

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

2005-09995

<b>SECTION A - PROPERTY OWNER INFORMATION</b>		For Insurance Company Use:
PROPERTY OWNER'S NAME BERMAN HOMES AT WEST BAY		Policy Number
PROPERTY STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. HAPEL TRACE		Company NAIC Number
PROPERTY TYPE	STATE FL	ZIP CODE
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BLOCK E, WEST BAY CLUB U-II, PLAT BOOK 66, PAGES 82-83		
PROPERTY USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL		
DEGREE/LONGITUDE (OPTIONAL) # - ##.##' or ##.#####°	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

COMMUNITY NAME & COMMUNITY NUMBER COMMUNITY 125124		B2. COUNTY NAME LEE		B3. STATE FLORIDA	
B4. FIRM PANEL NUMBER 5124-0465	B5. SUFFIX C	B6. FIRM INDEX DATE 5/05/03	B7. FIRM PANEL EFFECTIVE/REVISED DATE 11/04/92	B8. FLOOD ZONE(S) A-14	B9. BASE FLOOD ELEVATION (Zone AO, use depth of flooding) 11.0
State the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> S Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe): _____ State the elevation datum used for the BFE in B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe): _____ Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____					

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

Elevation measurements are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction

Elevation Certificate will be required when construction of the building is complete.

Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram adequately represents the building, provide a sketch or photograph.)

Notes - 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 C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in B9, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Conversion/Comments \_\_\_\_\_

Does the elevation reference mark used appear on the FIRM?  Yes  No

Top of bottom floor (including basement or enclosure)	11.5 ft.(m)
Top of next higher floor	NA. ft.(m)
Bottom of lowest horizontal structural member (V zones only)	NA. ft.(m)
Attached garage (top of slab)	11.0 ft.(m)
Lowest elevation of machinery and/or equipment	
Service to the building (Describe in a Comments area)	10.9. ft.(m)
Lowest adjacent (finished) grade (LAG)	10.4 ft.(m)
Highest adjacent (finished) grade (HAG)	10.4 ft.(m)
Top of permanent openings (flood vents) within 1 ft. above adjacent grade	NA
Total area of all permanent openings (flood vents) in C3.h	NA sq. in. (sq. cm)

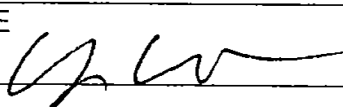
License Number, Embossed Seal, Signature, and Date

  
ROBERT J. BILLS  
PSM #4698 11/17/06

## 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 in Sections A, B, and C on this certificate represents my best efforts to interpret the data available, and that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

SURVEYOR'S NAME ROBERT J. BILLS LICENSE NUMBER 4698

PROFESSIONAL SURVEYOR AND MAPPER	COMPANY NAME CONSUL-TECH SURVEYING & MAPPING		
ADDRESS 41 ROAD	CITY BONITA SPRINGS	STATE FL	ZIP CODE 34135
SIGNATURE 	DATE 11-20-06	TELEPHONE (239) 947-0266	

<b>NOTE: In these spaces, copy the corresponding information from Section A.</b>		For Insurance Company Use:
STREET ADDRESS (Including Apt, Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.		Policy Number
STATE	ZIP CODE	Company NAIC Number

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

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

...CHINERY IS AIR CONDITIONER PAD

...LOT E-29-FINAL.DOC (FB 325/27)  Check here if attachment

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

...and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, it be completed.

...Diagram Number \_\_ (Select the building diagram most similar to the building for which this certificate is being completed – see pages 6 and 7. If no diagram accurately s the building, provide a sketch or photograph.)

...the bottom floor (including basement or enclosure) of the building is \_\_ ft.(m) \_\_ in.(cm)  above or  below (check one) the highest adjacent grade. (Use de, if available).

...g Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is \_\_ ft.(m) \_\_ in.(cm) above the highest adjacent complete items C3.h and C3.i on front of form.

...the platform of machinery and/or equipment servicing the building is \_\_ ft.(m) \_\_ in.(cm)  above or  below (check one) the highest adjacent grade. (Use de, if available).

...O 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?  
 No  Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

...owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community- or Zone AO must sign here. *The statements in Sections A, B, C, and E are correct to the best of my knowledge.*

...OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

CITY	STATE	ZIP CODE
DATE	TELEPHONE	

Check here if attachments

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

...al 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 Elevati complete the applicable item(s) and sign below.

...ormation in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by al law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

...community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

...llowing information (Items G4-G9) is provided for community floodplain management purposes.

NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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...has been issued for:  New Construction  Substantial Improvement

...f as-built lowest floor (including basement) of the building is: \_\_\_\_\_ ft.(m) Datum: \_\_\_\_\_

...Zone AO) depth of flooding at the building site is: \_\_\_\_\_ ft.(m) Datum: \_\_\_\_\_

...ICIAL'S NAME	TITLE
...Y NAME	TELEPHONE
	DATE

Check here if attachments