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 INSUF	RANCE COMPANY USE
A1. Building Owner's Name					Policy Num	ber:
Vincent James Gentile, Jr. & Mary Lina Gentile						
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.				Company N	AIC Number:	
741 South Barfield Drive						
City			State		ZIP Code	
Marco Island			Florida		34145	
A3. Property Description (Lo Lot 8, Block 425, Marco Bea			`	'	•	
A4. Building Use (e.g., Resi	dential, Non-Residential,	Addition	, Accessory, e	etc.) Residentia	ıl	
A5. Latitude/Longitude: La	N25°55'08.5"	Long. V	/81°41'59.4"	Horizontal	Datum: NAD 1	927 × NAD 1983
A6. Attach at least 2 photog	raphs of the building if th	e Certific	ate is being u	sed to obtain floo	d insurance.	
A7. Building Diagram Numb	er <u>1B</u>					
A8. For a building with a cra	wlspace or enclosure(s):					
a) Square footage of cr	awlspace or enclosure(s)			N/A sq ft		
b) Number of permaner	t flood openings in the cr	awlspac	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ade N/A
c) Total net area of floo	d openings in A8.b		N/A sqin			
	enings? Yes 🗓					
A9. For a building with an att						
_			827 00 saft			
a) Square footage of att b) Number of permaner					acont grado	N/A
	b) Number of permanent hood openings in the attached garage within 1.0 foot above adjacent grade					
	I openings in A9.b		N/A sq	in		
d) Engineered flood openings? Yes No						
	SECTION B – FLOOD	INSURA	NCE RATE	MAP (FIRM) INF	ORMATION	
B1. NFIP Community Name	•		B2. County			B3. State
City of Marco Island	120426		Collier			Florida
B4. Map/Panel B5. Suff Number	B6. FIRM Index Date	Eff	RM Panel ective/	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	vised Date 2012	AE.	9	
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:	П	CBRS	□ OPA			
	⊔					

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or 741 South Barfield Drive	Policy Number:			
City Stat Marco Island Flor		Code 145	Company NAIC Number	
SECTION C – BUILDING ELE	EVATION INFORMA	TION (SURVEY R	EQUIRED)	
 C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished C *A new Elevation Certificate will be required when construction of the building is complete. C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AF Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meter 				
Benchmark Utilized: AC 3389	Vertical Datum	n: <u>NAVD</u> 88		
Indicate elevation datum used for the elevations in ite ☐ NGVD 1929 区 NAVD 1988 ☐ Other/S		OW.		
Datum used for building elevations must be the same	e as that used for the	BFE.	Check the measurement used.	
a) Top of bottom floor (including basement, crawlsp	ace, or enclosure floo	r)	12.6 X feet meters	
b) Top of the next higher floor			N/A ⋉ feet meters	
c) Bottom of the lowest horizontal structural membe	r (V Zones only)		N/A	
d) Attached garage (top of slab)			10.5 X feet meters	
 e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Com 	ricing the building ments)		12.5 X feet meters	
f) Lowest adjacent (finished) grade next to building	(LAG)		10.1 X feet meters	
g) Highest adjacent (finished) grade next to building	(HAG)		12.2 X feet meters	
 h) Lowest adjacent grade at lowest elevation of dec structural support 	k or stairs, including	_	N/A X feet meters	
SECTION D – SURVEYOR,	ENGINEER, OR AF	CHITECT CERTIF	ICATION	
This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment un	my best efforts to inte	erpret the data availa	/ law to certify elevation information. ble. I understand that any false	
Were latitude and longitude in Section A provided by a lic	censed land surveyor	? ⊠Yes □No	☐ Check here if attachments.	
Certifier's Name John Pacetti	License Number 6916		D PAO	
Title Professional Surveyor and Mapper	SOUNTIFICATOR			
Company Name Marco Surveying & Mapping, LLC			Poly Ricette	
Address 3205 Beck Boulevard			STATE OF STATE OF	
City Naples	State Florida	ZIP Code 34114	Surveyou	
Signature John Pacetti Digitally signed by John Pacetti Date: 2021.12.03 10:18:59 -05'00'	Date 11-28-2021	Telephone (239) 389-0026	Ext.	
Copy all pages of this Elevation Certificate and all attachme	nts for (1) community	official, (2) insurance	agent/company, and (3) building owner.	
Comments (including type of equipment and location, per C2(e), if applicable) A9a Square footage was derived from architectural design plans. C2a is the front door threshold as there was no access to the structure. C2e is the A/C pads (N. side & S. side). Local jurisdictions may have elevation requirements more restrictive than the base flood elevation shown hereon, consult applicable building department regarding any design decisions. Local jurisdictions may have elevation requirements more restrictive than the base flood elevation shown hereon, consult applicable building department regarding any design decisions. W0 #20-637, ds/sc, FB #238, PG #4, 11/28/2021				
112 320 007 40300 1 0 11200 1 0 1111 1112012021				

ELEVATION CERTIFICATE

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MPORTANT: In these spaces, copy the correspon	nding information	from Section A.		FOR INSURAN	ICE COMPANY USE
Building Street Address (including Apt., Unit, Suite, a 741 South Barfield Drive	nd/or Bldg. No.) o	r P.O. Route and Bo	x No.	Policy Number	
City Marco Island	State Florida	ZIP Code 34145		Company NAIC	Number
SECTION E – BUILDING E FOR ZOI		ORMATION (SURV NE A (WITHOUT BI		REQUIRED)	
For Zones AO and A (without BFE), complete Items E complete Sections A, B,and C. For Items E1–E4, use enter meters.					
E1. Provide elevation information for the following ar the highest adjacent grade (HAG) and the lowesa) Top of bottom floor (including basement,	nd check the appro t adjacent grade (opriate boxes to show LAG).	w whethe	r the elevation is	above or below
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet	meter meter	s above or	below the HAG.
crawlspace, or enclosure) is	Lononings provide		meter	_	below the LAG.
E2. For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in the diagrams) of the building is	openings provide	_	meter	_	below the HAG.
E3. Attached garage (top of slab) is		feet	☐ meter	s above or	below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is		feet	meter	rs above or	below the HAG.
E5. Zone AO only: If no flood depth number is availa floodplain management ordinance? Yes					
SECTION F - PROPERTY OV	WNER (OR OWNE	ER'S REPRESENTA	TIVE) CE	ERTIFICATION	
The property owner or owner's authorized representa community-issued BFE) or Zone AO must sign here.	ative who complete The statements in	es Sections A, B, and Sections A, B, and	d E for Zo E are cor	one A (without a rect to the best of	FEMA-issued or of my knowledge.
Property Owner or Owner's Authorized Representative	ve's Name				
Address		City	Sta	ate	ZIP Code
Signature		Date	Те	lephone	
Comments					
				☐ Check	nere if attachments.

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corre	esponding information	on from Section A.	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, St. 741 South Barfield Drive	ite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:		
City Marco Island	State Florida	ZIP Code 34145	Company NAIC Number		
SECTIO	N 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. 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 Section or Zone AO.	on E for a building loca	ated in Zone A (without a FE	EMA-issued or community-issued BFE)		
G3. The following information (Items G4–	G10) is provided for co	ommunity floodplain manage	ement 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 Improvement			
G8. Elevation of as-built lowest floor (including of the building:	basement)	fe	eet 🗌 meters Datum		
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	fe	eet 🗌 meters Datum		
G10. Community's design flood elevation:		fe	eet 🗌 meters Datum		
Local Official's Name		Title Floodplain Coordi	nator		
Community Name City of Marco Island		Telephone			
Signature		Date			
Comments (including type of equipment and loc	ation, per C2(e), if ap	plicable)			
REVIEWED By Kelli DeFedericis at 1:59 pm, Dec 06, 2021					
			Check here if attachments.		

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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MPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 741 South Barfield Drive			Policy Number:
City	State	ZIP Code	Company NAIC Number
Marco Island	Florida	34145	<u> </u>

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 (W) on 11/28/2021

ELEVATION CERTIFICATE

Clear Photo One



Photo Two

: Left Side View (N) with A/C Pad on 11/28/2021 Photo Two Caption

Clear Photo Two

BUILDING PHOTOGRAPHS

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Continuation Page 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, Suite, and/or Bldg. No.) or P.O. Route and Box No.			Policy Number:	
741 South Barfield Drive				
	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: Rear View (E) on 11/28/2021

ELEVATION CERTIFICATE

Clear Photo Three



Photo Four

Photo Four Caption : Right Side View (S) with A/C Pad on 11/28/2021

Clear Photo Four