DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency ELEVATION CERTIFICATE IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16

OMB Control Number: 1660-0008

Copy all pages	of this Eleva	ation Certificate and all attachments	s for (1) community	y official, (2)	insurance agent/c	ompany, and (3) building owner.	
SECTION A - PROPERTY INFORMATION			FOR INSURANCE COMPANY USE				
A1. Building Owner's Name NICIEZA FAUSTO & TENDERO ALYNE				Policy Number:			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 17500 SW 58 TH STREET				Company NAIC Number:			
City SOUTH WE	ST RANCI	HES	1176	State FL		Zip Code 33330	
A3. Property Des SEE ID #5040-3	scription (Lot 31-01-0591	and Block Numbers, Tax Parcel Nu BROWARD COUNTY PROPERT	mber, Legal Descri Y APPRAISER	iption, etc.)	la i		
		lential, Non-Residential, Addition, A					
li.		26.046564°N Long. 80.382248W			1927 🗆 NAD 19	83	
A6. Attach at lea	st 2 photogr	aphs of the building if the Certificate	is being used to ob	tain flood ins	urance.		
A7. Building Diag		and the same of th	and the second second				
		wlspace or enclosure(s):	A9. For a b	ouilding with a	an attached garage		
a) Square fo	otage of cra	wl space or enclosure(s) <u>N/A</u> sq ft	a) Square f	foot age of at	tached garage <u>NA</u>	sq ft	
or enclose	b) Number of permanent flood openings in the or enclosure(s) with in 1.0 foot above adjacent grade b) Number of permanent flood openings crawlspace in the attached garage within 1.0 foot above adjacent grade N/A above adjacent grade						
c) Total net a	area of flood	openings in A8.b N/A sq in	c) Total ne	et area of floo	d openings in A9.b	N/A sq in	
d) Engineere	d flood oper	nings? 🗌 Yes 🛛 No			enings? Yes	⊠ No	
B1. NFIP Comm	unity Name	SECTION B - FLOOD INS & Community Number	CONTROL SERVICE SERVIC	000000000000000000000000000000000000000	NFORMATION	B3. State	
	B1. NFIP Community Name & Community Number TOWN OF SOUTHWEST RANCHES / 120691 B2. County Nam BROWARD					FL State	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/Revised	l Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)	
12011C0520	Н	08-08-2014	08-18-20	014	АН	6.00	
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: NGVD1929 NAVD1988 Other/Source: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Pesignation Date: N/A CBRS OPA							
interphotocompletes/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/consoles/c	and and a contract of the state	SECTION C - BUILDING ELE	(CONTRACTOR AND CONTRACTOR AND	Additional Complete Contraction			
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction C2. 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 C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.							
*A new Elevatio	n Certificate	will be required when construction of	of the building is cor	mplete.			
Benchmark Utilized: #2366 Vertical Datum: NGVD 1929							
Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 NAVD 1988 Other/Source:							
Datum used for building elevations must be the same as that used for the BFE. Check the measurement used.							
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)) 10.05		meters		
b) Top of the next higher floor		N/A	[feet	meters			
c) Bottom of the lowest horizontal structural member (V zones only)			<u>N/A</u> .		meters		
d) Attached garage (top of slab)			<u>N/A</u> .	leet	meters		
e) Lowest elevation of machinery of equipment servicing the building (Describe type of equipment and location in Comments)				<u>9.72</u>	⊠ feet	meters	
f) Lowest adjacent (finished) grade next to building (LAG)			<u>8.90</u>	⊠ feet	meters		
g) Highest adjacent (finished) grade next to building (HAG)			<u>9.12</u>		meters		
	 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 			<u>N/A</u>	[] feet	☐ meters	

ELEVATION CERTIFICATE

OMB Control Number: 1660-0008 Expiration:11/30/2018

SECTIO	N D - SURVEYOR, EN	IGINEER OR	ARCHITECT	CERTIFICA	TION	THE PROPERTY OF THE PROPERTY O
This certification is to be signed and sealed	NOT NOT THE PARTY OF THE PARTY	Octobrock and response to the contract of	CONTRACTOR OF THE PROPERTY OF	ACCORDANGE AND ADDRESS OF THE PARTY OF THE P	THE RESIDENCE OF THE PARTY OF T	action I continue that the
information on this Certificate represents my punishable by fine or imprisonment under	best efforts to interpret	the data availab	ole. I understa	nd that any fal	se statement ma	ybe
particular by line of implicationers under				13	7-18-	1/2 1/2 2000 1/20
Check here if attachments.	Were latitude an provided by a lic	ensed land sur		0.	7-13-16-504	
O-EG-J- N	∑ Yes	No		- 10	a. Gal	141 15
Certifier's Name GINO FURLANO		License Nun 5044	nber	6	1-300	5/8 6
Title SURVEYOR & MAPPER	Company Name J.A.F SURVEY		ES INC		()/	100
Address 2492 WEST 72 ND STREET	City HIALEAH	State FL	ZipCode 33016	Nu	in fix	
Signature Man	Date 07-13-16	Teleph 786-4	none 16-1018			
					MANAGEM DE PROPERTO DE PROPERT	
Copy both sides of this Elevation Certificate Comments (including type of equipment an			agent/compa	ny, and (3) bu	ilding owner.	8 For Mary Consol
LAT & LONG OBTAINED FROM GOO TO A/C ELEV= 9.72 'SLAB LOCATED	LEFT SIDE OF THE	HOUSE	LEVATION	FO.SS. ELEV	ATION ON TH	EW GZ-8 APPLIES
Signature Signature		2 II Ale Davide			Date	07-13-16
SECTION E - BUILDING ELEVAT	ION INFORMATION (S	URVEY NOT F	REQUIRED) F	OR ZONE A	O AND ZONE	A (WITHOUT BEE)
For Zones AO and A (without BFE), comple Sections A, B and C. For Items E1 - E4, use	te Items E1 - E5. If the Ce natural grade, if availabl	ertificate is inter e. Check the m	nded to suppo easurement (ort a LOMA or I used. In Puerto	LOMR-F request o Rico only, ente	, complete r meters.
E.1 Provide elevation information for the for highest adjacent grade (HAG) and the lower	ollowing and check the appest adjacent grade (LAG)	propriate boxes	to show whe	ther the elevat	tion is above or b	pelow the
 Top of bottom floor (including b or enclosure) is 	asement, crawlspace	Management and and an artist of the second	feet	meters	above or	below the HAG
 b) Top of bottom floor (including b or enclosure) is 	asement, crawlspace		☐ feet	meters	above or	☐ below the HAG
E2. For Building Diagrams 6-9 with perm higher floor (elevation C2.b in the diagra	nanent flood openings parts) of the building is	rovided in Sect	ion A Items 8	3 and/or 9 (se ☐ meters	e pages 8-9 of I	nstructions), the next below the HAG
E3. Attached Garage (top of slab) is			☐ feet	meters	above or	below the HAG
E4. Top of platform of machinery and / o servicing the building is	r equipment	Manifestation State Control Control	feet	meters	above or	below the HAG
E5. Zone AO only: If no flood depth num	ber is available, is the to	op of the bottor	m floor elevat	ed in accorda	nce with the co	mmunity's floodplain
management ordinance. Yes No Unknown.	The local official must of	certify this infor	mation in Se	ction G.		Car Service S. S. Co.
SECTION F P	ROPERTY OWNER (O	R OWNER'S F	REPRESENT	ATIVE) CER	TIFICATION	
		Reprisonant and a trust part of a second plan in a	naementen kunten der ten ten statut	CARSON CONTRACTOR CONT		
The property owner or owner's authorized						
community-issued BFE) or Zone AO must Address		ILO III OCUIUIIS F		S COLLECT TO THE	***************************************	***************************************
Signature	City		State		ZIP C	ode
Comments	Date	11 2	Telepl	none		
Confinents						2 (47)
á						
e de la company						
% X						
					Che	ck here if attachments.

OMB Control Number: 1660-0008 Expiration:11/30/2018

SECTIO	N G - COMMUNITY IN	FORMATIO	N (OPTIONAL	Antonia and a second a second and a second a	**************************************
The local official who is authorized by law or ordinan C (or E), and G of this Elevation Certificate. Complete Puerto Rico only, enter meters.	ce to administer the cor	nmunity's flo	ood plain mana	agement ordinand	e can complete Sections A, B, led in Items G8- G10. In
G1. The information in Section C was taken from architect who is authorized by law to certify below.)	n other documentation to elevation information.	hat has beer Indicate the	n signed and s source and da	ealed by a license te of the elevation	d surveyor, engineer, or data in the Comments area
G2. A community official completed Section E for AO.					ty-issued BFE) or Zone
G3. The following information (Items G4-G10) is	provided for community	flood plain i	management	purposes.	e authoritetti sai salah inter est gili disabisa da benerala sayar ide
G4. Permit Number	G5.Date Permit Issued		G6.Date Certifi	cate of Complian	ce/Occupancy Issued
G7. This permit has been issued for: New Constr	uction 🔲 Substa	ntial Improve	ment		
G8. Elevation of as-built lowest floor (including bas the building:	ement) of	[] feet	t meters	Datum	
G9. BFE or (in Zone AO) depth of flooding at the site:	building	☐ feet	t 🔲 meters	Datum	
G10. Community's design flood elevation:	-	[] feet	t meters	Datum	
Local Official's Name		Γitle			
Community Name		Telephone			
Signature		Date			
Comments					
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7					
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					Check here if attachments.

BUILDING PHOTOGRAPHS

See instructions for Item A6

OMBControlNumber: 1660-0008 Expiration: 11/30/2018

IMPORTANT: In these spaces, copy the corres	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite 17500 SW 58 TH STREET	Policy Number:		
City SOUTHWEST RANCHES	State FL Zip Code 33331	Company NAIC Number:	

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.

FRONT VIEW:



REAR VIEW:



BUILDING PHOTOGRAPHS

Continuation Page

OMBControlNumber: 1660-0008 Expiration:11130/2018

IMPORTANT: In these spaces, copy the corresp	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, 17500 SW 58 TH STREET	Policy Number:		
City SOUTHWEST RANCHES	State FL	Zip Code 33331	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.

LEFT SIDE VIEW:



RIGHT SIDE VIEW:

