



Town of Fort Myers Beach

Anita Cereceda
Mayor

Ray Murphy
Vice Mayor

Joanne Shamp
Council Member

Bruce Butcher
Council Member

Rexann Hosafros
Council Member

Memo of EC Review for Correctness and Completion

The attached FEMA Elevation Certificate for the following address has been reviewed by this office.

260 PEARL ST
(BLD18-1924)

The items noted below are incorrect on the attached form and should read as entered on this page.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name			For Insurance Company Use:		
			Policy Number		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			Company NAIC Number		
City	State	ZIP Code			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)					
A5. Latitude/Longitude: Lat. Long. Horizontal Datum: NAD 1927 NAD 1983					
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.					
A7. Building Diagram Number:					
A8. For a building with a crawlspace or enclosure(s):			A9. For a building with an attached garage:		
a) Square footage of crawlspace or enclosure(s) sq ft			a) Square footage of attached garage sq ft		
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade			b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade		
c) Total net area of flood openings in A8.b sq in			c) Total net area of flood openings in A9.b sq in		
d) Engineered flood openings? Yes No			d) Engineered flood openings? Yes No		

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number		B2. County Name		B3. State	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
12071C0554					10
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.					
FIS FIRM Community Determined Other (Describe)					
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe)					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No					
Designation Date CBRS OPA					

Local Official's Name: Chelsea O'Riley		Title: Public Works Manager	
Community Name: Town of Fort Myers Beach		Telephone: (239) 765-0202 ext.1700	
Signature: 		Date: 10/23/2019	
Comments:			

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 INSURANCE COMPANY USE	
A1. Building Owner's Name KATHLEEN A. BOGS TRUST				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 260 PEARL ST.				Company NAIC Number:	
City FORT MYERS BEACH		State Florida		ZIP Code 33931	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) HILLS T.P. SUBDV PB 3/PG 84 LOT 19 AKA, BLK J, LOT 12 STRAP: 19-46-24-W4-00419.0000					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL					
A5. Latitude/Longitude: Lat. 26.45322 Long. -81.94611 Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983					
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.					
A7. Building Diagram Number 6					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) 159 sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 2					
c) Total net area of flood openings in A8.b 256 sq in					
d) Engineered flood openings? ☒ Yes ☐ No					
A9. For a building with an attached garage:					
a) Square footage of attached garage N/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.b N/A sq in					
d) Engineered flood openings? ☐ Yes ☒ No					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number TOWN OF FORT MYERS BEACH & 120673			B2. County Name LEE		B3. State Florida
B4. Map/Panel Number 12071C0/0554	B5. Suffix F	B6. FIRM Index Date 08/28/2008	B7. FIRM Panel Effective/ Revised Date 08/28/2008	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 10'(NAVD88)
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: _____ ☐ CBRS ☐ OPA					

ELEVATION CERTIFICATEOMB No. 1660-0008
Expiration Date: November 30, 2018

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. 260 PEARL ST.			Policy Number:
City FORT MYERS BEACH	State Florida	ZIP Code 33931	Company NAIC Number

SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction

*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/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: USC&GS BM TIDAL STATION 1 Vertical Datum: (NAVD88)

Indicate elevation datum used for the elevations in items a) through h) below.

☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source: _____

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>3. 92</u>	☒ feet ☐ meters
b) Top of the next higher floor	<u>13. 25</u>	☒ feet ☐ meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A.</u>	☒ feet ☐ meters
d) Attached garage (top of slab)	<u>N/A.</u>	☒ feet ☐ meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>7. 0</u>	☒ feet ☐ meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>2. 40</u>	☒ feet ☐ meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>2. 90</u>	☒ feet ☐ meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>N/A.</u>	☒ feet ☐ meters

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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 BILL H. HYATT, JR.		License Number PSM 4636		 BILL H HYATT HYATT 2019.07. 19 13:13:06 -04'00'
Title REGISTERED LAND SURVEYOR				
Company Name LIS SURVEYING, LLC (JOB#22398)				
Address 21430 PALM BEACH BLVD				
City ALVA	BILL H HYATT 2019.07.19	State Florida	ZIP Code 33920	
Signature		13:12:56 -04'00'	Date 07/19/2019	Telephone (239) 481-2366

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)

*C(2)= USC&GS BM TIDAL STATION 4D TIDAL 1 A/K/A "BM 1 1965".

*A(5)-OBTAINED FROM WWW.STEVE MORSE.ORG

*C(2)B=LIVING AREA

*NOTE: THE HVAC COMPRESSOR IS LOCATED AT THE REAR OF THE BUILDING ON A ELEVATED STAND WITH AN ELEVATION OF 13.10'.

*NOTE: ENCLOSURE IS STORAGE ROOM WITH (2) 8"X16" CRAWL SPACE DOOR SYSTEMS FLOOD VENTS MODEL 816CS FOR A TOTAL OF 256 SQ INCHES.

*THE EQUIPMENT LISTED IN SECTION C(2)E REFERS TO THE BOTTOM OF THE ELECTRICAL PANEL LOCATED AT THE SIDE THE BUILDING WITH AN ELEVATION OF 7.0'.

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

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. 260 PEARL ST.			Policy Number:
City FORT MYERS BEACH	State Florida	ZIP Code 33931	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 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 _____ . _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ . _____ ☐ feet ☐ meters ☐ above or ☐ below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ . _____ ☐ feet ☐ meters ☐ above or ☐ 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 equipment servicing the building is _____ . _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative'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, 2018

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. 260 PEARL ST.			Policy Number:
City FORT MYERS BEACH	State Florida	ZIP Code 33931	Company NAIC Number

SECTION 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 E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. ☐ The following information (Items G4–G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
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- G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ ☐ feet ☐ meters Datum _____
- 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
Community Name	Telephone
Signature	Date

Comments (including type of equipment and location, per C2(e), if applicable)

☐ Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
260 PEARL ST.

City
FORT MYERS BEACH

State
Florida

ZIP Code
33931

FOR INSURANCE COMPANY USE

Policy Number:

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 7/12/2019



Photo Two

Photo Two Caption-FRONT DOOR VIEW -7/12/2019

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
260 PEARL ST.

City
FORT MYERS BEACH

State
Florida

ZIP Code
33931

FOR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number

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-RIGHT VIEW 7/12/2019



Photo Four

Photo Four Caption-LEFT VIEW 7/12/2019

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

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. 260 PEARL ST.			Policy Number:
City FORT MYERS BEACH	State Florida	ZIP Code 33931	Company NAIC Number

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 Five

Photo Five Caption-REAR VIEW 7/12/2019

Photo Six

Photo Six Caption

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 INSURANCE COMPANY USE	
A1. Building Owner's Name KATHLEEN A. BOGS TRUST				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 260 PEARL ST.				Company NAIC Number:	
City FORT MYERS BEACH		State Florida		ZIP Code 33931	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) HILLS T.P. SUBDV PB 3/PG 84 LOT 19 AKA, BLK J, LOT 12 STRAP: 19-46-24-W4-00419.0000					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL					
A5. Latitude/Longitude: Lat. 26.45322 Long. -81.94611 Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983					
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.					
A7. Building Diagram Number 6					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) 159 sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 2					
c) Total net area of flood openings in A8.b 256 sq in					
d) Engineered flood openings? ☒ Yes ☐ No					
A9. For a building with an attached garage:					
a) Square footage of attached garage N/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.b N/A sq in					
d) Engineered flood openings? ☐ Yes ☒ No					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number TOWN OF FORT MYERS BEACH & 120673			B2. County Name LEE		B3. State Florida
B4. Map/Panel Number 12071C0/0554	B5. Suffix F	B6. FIRM Index Date 08/28/2008	B7. FIRM Panel Effective/ Revised Date 08/28/2008	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 10'(NAVD88)
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: _____ ☐ CBRS ☐ OPA					

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

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. 260 PEARL ST.			Policy Number:
City FORT MYERS BEACH	State Florida	ZIP Code 33931	Company NAIC Number

SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction

*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/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: USC&GS BM TIDAL STATION 1 Vertical Datum: (NAVD88)

Indicate elevation datum used for the elevations in items a) through h) below.

☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source: _____

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>3. 92</u>	☒ feet ☐ meters
b) Top of the next higher floor	<u>13. 25</u>	☒ feet ☐ meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A.</u>	☒ feet ☐ meters
d) Attached garage (top of slab)	<u>N/A.</u>	☒ feet ☐ meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>7. 0</u>	☒ feet ☐ meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>2. 40</u>	☒ feet ☐ meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>2. 90</u>	☒ feet ☐ meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>N/A.</u>	☒ feet ☐ meters

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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 BILL H. HYATT, JR.		License Number PSM 4636	Place Seal Here
Title REGISTERED LAND SURVEYOR			
Company Name LIS SURVEYING, LLC (JOB#22398)			
Address 21430 PALM BEACH BLVD			
City ALVA	State Florida	ZIP Code 33920	
Signature		Date 07/19/2019	Telephone (239) 481-2366

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)

*C(2)= USC&GS BM TIDAL STATION 4D TIDAL 1 A/K/A "BM 1 1965". *A(5)-OBTAINED FROM WWW.STEVE MORSE.ORG
*C(2)B=LIVING AREA *NOTE: THE HVAC COMPRESSOR IS LOCATED AT THE REAR OF THE BUILDING ON
A ELEVATED STAND WITH AN ELEVATION OF 13.10'.
*NOTE: ENCLOSURE IS STORAGE ROOM WITH (2) 8"X16" CRAWL SPACE DOOR SYSTEMS FLOOD VENTS MODEL 816CS FOR A
TOTAL OF 256 SQ INCHES.
*THE EQUIPMENT LISTED IN SECTION C(2)E REFERS TO THE BOTTOM OF THE ELECTRICAL PANEL LOCATED AT THE SIDE THE
BUILDING WITH AN ELEVATION OF 7.0'.

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

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. 260 PEARL ST.			Policy Number:
City FORT MYERS BEACH	State Florida	ZIP Code 33931	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 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 _____ . _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ . _____ ☐ feet ☐ meters ☐ above or ☐ below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ . _____ ☐ feet ☐ meters ☐ above or ☐ 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 equipment servicing the building is _____ . _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative'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, 2018

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. 260 PEARL ST.			Policy Number:
City FORT MYERS BEACH	State Florida	ZIP Code 33931	Company NAIC Number

SECTION 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 E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. ☐ The following information (Items G4–G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	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 basement) of the building: _____ ☐ feet ☐ meters Datum _____
- 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
Community Name	Telephone
Signature	Date

Comments (including type of equipment and location, per C2(e), if applicable)

☐ Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
260 PEARL ST.

City
FORT MYERS BEACH

State
Florida

ZIP Code
33931

FOR INSURANCE COMPANY USE

Policy Number:

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 7/12/2019



Photo Two

Photo Two Caption-FRONT DOOR VIEW -7/12/2019

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

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.
260 PEARL ST.

Policy Number:

City
FORT MYERS BEACH

State
Florida

ZIP Code
33931

Company NAIC Number

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-RIGHT VIEW 7/12/2019



Photo Four

Photo Four Caption-LEFT VIEW 7/12/2019

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
260 PEARL ST.

FOR INSURANCE COMPANY USE

Policy Number:

City
FORT MYERS BEACH

State
Florida

ZIP Code
33931

Company NAIC Number

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 Five

Photo Five Caption-REAR VIEW 7/12/2019

Photo Six

Photo Six Caption