# U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

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

# **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 INSUF	RANCE COMPANY USE	
A1. Building Owner's Name					Policy Num	ber:	
STANLEY KONGSLIEN 17-77027							
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number:						IAIC Number:	
6557 CONVERSE	6557 CONVERSE ST						
City				State		ZIP Code	
FORT MYERS				Florida		33919	
A3. Property Desci PARCEL ID- 22-45		d Block Numbers, Tax A.0250 NOT F		Number, Legal De NSTRUCTION, NO	• • •		
A4. Building Use (	e.g., Resident	ial, Non-Residential, <i>I</i>	Addition	, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longit	ude: Lat. 26	3°32'48.0"	Long	81°53'56.9"	Horizontal Datur	n: NAD ′	1927 × NAD 1983
A6. Attach at least	2 photograph	s of the building if the	Certific	ate is being used to	o obtain flood insur	ance.	
A7. Building Diagra	m Number	1A					
A8. For a building v	with a crawlsp	pace or enclosure(s):					
a) Square foot	age of crawls	pace or enclosure(s)		N/A sq ft			
b) Number of p	permanent flo	od openings in the cra	awlspac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade N/A
c) Total net are			-	q in		, ,	
d) Engineered	flood opening						
, ,			O				
A9. For a building v							
a) Square foot	a) Square footage of attached garageN/A sq ft						
b) Number of p	permanent flo	od openings in the att	ached g	garage within 1.0 fo	ot above adjacent	grade	
c) Total net area of flood openings in A9.bN/A sq in							
d) Engineered	d) Engineered flood openings?						
	SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Communi	ty Name & Co	ommunity Number		B2. County Name			B3. State
LEE COUNTY- 125	5124			LEE			Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E	IRM Panel ffective/ evised Date	B8. Flood Zone(s	(Zo	se Flood Elevation(s) ne AO, use Base od Depth)
12071C-0417	F	08/28/2008	08/28	3/2008	AE		7'
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 X 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	□ ОРА			170

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MPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite 6557 CONVERSE ST	Policy Number:			
City		Code	Company NAIC Number	
FORT MYERS	Florida 339	919		
SECTION C - BUILDI	ING ELEVATION INFORMA	TION (SURVEY RE	EQUIRED)	
C1. Building elevations are based on:	nstruction Drawings* 🔲 Bui	lding Under Constru	uction* 🗵 Finished Construction	
*A new Elevation Certificate will be required		-		
C2. Elevations – Zones A1–A30, AE, AH, A (with Complete Items C2.a–h below according to	the building diagram specified	in Item A7. In Puert		
Benchmark Utilized: E 254	Vertical Datum			
Indicate elevation datum used for the elevati	, ,	OW.		
☐ NGVD 1929 ☒ NAVD 1988 ☐ Datum used for building elevations must be	·	BFF	<del></del>	
Ç			Check the measurement used.	
<ul> <li>a) Top of bottom floor (including basement,</li> </ul>	crawlspace, or enclosure floor	•		
b) Top of the next higher floor		N/A	x feet _ meters	
c) Bottom of the lowest horizontal structural	member (V Zones only)	N/A	X feet	
d) Attached garage (top of slab)		N/A		
<ul> <li>e) Lowest elevation of machinery or equipm (Describe type of equipment and location</li> </ul>	nent servicing the building n in Comments)	<u> </u>	X feet	
f) Lowest adjacent (finished) grade next to	building (LAG)	6. <u>5</u>	X feet	
g) Highest adjacent (finished) grade next to	building (HAG)	<u>        6</u> . <u>8                                   </u>	x feet  meters	
<ul> <li>h) Lowest adjacent grade at lowest elevatio structural support</li> </ul>	n of deck or stairs, including	<u>    6</u> . <u>9</u>	X feet	
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	d by a licensed land surveyor?	⊠Yes □ No	Check here if attachments.	
Certifier's Name	License Number			
LELAND F. DySARD  Title	3859		PLS 3859	
P.L.S.			. 25 3333	
Company Name			Place	
FLA SURVEYS CORP.			Seal	
Address 3884 PROGRESS AVE., #104		/	Sland 7 Dg Shittere	
City NAPLES	State Florida	ZIP Code 34104	10/24/2017	
Signature  Signature  7 Dy Sard	Date 10/24/2017	Telephone (239) 403-1600	_	
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)				
GPS COORDINATES WERE TAKEN FROM GOOGLE EARTH. FLOOD ZONE DETERMINATION PROVIDED BY FLOOD INSIGHTS.THE EQUIPMENT USED IS GPS. THERE EXISTS A 0.2' (TWO TENTHS) PLUS OR MINUS PRECISION. THE REAL TIME NETWORKS USED ARE FDOT AND TOPCON. ITEM LISTED IN C2(e), IF ANY, IS THE AIR CONDITIONING UNIT. DATE OF FIELD WORK IS 10/24/2017.				

# **ELEVATION CERTIFICATE**

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MP	PORTANT: In these spaces, copy the corresp	onding information	from Section A.	FOR INSUR	RANCE COMPANY USE
	ilding Street Address (including Apt., Unit, Suite 57 CONVERSE ST	, and/or Bldg. No.) o	r P.O. Route and Box	No. Policy Numb	oer:
City	y DRT MYERS	State Florida	ZIP Code 33919	Company N	AIC Number
	SECTION E – BUILDING FOR Z		ORMATION (SURVE		)
con	r Zones AO and A (without BFE), complete Item mplete Sections A, B,and C. For Items E1–E4, u ter meters.				
E1.	Provide elevation information for the following the highest adjacent grade (HAG) and the low			whether the elevation	n is above or below
	a) Top of bottom floor (including basement, crawlspace, or enclosure) is      Top of bottom floor (including basement)	<u> </u>	× feet	meters above	e or
	<ul> <li>Top of bottom floor (including basement, crawlspace, or enclosure) is</li> </ul>		X feet	meters above	e or
E2.	. For Building Diagrams 6–9 with permanent flo the next higher floor (elevation C2.b in the diagrams) of the building is	od openings provide		_ ` _ `	s 1–2 of Instructions), e or ☐ below the HAG.
E3.	. Attached garage (top of slab) is		X feet	meters above	e or below the HAG.
E4.	. Top of platform of machinery and/or equipmer servicing the building is	nt	<b>X</b>   feet	☐ meters ☐ above	e or Delow the HAG.
E5.	. Zone AO only: If no flood depth number is ava floodplain management ordinance? Yes		he bottom floor elevate	ed in accordance with	
	SECTION F - PROPERTY	OWNER (OR OWNI	ER'S REPRESENTAT	IVE) CERTIFICATIO	N
The con	e property owner or owner's authorized represer mmunity-issued BFE) or Zone AO must sign her	ntative who complete e. The statements ir	es Sections A, B, and n Sections A, B, and E	E for Zone A (without are correct to the be	t a FEMA-issued or st of my knowledge.
Pro	operty Owner or Owner's Authorized Representa	ative's Name			
Add	dress		City	State	ZIP Code
Sig	gnature		Date	Telephone	
Coı	mments				
				☐ Che	ck here if attachments.

# **ELEVATION CERTIFICATE**

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IMPORTANT: In these spaces, copy the corre	ı	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Su	No. I	Policy Number:				
6557 CONVERSE ST						
City FORT MYERS	State Florida	ZIP Code 33919	(	Company NAIC Number		
		INFORMATION (OPTIO	L L			
		· · · · · · · · · · · · · · · · · · ·				
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete	r the community's floodpla e the applicable item(s) ar	ain mana nd sign b	ngement ordinance can complete below. Check the measurement		
G1. The information in Section C was take engineer, or architect who is authorized that in the Comments area below.)	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation					
G2. A community official completed Section Zone AO.	on E for a building loo	cated in Zone A (without a	a FEMA-	issued or community-issued BFE)		
G3. The following information (Items G4–	G10) is provided for (	community floodplain mar	nagemer	nt purposes.		
G4. Permit Number	G5. Date Permit Iss	sued		nte Certificate of mpliance/Occupancy Issued		
G7. This permit has been issued for:	] New Construction [	Substantial Improveme	ent			
G8. Elevation of as-built lowest floor (including of the building:	g basement) ——		_ feet [	meters Datum		
G9. BFE or (in Zone AO) depth of flooding at t	he building site:		_ feet [	meters		
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 loc	cation, per C2(e), if ap	pplicable)				
				Check here if attachments.		

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

See Instructions for Item A6.

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Building Street Address (including A 6557 CONVERSE ST	Policy Number:		
City	State	ZIP Code	Company NAIC Number
FORT MYERS	Florida	33919	

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 PHOTO DATE: 10/24/2017



Photo Two Caption LEFT SIDE VIEW PHOTO DATE: 10/24/2017

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

Continuation Page

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IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including a 6557 CONVERSE ST	Policy Number:		
City	State	ZIP Code	Company NAIC Number
FORT MYERS	Florida	33919	

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

Photo One Caption REAR VIEW PHOTO DATE: 10/24/2017



Photo Two

Photo Two Caption RIGHT SIDE VIEW PHOTO DATE: 10/24/2017

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

Continuation Page

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IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE		
Building Street Address (including A 6557 CONVERSE ST	Policy Number:		
City FORT MYERS	State Florida	ZIP Code 33919	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 One

Photo One Caption REAR VIEW PHOTO DATE: 10/24/2017

Photo Two