and Block Numbers Ta	x Parce		nal Description, etc.		
Lot 6, Block 145, Marco Bead			`		·	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Accessory						
A5. Latitude/Longitude: Lat.	N25°55'50.9"	Long. W	/81°41'53.5"	Horizontal	Datum: NAD 1	927 X NAD 1983
A6. Attach at least 2 photogra	phs of the building if the	e Certific	ate is being u	ised to obtain flood	d insurance.	
A7. Building Diagram Number	1B					
A8. For a building with a craw	space or enclosure(s):					
a) Square footage of crav	vlspace or enclosure(s)			N/A sq ft		
b) Number of permanent to	flood openings in the cra	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	nde N/A
c) Total net area of flood	openings in A8.b		N/A sq in			
d) Engineered flood open	d) Engineered flood openings?					
A9. For a building with an attac	A9. For a building with an attached 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 N/A						
c) Total net area of flood openings in A9.bN/A sq in						
d) Engineered flood openings?						
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name &	•		B2. County			B3. State
City of Marco Island	120426		Collier			Florida
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	levation(s) e Base Flood Depth)
12021C0837 H	05-16-2012	05-16-2		X		
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 X No						
Designation Date: CBRS OPA						
	⊔					

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or 1825 Dogwood Drive - Garage	Policy Number:		
City State Marco Island Flori		Code 15	Company NAIC Number
SECTION C – BUILDING ELE	EVATION INFORMAT	ION (SURVEY RE	EQUIRED)
 C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when co C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), Complete Items C2.a–h below according to the build Benchmark Utilized: AC 3389 	nstruction of the building. /E, V1–V30, V (with Bi	FE), AR, AR/A, AR/ n Item A7. In Puerto	AE, AR/A1–A30, AR/AH, AR/AO.
Indicate elevation datum used for the elevations in ite ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/S		V.	
a) Top of bottom floor (including basement, crawlspand) b) 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 serv (Describe type of equipment and location in Common f) Lowest adjacent (finished) grade next to building g) Highest adjacent (finished) grade next to building h) Lowest adjacent grade at lowest elevation of declaration is to be signed and sealed by a land sum I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment und Were latitude and longitude in Section A provided by a lice	e as that used for the B ace, or enclosure floor) (V Zones only) icing the building ments) (LAG) (HAG) k or stairs, including ENGINEER, OR ARC veyor, engineer, or arch my best efforts to inter der 18 U.S. Code, Sec	CHITECT CERTIFI nitect authorized by pret the data availa tion 1001.	law to certify elevation information.
Certifier's Name John Pacetti Title Professional Surveyor and Mapper Company Name Marco Surveying & Mapping, LLC Address 3205 Beck Boulevard City Naples	License Number 6916 State Florida	ZIP Code 34114	No. 6916 Pluralth STATE OF ALORIDA STATE OF Ono I Survey Ono I Survey
Signature John Pacetti Digitally signed by John Pacetti Date: 2021.02.18 15:02:28 -05'00'	Date 02-10-2021	Telephone (239) 389-0026	Ext.
Copy all pages of this Elevation Certificate and all attachmen		• •	agent/company, and (3) building owner.
Comments (including type of equipment and location, per The accessory garage is 612 sq/ft & was derived from the access to the structure. C2e is the A/C pad (SW. side). Lo base flood elevation shown hereon, consult applicable but WO #19-235, gp/sc, FB #216, PG #65, 02/10/2021	architectural design plocal jurisdictions may h	ave elevation requi	rements more restrictive than the

ELEVATION CERTIFICATE

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

	ORTANT: In these spaces, copy the corre	<u> </u>			FOR INSURAN	CE COMPANY USE
	lding Street Address (including Apt., Unit, So 25 Dogwood Drive - Garage	uite, and/or Bldg. No.) o	or P.O. Route and Bo	x No.	Policy Number:	
City Mar	/ rco Island	State Florida	ZIP Code 34145		Company NAIC	Number
	SECTION E – BUILD FO	ING ELEVATION INF R ZONE AO AND ZO			REQUIRED)	
con	Zones AO and A (without BFE), complete In Property Sections A, B, and C. For Items E1–E Per meters.					
	Provide elevation information for the follow the highest adjacent grade (HAG) and the	lowest adjacent grade		w whether	the elevation is	above or below
	a) Top of bottom floor (including basemen crawlspace, or enclosure) isb) Top of bottom floor (including basemen	-	feet	meters	above or	below the HAG.
	crawlspace, or enclosure) is		feet	meters		below the LAG.
E2.	For Building Diagrams 6–9 with permanenthe next higher floor (elevation C2.b in the diagrams) of the building is	t flood openings provide	ed in Section A Items	8 and/or 9	_	2 of Instructions), ☐ below the HAG.
E3.	Attached garage (top of slab) is		feet	meters	above or	below the HAG.
E4.	Top of platform of machinery and/or equiposervicing the building is	ment	feet	meters	above or	below the HAG.
E5.	Zone AO only: If no flood depth number is floodplain management ordinance?		he bottom floor elevanown. The local office			
	SECTION F - PROPER	TY OWNER (OR OWN	ER'S REPRESENTA	ATIVE) CEI	RTIFICATION	
The con	e property owner or owner's authorized reprendently-issued BFE) or Zone AO must sign	esentative who complet here. The statements in	es Sections A, B, and n Sections A, B, and	d E for Zon E are corre	ect to the best of	EMA-issued or fmy knowledge.
Pro	perty Owner or Owner's Authorized Represo	entative's Name				
Adc	dress		City	Stat	te	ZIP Code
Sig	nature		Date	Tele	ephone	
Cor	mments					
					☐ Check h	ere if attachments.

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corn	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, S 1825 Dogwood Drive - Garage	d Box No.	Policy Number:				
City Marco Island	State ZIP Code Florida 34145	. (Company NAIC Number			
SECTI	ON G - COMMUNITY INFORMATION (OPTIONAL)				
The local official who is authorized by law or of Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	n Certificate. Complete the applicable ite					
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 Sec or Zone AO.	tion E for a building located in Zone A (w	vithout a FEMA-	issued or community-issued BFE)			
G3. The following information (Items G4	-G10) is provided for community floodpla	ain managemer	nt purposes.			
G4. Permit Number	G5. Date Permit Issued		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: ———————————————————————————————————						
G9. BFE or (in Zone AO) depth of flooding at the building site: feet meters Datum						
G10. Community's design flood elevation: feet meters Datum						
Local Official's Name Title Floodplain Coordinator						
Community Name Telephone City of Marco Island						
Signature Date						
Comments (including type of equipment and lo	ocation, per C2(e), if applicable)					
	/IEWED					
By Kelli DeFedericis at 10:28 am, Feb 26, 2021						
			☐ Check here if attachments.			

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1825 Dogwood Drive - Garage			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 (NW) on 02/10/2021

Clear Photo One

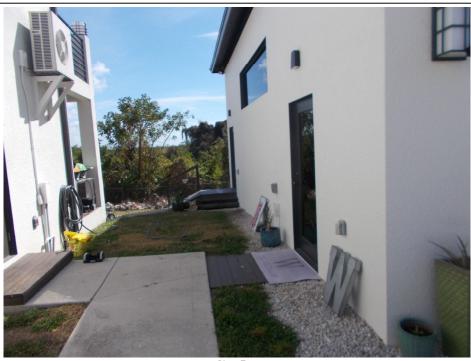


Photo Two

Photo Two Caption : Left Side View (NE) on 02/10/2021

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2022

INSURANCE COMPANY USE
N
y Number:
pany NAIC Number
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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: Rear View (SE) on 02/10/2021

Clear Photo Three



Photo Four Caption : Right Side View (SW) with A/C Unit on 02/10/2021

Clear Photo Four
Form Page 6 of 6