

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

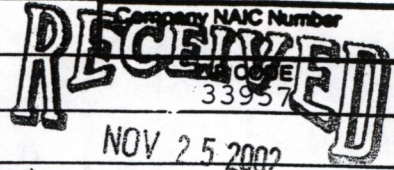
O.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

20656

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME Jack Chappell		For Insurance Company Use: Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 1238 Bay Drive		Company NAIC Number 33957	
CITY Sanibel Island	STATE Florida	 NOV 25 2002 BUILDING DEPT CITY OF SANIBEL	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 7, Sanibel Harbour Subd. in Sec 18 T46S R23E			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL			
LATITUDE/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

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER 120 402		B2. COUNTY NAME LEE		B3. STATE FLORIDA	
B4. MAP AND PANEL NUMBER 0004	B5. SUFFIX E	B6. FIRM INDEX DATE 4-16-79	B7. FIRM PANEL EFFECTIVE/REVISED DATE 9-29-96	B8. FLOOD ZONE(S) A-13	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 9.0

- B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe): _____
- B11. Indicate the elevation datum used for the BFE in 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: _____

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

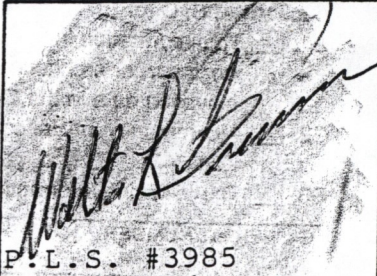
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.

C2. Building 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 represents the building, provide a sketch or photograph.)

C3. 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 C3a-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 Section B, 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.
 Datum NGVD 1928 Conversion/Comments _____

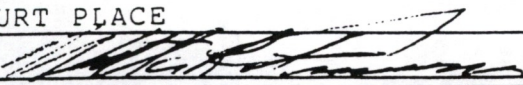
Elevation reference mark used S.S.I Does the elevation reference mark used appear on the FIRM? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	_____	5.90 ft(m)
<input type="checkbox"/> b) Top of next higher floor	_____	14.94 ft(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____	n/a ft(m)
<input type="checkbox"/> d) Attached garage (top of slab)	_____	5.90 ft(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	_____	9.10 ft(m)
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	_____	3.60 ft(m)
<input type="checkbox"/> g) Highest adjacent grade (HAG)	_____	5.80 ft(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	_____	9
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	_____	1440 sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

 P.L.S. #3985
 DATE November 12, 2002

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. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME WALTER L. FRASER	LICENSE NUMBER 3985 STATE OF FLORIDA
TITLE REGISTERED LAND SURVEYOR	COMPANY NAME SANIBEL SURVEYS, INC.
ADDRESS 60 COURT PLACE	CITY SANIBEL
SIGNATURE 	STATE FLORIDA
DATE November 12, 2002	ZIP CODE 33957
TELEPHONE	

1238 BAY DR
01-20656