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

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

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 ADRUBAL CABRERA	Policy Num	ber:		
A2. Building Street Address (including Apt., Unit, Suite, and/ Box No.17000 STRATFORD COURT	or Bldg. No.) or P.	O. Route and	Company N	IAIC Number:
City TOWN OF SOUTHWEST RANCHES	State Florida	Mas et et e	ZIP Code 33331	ahii) the monted
A3. Property Description (Lot and Block Numbers, Tax Parc LOT 15 OF THE PLAT ENTITLED LANDMARK RANCH EST			van El ecor San Diagon	OV704 je od
A4. Building Use (e.g., Residential, Non-Residential, Additio	n, Accessory, etc.)	RESIDENTIA		
A5. Latitude/Longitude: Lat. 26.04954 Long.	-80.37602	Horizontal Da	tum: NAD ′	1927 × NAD 1983
A6. Attach at least 2 photographs of the building if the Certif	icate is being used	I to obtain flood ins	surance.	of to motion to
A7. Building Diagram Number1B				Sp. 09Kled A. (b
A8. For a building with a crawlspace or enclosure(s):				www.minison.co
a) Square footage of crawlspace or enclosure(s)	(0.00 sq ft		
b) Number of permanent flood openings in the crawlspa	ce or enclosure(s)	within 1.0 foot abo	ove adjacent gra	ade 0
c) Total net area of flood openings in A8.b	0.00 sq in			
d) Engineered flood openings?				
A9. For a building with an attached garage:				
a) Square footage of attached garage	817.00 sq ft			
b) Number of permanent flood openings in the attached	garage within 1.0	foot above adjacer	nt grade 0	
c) Total net area of flood openings in A9.b	0.00 sq in		<u>-</u>	The Control of the Co
d) Engineered flood openings? Yes X No	0.84			1016 W 1006
d) Engineered flood openings:				931
SECTION B – FLOOD INSUR	ANCE RATE MA	P (FIRM) INFOR	MATION	
B1. NFIP Community Name & Community Number SOUTHWEST RANCHES, TOWN OF-120691	B2. County Nar BROWARD			B3. State Florida
Number Date Et	B7. FIRM Panel B8. Flood Zone(s)		. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)	
12011C0540H H 08-18-2014 08-18-2014 AH 5 & 6 FEET				
B10. Indicate the source of the Base Flood Elevation (BFE)		and the decide when the	tem B9:	
☐ FIS Profile 区 FIRM ☐ Community Determined ☐ Other/Source:				
B11. Indicate elevation datum used for BFE in Item B9:	NGVD 1929 ⊠ I	NAVD 1988 🗌	Other/Source:	
B12. Is the building located in a Coastal Barrier Resources S	System (CBRS) are	ea or Otherwise Pr	rotected Area (0	DPA)? ☐ Yes ⊠ No
Designation Date: N/A CBRS OPA				

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IMPORTANT: In these spaces, copy the corresponding information from Sec	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Rout 17000 STRATFORD COURT	Policy Number:	
City State ZIP C TOWN OF SOUTHWEST RANCHES Florida 3333		Company NAIC Number
SECTION C – BUILDING ELEVATION INFORMAT	ION (SURVEY RI	EQUIRED)
	ding Under Construng is complete. FE), AR, AR/A, AR/ In Item A7. In Puert NAVD 88 v. FE.	uction*
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	, , , , ,	N/A feet meters
SECTION D – SURVEYOR, ENGINEER, OR ARC	CHITECT CERTIF	CICATION
This certification is to be signed and sealed by a land surveyor, engineer, or arcl I certify that the information on this Certificate represents my best efforts to interstatement may be punishable by fine or imprisonment under 18 U.S. Code, Section Were latitude and longitude in Section A provided by a licensed land surveyor?	hitect authorized by pret the data availation 1001.	y law to certify elevation information. able. I understand that any false Check here if attachments.
Certifier's Name Scott M. Pirtle Title Professional Surveyor and Mapper Company Name Caulfield & Wheeler, Inc. Address 7900 Glades Road Suite 100 City Boca Raton License Number 5630 State Florida	ZIP Code 33434	Proposition of Participation of Particip
Signature Date 7.67. 20	Telephone (561) 392-1991	154
Copy all pages of this Elevation Certificate and all attachments for (1) community of Comments (including type of equipment and location, per C2(e), if applicable) A5. LATT/LONG OBTAINED USING HAND HELD GPS SYSTEM C2.e.= A/C PAD ELEV.	ficial, (2) insurance	agent/company, and (3) building owner.

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURA	NCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 17000 STRATFORD COURT			Policy Number	000 100 100 100 100 100 100 100 100 100	
City TOWN OF SOUTHWEST RANCHES	State Florida	ZIP Code 33331		Company NAI	C Number
SECTION E – BUILDING	ELEVATION INFO	RMATION (SUR		REQUIRED)	
FOR ZC	NE AO AND ZON	IE A (WITHOUT E	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 a the highest adjacent grade (HAG) and the lowea) Top of bottom floor (including basement,			ow whethe	r the elevation is	s above or below
crawlspace, or enclosure) is			meter	s 🗌 above o	r 🔲 below the HAG.
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet	meter	s 🗌 above o	r Delow the LAG.
E2. For Building Diagrams 6–9 with permanent floo the next higher floor (elevation C2.b in the diagrams) of the building is	d openings provide	d in Section A Item		_	–2 of Instructions),r ☐ below the HAG.
E3. Attached garage (top of slab) is		leet		_	r below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is					
E5. Zone AO only: If no flood depth number is avail			ated in ac	cordance with the	
floodplain management ordinance? Yes	☐ No ☐ Unkn	own. The local offi	icial must o	certify this inforr	mation in Section G.
SECTION F - PROPERTY C	WNER (OR OWNE	R'S REPRESENT	ATIVE) CE	RTIFICATION	
The property owner or owner's authorized represent community-issued BFE) or Zone AO must sign here	ative who complete . The statements in	s Sections A, B, ar Sections A, B, and	nd E for Zo I E are cor	ne A (without a rect to the best	FEMA-issued or of my knowledge.
Property Owner or Owner's Authorized Representat	ive's Name			y see hard more	
Address		City	Sta	ate	ZIP Code
Signature		Date	Те	lephone	
Comments					*
					and charge of the
ahyo office and case I				☐ Check	here if attachments.

Form Page 3 of 6

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
			Policy Number:	
City TOWN OF SOUTHWEST RANCHES	State ZIP C Florida 3333	227 533038	Company NAIC Number	
SECTIO	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–G10. In Puerto Rico only, enter meters. 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 or Zone AO.	on E for a building located in Zone <i>i</i>	A (without a FEMA	A-issued or community-issued BFE)	
G3. The following information (Items G4–	G10) is provided for community floo	odplain manageme	ent purposes.	
G4. Permit Number	G5. Date Permit Issued		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 of the building:	p basement)	feet	meters Datum	
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	feet	meters Datum	
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 applicable)			
			i d	
			☐ Check here if attachments.	

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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City	State	ZIP Code	Company NAIC Number
TOWN OF SOUTHWEST RANCHES	Florida	33331	a substitution for the substitution and the substitution of

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

Photo One Caption SOUTHWEST VIEW 7-17-20

Clear Photo One



Photo Two

Photo Two Caption EAST VIEW 7-17-20

Clear Photo Two

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

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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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. 17000 STRATFORD COURT			Policy Number:
City	State	ZIP Code	Company NAIC Number
TOWN OF SOUTHWEST RANCHES	Florida	33331	BARRELL TO SEE TO SEE TO SEE TO

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 Three

Photo Three Caption NORTHWEST VIEW 7-17-20

Clear Photo Three



Photo Four

Photo Four Caption SOUTHWEST VIEW 7-17-20

Clear Photo Four Form Page 6 of 6