

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

	SECTION A - I	PROPERTY OWNER INFORM	MATION	For Insurance Company Use:			
BUILDING OWNER'S NAME	Policy Number						
JOSEPH & BARBARA ROLA							
BUILDING STREET ADDRESS (Including 879 Banyan Court	Apt., Unit, Suite, and/or Bl			Company NAIC Number			
CITY Marco Island		STATE FL	ZIP CO 34145	DE			
PROPERTY DESCRIPTION (Lot and Bloc	k Numbers, Tax Parcel Nu						
Lot 11, Block 335, Marco Beach U-10							
BUILDING USE (e.g., Residential, Non-res Residential	idential, Addition, Accesso	ry, etc. Use a Comments area,	if necessary.)				
LATITUDE/LONGITUDE (OPTIONAL)	HORIZON	TAL DATUM:	SOURCE: GPS (Type	e):			
(##° - ##' - ##.##" or ##.#### [°])	NAD 1927	☐ NAD 1983	USGS Qu	ad Map			
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP COMMUNITY NAME & COMMUNITY NUI City of Marco Island 120426	MBER B2.	COUNTY NAME lier	1	3. STATE orida			
DA MAD AND DANICI		B7. FIRM PANEL		B9. BASE FLOOD ELEVATION(S)			
B4. MAP AND PANEL NUMBER B5. SUFFIX 120426 0812 F	B6. FIRM INDEX DATE 7/20/98	EFFECTIVE/REVISED DATE 7/20/98	B8. FLOOD ZONE(S) AE	(Zone AO, use depth of flooding) +11.0'			
B10. Indicate the source of the Base Flood Eleva	ition (BFE) data or base flood	depth entered in B9.					
☐ FIS Profile ☐ FIRM	☐ Community Determ	ined Other (Des					
B11. Indicate the elevation datum used for the Bf			8 Other (Describe):				
B12. Is the building located in a Coastal Barrier R				Designation Date			
SEC		EVATION INFORMATION (SL	JRVEY REQUIRED)				
C1. Building elevations are based on: Constr	•	•					
*A new Elevation Certificate will be required							
C2. Building Diagram Number $\underline{1}$ (Select the build		ne building for which this certificate i	s being completed - see page	es 6 and 7. If no diagram			
accurately represents the building, provide a							
C3. Elevations – Zones A1-A30, AE, AH, A (with							
Complete Items C3a-i below according to the							
Section B, convert the datum to that used for			culation. Use the space provi	ded or the Comments area of			
Section D or Section G, as appropriate, to do	ocument the datum conversion	n.					
Datum Conversion/Comments		ork used engages on the EIDMO	IVaa 🖾 Na 🗀				
Elevation reference mark used <u>Site B.M.</u> Doo			_ 1	DCM N13 4162			
o a) Top of bottom floor (including basemen	t or enclosure)	<u>11</u> . <u>1</u> ft.(m)	Seal	PSM NO.4103			
o b) Top of next higher floor	1 0/	<u>n/a</u> ft.(m)	p eq	N 28 30 /6 !			
o c) Bottom of lowest horizontal structural m	ember (v zones only)	<u>n/a</u> ft.(m)	Date	F & 35 0 HEAT			
o d) Attached garage (top of slab)		<u>8</u> . <u>5</u> ft.(m)	Emt	09/08/05			
o e) Lowest elevation of machinery and/or e		44 04 (***)	License Number, Em Signature, and				
servicing the building (Describe in a Co	omments area)	11.0ft.(m)	mat				
of) Lowest adjacent (finished) grade (LAG)	\	7.9ft.(m)	Sig				
o g) Highest adjacent (finished) grade (HAG	**	<u>8</u> . <u>7</u> ft.(m)	Seus				
o h) No. of permanent openings (flood vents	•	,	ے کے				
o i) Total area of all permanent openings (flo				1			
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION 12-15-64							
This certification is to be signed and sealed				nation.			
I certify that the information in Sections A, E							
I understand that any false statement may be CERTIFIER'S NAME ERIC D KURTZ	pe punisnable by lifte of lift	рпзоннен иниег то 0.5. 0006	LICENSE NUMBER 4163				
OCITI IETO IVINIE EITO DITOITE							
TITLE Professional Surveyor & Mapper		COMPANY NAME	A. Trigo & Associates, Inc.				
ADDRESS	de	CITY	STATE	ZIP CODE			
2223 Trade Center Way	11	Naples	FL	34109-2035			
SIGNATURE	7	DATE	TELEPHO				
2()/		09/08/05	(239) 594	8448			

IMPORTANT: In these spaces, copy the				For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, S 879 Banyan	uite, and/or Bldg. No.) OR P.O. ROUTE AND	BOX NO.		Policy Number Ct.
CITY Marco Island	STA FL	TE	ZIP CODE 34145	Company NAIC Number
SECTION I	D - SURVEYOR, ENGINEER, OR A	RCHITECT CERTI	FICATION (CONTINUE	D)
Copy both sides of this Elevation Certificate for (l) community official, (2) insurance agent	t/company, and (3) buil	lding owner.	
COMMENTS C30) A/C BAD				
C3e) A/C PAD				
SECTION E DUBLING ELEV	ATION INFORMATION (CURVEY A	IOT BEOLUBED) F	OD ZONE AO AND ZO	Check here if attachmer
or Zone AO and Zone A (without BFE), complete	ATION INFORMATION (SURVEY N			
ection C must be completed.	Rems Et mough E4. If the Elevation of	crancate is interiord for	ase as supporting information	SHOTT OF A LOWING OF LOWING.
1. Building Diagram Number_(Select the building		which this certificate is	s being completed – see pa	ages 6 and 7. If no diagram accurate
represents the building, provide a sketch or ph 2. The top of the bottom floor (including basemen	• , ,	a) in (am) 🖂 aboue	or Dhalow (ahaak ana) the highest ediscont areas (1)
natural grade, if available).	tor enclosure) or the building is it.(n	n)in.(cm) above	or below (check one) the highest adjacent grade. (Use
3. For Building Diagrams 6-8 with openings (see		floor (elevation b) of th	e building isft.(m)i	n.(cm) above the highest adjacent
grade. Complete items C3.h and C3.i on front		a) in (am) 🗀 ah	or Dholou (-hl)	i sha hinhaas adiaa at amada 100
 The top of the platform of machinery and/or equal natural grade, if available). 	upment servicing the building is ft.(n	ı)in.(cm) [_] above	or Thelow (cueck oue)	i ine nignest adjacent grade. (Use
5. For Zone AO only: If no flood depth number is			with the community's flood	plain management ordinance?
Yes No Unknown. The local o				
SECTION F The property owner or owner's authorized represe	- PROPERTY OWNER (OR OWN			
issued BFE) or Zone AO must sign here. <i>The sta</i>				nout a FEIVIA-ISSUED OF COMMUNITY-
PROPERTY OWNER'S OR OWNER'S AUTHO			,	
ADDRESS		CITY	STAT	E ZIP CODE
SIGNATURE		DATE	TELE	PHONE
COMMENTS		····		
				Check here if attachment
	SECTION G - COMMUNITY IN	IFORMATION (OPT	TIONAL)	Gricox nore ii ditadiiment
ne local official who is authorized by law or ordinar				ns A, B, C (or E), and G of this Eleva
ertificate. Complete the applicable item(s) and sig				
 The information in Section C was taken from or local law to certify elevation information. 				neer, or architect who is authorized by
2. 🔲 A community official completed Section E fo	or a building located in Zone A (without a	FEMA-issued or comm		e AO.
3. The following information (Items G4-G9) is	provided for community floodplain mana	gement purposes.		
G5. PERMIT NUMBER G5	. DATE PERMIT ISSUED	G6. DA	ITE CERTIFICATE OF COMP	PLIANCE/OCCUPANCY ISSUED
	struction Substantial Improvement			
8. Elevation of as-built lowest floor (including base	,		ft.(m)	Datum:
9. BFE or (in Zone AO) depth of flooding at the bu	ilding site is:		ft.(m)	Datum:
LOCAL OFFICIAL'S NAME		TITLE		
COMMUNITY NAME		TELEPHON	IE	
SIGNATURE		DATE		
COMMENTS		***************************************		
				
				Check here if attachments

(K) / 9-26-2005

FEMA Form 81-31, January 2003