

## U.S. DEPARTMENT OF HOMELAND SECURITY

**ELEVATION CERTIFICATE**

Program

Federal Emergency Management Agency National Flood Insurance

OMB No. 1660-0008  
Expires March 31, 2012

For Insurance Company Use:

Important: Read the instructions on pages 1-9.

**SECTION A - PROPERTY INFORMATION**A1. Building Owner's Name **GARY LAU**

Policy Number

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
**5 SUNVIEW BOULEVARD**

Company NAIC Number

City **FORT MYERS BEACH** State **FL** ZIP Code **33931**A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
**BEING OF LOT 30, FAIRVIEW, UNIT 4**A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **RESIDENTIAL**A5. Latitude/Longitude: Lat. **26 25 17 N** Long. **81 53 57 W**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) **N/A** sq ft  
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade **N/A**  
c) Total net area of flood openings in A8.b **N/A** sq in  
d) Engineered flood openings? ☐ Yes ☒ No

A9. For a building with an attached garage:

- a) Square footage of attached garage **1984** sq ft  
b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade **10**  
c) Total net area of flood openings in A9.b **2000** sq in  
d) Engineered flood openings? ☒ Yes ☐ No

**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**B1. NFIP Community Name & Community Number  
**FORT MYERS BEACH 120673**B2. County Name  
**LEE COUNTY**B3. State  
**Florida**B4. Map/Panel Number  
**12071C-0567**B5. Suffix  
**F**B6. FIRM Index  
Date  
**8/28/08**B7. FIRM Panel  
Effective/Revised Date  
**8/28/08**B8. Flood  
Zone(s)  
**AE**B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
**10.0**

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 (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**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. Use the same datum as the BFE.

Benchmark Utilized **NGS PID -J245** Vertical Datum **NAVD 1988**Conversion/Comments **N/A**

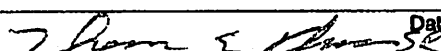
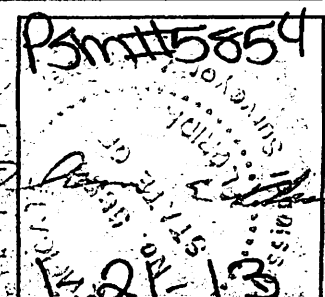
Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) **4.5** ☒ feet ☐ meters (Puerto Rico only)  
b) Top of the next higher floor **14.8** ☒ feet ☐ meters (Puerto Rico only)  
c) Bottom of the lowest horizontal structural member (V Zones only) **N/A** ☐ feet ☐ meters (Puerto Rico only)  
d) Attached garage (top of slab) **4.5** ☒ feet ☐ meters (Puerto Rico only)  
e) Lowest elevation of machinery or equipment servicing the building **13.0** ☒ feet ☐ meters (Puerto Rico only)  
(Describe type of equipment and location in Comments)  
f) Lowest adjacent (finished) grade next to building (LAG) **3.7** ☒ feet ☐ meters (Puerto Rico only)  
g) Highest adjacent (finished) grade next to building (HAG) **3.9** ☒ feet ☐ meters (Puerto Rico only)  
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support **N/A** ☐ feet ☐ meters (Puerto Rico only)

**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. ☒

Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

Certifier's Name **THOMAS E. RHODES, SR.**License Number **5854**Title **PRESIDENT**Company Name **Rhodes & Rhodes Land Surveying, Inc.**Address **28100 Bonita Grande Dr. Ste. 107 City Bonita Springs**State **FL**ZIP Code **34135**Signature Date **1/21/13**Telephone **239-405-8166**

|                                                                                                                          |                                   |
|--------------------------------------------------------------------------------------------------------------------------|-----------------------------------|
| <b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>                                    | <b>For Insurance Company Use:</b> |
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br>5 SUNVIEW BOULEVARD | Policy Number                     |
| City FORT MYERS BEACH State FL ZIP Code 33931                                                                            | Company NAIC Number               |

### SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

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

Comments IN REFERENCE TO C2-E THE MACHINERY IS AN AIR CONDITIONING UNIT  
JOB # 2012-784 FINAL FB. 786 PG. 18-19  
FLOOD VENT MODEL #1540-520

Signature [Signature] Date 1/21/13 ☒ Check here if attachments

### 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 8-9 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's or Owner's Authorized Representative's Name

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments \_\_\_\_\_

☐ Check here if attachments

### 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 and G9.

- 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-G9) is provided for community floodplain management purposes.

|                                       |                                          |                                                     |
|---------------------------------------|------------------------------------------|-----------------------------------------------------|
| G4. Permit Number<br><u>2012-0152</u> | G5. Date Permit Issued<br><u>9/28/12</u> | 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 (PR) Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_
- G10. Community's design flood elevation \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_

Local Official's Name KEV MILLER Title BUILDING SAFETY SERVICES COO.

Community Name TOWN OF FORT MYERS BEACH Telephone 739-765-6202

Signature [Signature] Date 1/20/13

Comments \_\_\_\_\_

☐ Check here if attachments

## Building Photographs

See Instructions for Item A6.

|                                                                                                                                                                                                                                                                                                                                                                                                     |                                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br>231 STERLING AVENUE                                                                                                                                                                                                                                                                            | For Insurance Company Use:<br>Policy Number |
| City FORT MYERS BEACH State FL ZIP Code 33931                                                                                                                                                                                                                                                                                                                                                       | Company NAIC Number                         |
| If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse. |                                             |

FRONT VIEW 1/21/13



RIGHT SIDE VIEW 1/21/13



# Building Photographs

Continuation Page

|                                                                                                                                                                                                                                                |                                             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br>5 SUNVIEW BOULEVARD                                                                                                                       | For Insurance Company Use:<br>Policy Number |
| City FORT MYERS BEACH State FL 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." |                                             |

REAR VIEW 1/21/13



LEFT SIDE VIEW 1/21/13

