ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachme	((A) (I (C)		
CONVIAIL NAMES OF THIS FIEWATION CONTINUESTS AND ALL ATTACHME	$\Delta n t \in t \cap r (1) \cap C \cap m m (n) t (1) \cap m$	icial 121 inglirance adent/compar	V_{and} I_{A} nullaing owner
$\mathcal{O}\mathcal{O}\mathcal{O}\mathcal{O}\mathcal{O}\mathcal{O}\mathcal{O}\mathcal{O}\mathcal{O}\mathcal{O}$		ICIAL IZ I II SULATICE AGETICOTTDAT	

Copy an pages of this Elevation Cer C575123			OPERTY INFORM		· .	RANCE COMPANY USE	
A1. Building Owner's Name				Policy Num			
EDWARD AUSTIN, III							
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 23760 NAPOLI WAY 					Company NAIC Number:		
City State ESTERO FL			ZIP Code 34134				
A3. Property Description (Lot ar LOT 17, PELICAN LANDING; P							
A4. Building Use (e.g., Residen	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL						
A5. Latitude/Longitude: Lat. 2	6.394796 Lo	ng8	31.8309323	Horizontal Datur	n: 🗌 NAI	D 1927 🖾 NAD 1983	
A6. Attach at least 2 photograph	ns of the building if the C	ertifica	ate is being used to	obtain flood insur	ance.		
A7. Building Diagram Number	1A						
A8. For a building with a crawls	pace or enclosure(s):						
a) Square footage of crawls	space or enclosure(s) N/	/A	sq ft				
b) Number of permanent flo	ood openings in the craw	Ispace	e or enclosure(s) wi	thin 1.0 foot above	e adjacent gr	ade N/A	
c) Total net area of flood op	penings in A8.b N/A	S	q in				
d) Engineered flood openin	gs? □Yes ⊠N	0					
A9. For a building with an attach	ed garage:						
a) Square footage of attach	ed garage 600	s	sq ft				
b) Number of permanent flo	ood openings in the attac	hed g	arage within 1.0 foo	ot above adjacent	grade N/A		
c) Total net area of flood or	penings in A9.b N/A		sq in				
d) Engineered flood openin	gs? □Yes ⊠N	10					
SE	CTION B – FLOOD INS	URA	NCE RATE MAP (
B1. NFIP Community Name & C LEE COUNTY UNINCORPORA	•		B2. County Name LEE COUNTY		х.	B3. State FL	
B4. Map/Panel B5. Suffix Number G 12071C0589	B6. FIRM Index Date 11/17/2022	Ef R€	RM Panel fective/ evised Date 7/2022	B8. Flood Zone(s AE/X	(Zo	se Flood Elevation(s) ne AO, use Base od Depth)	
B10. Indicate the source of the I □FIS Profile □\FIRM	Base Flood Elevation (Bl			-	n B9:		
B11. Indicate elevation datum u	sed for BFE in Item B9:		NGVD 1929 ⊠I	NAVD 1988]Other/Sourc	;e:	
B12. Is the building located in a	Coastal Barrier Resource	es Sy	stem (CBRS) area	or Otherwise Prot	ected Area (0	OPA)? □Yes ⊠No	
Designation Date: <u>N/A</u>		CBRS	ΟΡΑ				
FEMA Form 086-0-33 (12/19)	Repl	aces a	all previous editions	S.		Form Page 1 of 6	

ELEVATION CERTIFICATE				OMB No. 1660-0008 Expiration Date: November 30, 202
C575123 IMPORTANT: In these spaces, co	on A.	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 23760 NAPOLI WAY				Policy Number:
City ESTERO	State FL	ZIP Code 34134		Company NAIC Number
SECTION C – B	UILDING ELEVATION INFO	RMATION (SURV	EY RE	QUIRED)
 C1. Building elevations are based on: *A new Elevation Certificate will be rec C2. Elevations – Zones A1–A30, AE, AH, Complete Items C2.a–h below accordi Benchmark Utilized: J416 – 14.92' Indicate elevation datum used for the end MGVD 1929 ⊠NAVD 1 Datum used for building elevations mu a) Top of bottom floor (including base b) Top of the next higher c) Bottom of the lowest horizontal strued d) Attached garage (top of slab) e) Lowest elevation of machinery or end (Describe type of equipment and locat f) Lowest adjacent (finished) grade modeling Highest adjacent grade at lowest elevation 	☐Construction Drawings* quired when construction of the A (with BFE), VE, V1–V30, V (ing to the building diagram spe Vertical Dat elevations in items a) through I 988 ☐Other/Source: Ist be the same as that used for ment, crawlspace, or enclosur inctural member (V Zones only) equipment servicing the building ion in Comments) ext to building (LAG) next to building (HAG)	Building Under building is comple with BFE), AR, AR/ cified in Item A7. In rum: <u>NAVD88</u> n) below. r the BFE. e floor) <u>10.3</u> <u>21.6</u> <u>N/A</u> <u>9.93</u> g <u>10.4</u>	2 2 2 3 3 4 4 7 7 2 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	ruction [*] ⊠Finished Construction AE, AR/A1–A30, AR/AH, AR/AO.
SECTION D -	SURVEYOR, ENGINEER, O	R ARCHITECT CE	ERTIFIC	CATION
This certification is to be signed and sealed I certify that the information on this Certifica statement may be punishable by fine or im	l by a land surveyor, engineer, ate represents my best efforts	or architect author	ized by	law to certify elevation information.
Were latitude and longitude in Section A pr	ovided by a licensed land surv	eyor? Xes	□No	Check here if attachment
Certifier's Name Kenneth J. Osborne	License Numb 6415	er		ETHJO8 NETIFIC8
Title Registered Professional Surveyor				We No. 6415 M
Company Name COMPASS				Kenneth ^{by Kenneth} Soborne
Address 6250 N Military Trail #102				
City West Palm Beach	State FL	ZIP Code 33407		ONALORIDA OR
Signature Tea Mission	Date	Telephone		
	2/22/2023	(561)640-4		agent/company, and (3) building own
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) LAT AND LONG PROVIDED BY GOOGLE EARTH C2:E) A/C EQUIP PAD – (SOUTH SIDE OF BUILDING) GARAGE SQ FOOTAGE ROUNDED TO NEAREST 100				

ELEVATION CERTIFICATE			OMB No. 1660-0008 Expiration Date: November	30, 2022		
C575123 IMPORTANT: In these spaces, copy the c	orresponding informat	ion from Section A.	FOR INSURANCE COMPA	ANY USE		
Building Street Address (including Apt., Unit, Suite, an 23760 NAPOLI WAY	Policy Number:					
City ESTERO		ZIP Code 4134	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 the highest adjacent grade (HAG) and the lowest a) Top of bottom floor (including basement, crawlspace, or enclosure) is 			er the elevation is above or be]above or ⊡below the HAG	elow		
b) Top of bottom floor (including basement, crawlspace, or enclosure) is			above or below the LAG			
E2. For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in	openings provided in Se					
the diagrams) of the building is E3. Attached garage (top of slab) is	·]above or			
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 OW	NER (OR OWNER'S R	EPRESENTATIVE) C	ERTIFICATION			
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.						
	he statements in Section	ns A, B, and E are co	prrect to the best of my knowle	edge.		
Property Owner or Owner's Authorized Representative		ns A, B, and E are co	prrect to the best of my knowle	adge.		
Property Owner or Owner's Authorized Representative Address			tate ZIP Coc	edge.		
	e's Name	S		edge.		
Address	e's Name City	S	itate ZIP Coc	edge.		
Address Signature	e's Name City	S	itate ZIP Coc	edge.		
Address Signature	e's Name City	S	itate ZIP Coc	edge.		
Address Signature	e's Name City	S	itate ZIP Coc	edge.		
Address Signature	e's Name City	S	itate ZIP Coc	edge.		
Address Signature	e's Name City	S	itate ZIP Coc	edge.		
Address Signature	e's Name City	S	itate ZIP Coc	edge.		
Address Signature	e's Name City	S	itate ZIP Coc	edge.		
Address Signature	e's Name City	S	itate ZIP Coc	edge.		
Address Signature	e's Name City	S	itate ZIP Coc	edge.		
Address Signature	e's Name City	S	itate ZIP Coc	edge.		

Check here if attachments.

ELEVATION CERTIFICATE				/IB No. 1660-0008 piration Date: November 30, 2022			
C575123 IMPORTANT: In these spaces, copy		OR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.Policy Number:23760 NAPOLI WAY23760 NAPOLI WAY							
City ESTERO	State FL	ZIP Code 34134		ompany NAIC Number			
SECTIO	N G – COMMUNITY II	NFORMATION (OPTIO	NAL)				
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 take engineer, or architect who is authoriz data in the Comments area below.)							
G2. A community official completed Secti or Zone AO.	on E for a building loca	ted in Zone A (without	a FEMA-is	sued or community-issued BFE)			
G3. The following information (Items G4–	G10) is provided for co	mmunity floodplain ma	nagement	purposes.			
G4. Permit Number	G5. Date Permit Issu	ied		e Certificate of ppliance/Occupancy Issued			
G7. This permit has been issued for:	New Construction	Substantial Improve	ement				
G8. Elevation of as-built lowest floor (including of the building:	g basement)	[e	et 🗌 mete	rs Datum			
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	[]fe	et 🗌 mete	rs Datum			
G10. Community's design flood elevation:							
Local Official's Name		Title					
Community Name		Telephone					
Signature		Date					
Comments (including type of equipment and loc	cation, per C2(e), if app	olicable)					
				~			
				Check here if attachments.			

1.0

Form Page 4 of 6

BUILDING PHOTOGRAPHS OMB No. 1660-0008 **ELEVATION CERTIFICATE** See Instructions for Item A6. Expiration Date: November 30, 2022 C575123 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. Policy Number: 23760 NAPOLI WAY City State ZIP Code Company NAIC Number ESTERO FL 34134

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 Caption FRONT VIEW 2/10/2023



Photo Two Caption SIDE VIEW 2/10/2023

Photo Two

FEMA Form 086-0-33 (12/19)

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

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

		0	,
C575123 IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suit 23760 NAPOLI WAY	Policy Number:		
City	Company NAIC Number		
ESTERO	FL	34134	

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 One Caption REAR VIEW 2/10/2023

Photo One



Photo Two Caption SIDE VIEW 2/10/2023

Photo Two

FEMA Form 086-0-33 (12/19)