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

FL2202.2333EC

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 INSU	RANCE COMPANY USE	
A1. Building Owner	's Name					Policy Num	nber:	
ALTIN NAZAF								
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number:							NAIC Number:	
	1240 LAUREL COURT							
City				State		ZIP Code		
MARCO ISLAND	intion (Lot an	d Block Numbers, Tax	Darcel	FLORIDA	scription etc.)	34145		
LOT 3, BLOCK 126, PUBLIC RECORDS	MARCO BEACH OF COLLIER CO	UNIT FOUR, ACCORDING TOUNTY, FLORIDA.	O THE M	AP OR PLAT THEREOF,	AS RECORDED IN PLA	BOOK 6, PAG	ES 32 THROUGH 37, OF THE	
A4. Building Use (e	.g., Resident	ial, Non-Residential, A	ddition	, Accessory, etc.) <u>I</u>	RESIDENTIAL			
A5. Latitude/Longit	ude: Lat. <u>25.</u>	9640313 L	.ong. <u>-8</u>	1.7188979	Horizontal Datur	n: NAD	1927 💢 NAD 1983	
A6. Attach at least	2 photograph	s of the building if the	Certific	ate is being used to	obtain flood insur	ance.		
A7. Building Diagra	m Number 1	В						
A8. For a building v	vith a crawlsp	ace or enclosure(s):						
a) Square foot	age of crawls	pace or enclosure(s)	N/A	sq ft				
b) Number of p	ermanent flo	od openings in the cra	wlspac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gi	rade _{N/A}	
		enings in A8.b _{N/A}						
d) Engineered	flood opening	gs?						
A9. For a building v								
				#4				
		ed garage 462						
		od openings in the atta		jarage within 1.0 foo	ot above adjacent (grade N/A		
c) Total net are	a of flood op	enings in A9.b _{N/A}		sq in				
d) Engineered	flood opening	gs? 🗌 Yes 💢 No)					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Community Name & Community Number B2. County Name B3. State					B3. State			
CITY OF MARCO ISLAND 120426			COLLIER		FLORIDA			
B4. Map/Panel	B5. Suffix	B6. FIRM Index	B7. F	I IRM Panel	B8. Flood Zone(s) B9. Ba	se Flood Elevation(s)	
Number		Date	E1	ffective/ evised Date	(-	´ (Zc	one AO, use Base ood Depth)	
120210 0020	ш	E/16/2012	'`	05/16/2012	AE		od Bopin,	
12021C - 0828 H 5/16/2012 05/16/2012 AE 8								
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ☐ FIS Profile X FIRM ☐ Community Determined ☐ Other/Source:								
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X 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 D	ate: _{Ν/Δ}	Пс	BRS	ПОРА			_	

ELEVATION CERTIFICATE

OMB No. 1660-0008 FL2202.2333EC Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE					
				Policy Number:		
1240 LAUREL COURT						
ity State ZIP Code			Code	Company NAIC Number		
MARCO ISLAND	FLORIDA	3414	5			
SECTION C – BUILDING	ELEVATION II	NFORMATI	ON (SURVEY R	EQUIRED)		
C1. Building elevations are based on: Constru	uction Drawings*	Build	ing Under Constru	ıction* ☐ Finished Construction		
*A new Elevation Certificate will be required whe	n construction c	of the buildin	g 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/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.						
Benchmark Utilized: <u>FDOT GNSS NETWORK ; ;</u>	Verti	cal Datum: <u>N</u>	NAVD88			
Indicate elevation datum used for the elevations	in items a) throu	ugh h) below	1.			
☐ NGVD 1929 🔀 NAVD 1988 🔲 Oth						
Datum used for building elevations must be the	same as that use	ed for the BF	FE.	Check the measurement used.		
a) Top of bottom floor (including basement, crav	wlspace, or encl	osure floor)	<u>7. 1</u>			
b) Top of the next higher floor		,	N/A.			
c) Bottom of the lowest horizontal structural me	mber (V Zones o	only)	N/A.	- -		
d) Attached garage (top of slab)	(51.1.y /	6.			
e) Lowest elevation of machinery or equipment	servicing the bu	ilding	7. 2	<u> </u>		
(Describe type of equipment and location in (f) Lowest adjacent (finished) grade next to built	,		<u> </u>			
g) Highest adjacent (finished) grade next to buil	,		6.0			
h) Lowest adjacent grade at lowest elevation of	,	ncluding		X feet meters		
structural support						
SECTION D – SURVEY	OR, ENGINEER	R, OR ARC	HITECT CERTIF	CATION		
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.						
Were latitude and longitude in Section A provided by	a licensed land	surveyor?	☐Yes ☒No	☐ Check here if attachments.		
Certifier's Name	License N	umber		SH A. STEPHE		
KEITH A. STEPHENSON	LS 6521			LEITH CERTIFICATE		
Title				No. 6521		
PROFESSIONAL SURVEYOR AND MAPPER				- (V-0-PH)		
Company Name				Tel Callette		
EXACTA LAND SURVEYORS, LLC Address	STATE OF					
				STON LORIDA		
3846 BLANDING BOULEVARD City	State		ZIP Code	KEITH A. STEPHENSON		
JACKSONVILLE	FI		32210	State of Florida Professional Surveyor and Mapper License Number 6521		
Signature / / / /	Date		Telephone	2/16/2022		
Lut a light	2/16/2022		P: (866)735-1916			
Copy all pages of this Elevation Certificate and all attac	hments for (1) co	mmunity offi		agent/company, and (3) building owner.		
Comments (including type of equipment and location, per C2(e), if applicable)						
NOTE: C2.E = AC UNIT LOCATED ON THE LEFT SIDE OF THE HOUSE.						
CENTERLINE ROAD ELEVATION: 4.2						

ELEVATION CERTIFICATE

FL2202.2333EC

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

IMPORTANT: In these spaces, copy the correspond		FOR INSURAN	CE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and	ox No.	Policy Number:				
1240 LAUREL COURT						
City	State	ZIP Code		Company NAIC	Number	
	FLORIDA	34145				
SECTION E – BUILDING EL FOR ZONI	EVATION INFOR E AO AND ZONE			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.						
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	N/A	X feet	meters	above or	below the HAG.	
 Top of bottom floor (including basement, crawlspace, or enclosure) is 	N/A	X feet	meters	above or	below the LAG.	
E2. For Building Diagrams 6–9 with permanent flood of	penings provided	in Section A Items	s 8 and/or	9 (see pages 1–	2 of Instructions),	
the next higher floor (elevation C2.b in the diagrams) of the building is	N/A	x feet	meters	above or	below the HAG.	
E3. Attached garage (top of slab) is	<u>N/A</u> .	X feet	meters	above or	below the HAG.	
E4. Top of platform of machinery and/or equipment servicing the building is	<u>N/A</u>	X feet	meters	s above or	below the HAG.	
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	e, is the top of the	bottom floor elev	ated in acc cial must c	ordance with the ertify this inform	e community's ation in Section G.	
SECTION F - PROPERTY OW	NER (OR OWNER	R'S REPRESENTA	ATIVE) CE	RTIFICATION		
The property owner or owner's authorized representation community-issued BFE) or Zone AO must sign here. The property owner or owner's authorized representation community-issued BFE.	ve who completes he statements in S	Sections A, B, an Sections A, B, and	d E for Zor E are corr	ne A (without a F ect to the best o	EMA-issued or f my knowledge.	
Property Owner or Owner's Authorized Representative	's Name					
Address	C	ity	Sta	te	ZIP Code	
Signature	D	ate	Tel	ephone		
Comments						

ELEVATION CERTIFICATE

OMB No. 1660-0008 FL2202.2333EC Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, S	Policy Number:					
1240 LAUREL COURT						
City	State	ZIP Code	Company NAIC Number			
MARCO ISLAND	FLORIDA	34145				
SECTION	ON G - COMMUNITY IN	IFORMATION (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 Sector Zone AO.	tion E for a building locat	ed in Zone A (without a FEM	A-issued or community-issued BFE)			
G3. The following information (Items G4-	-G10) is provided for cor	mmunity floodplain managen	nent purposes.			
G4. Permit Number	G5. Date Permit Issue		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:	g basement)	fee	t 🔲 meters Datum			
G9. BFE or (in Zone AO) depth of flooding at	the building site:	fee	t 🔲 meters Datum			
G10. Community's design flood elevation:		fee	t meters Datum			
Local Official's Name		Title				
Community Name Telephone						
Signature		Date				
Comments (including type of equipment and lo	ecation per C2(a) if appl	icable)				
Comments (including type or equipment and io	cation, per GZ(e), il appi	icable)				
			Check here if attachments.			

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6. FL2202.2333EC

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE				
Building Street Address (including A	o. Policy Number:				
1240 LAUREL COURT					
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.



Front View



Rear View

Front View Date: 02/16/2022



Right Side View

Rear View Date: 02/16/2022



Left Side View

Left Side View: 02/16/2022

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

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

LLLVATION CERTIFICATE	Continua	ion Page FL2202.2333EC	Expiration Date: November 30, 2022
IMPORTANT: In these spaces, copy the corres	ponding information	on from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suit	e, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
1240 LAUREL COURT			
City	State	ZIP Code	Company NAIC Number
MARCO ISLAND	FLORIDA	34145	
If submitting more photographs than will fit on with: date taken; "Front View" and "Rear View" photographs must show the foundation with repr	ew"; and, if require	ed, "Right Side View" and "	Left Side View." When applicable,
Photo One			Photo Two
Photo Three			Photo Four