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.

C17675 SECTION A – PROPERTY INFORMATION					FOR INSURANCE COMPANY USE		
A1. Building Owner ANDRES & JONA		LUGA RESIDENCE				Policy Nun	nber:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 17611 SW 48TH STREET						Company I	NAIC Number:
City SOUTHWEST	State ZIP Code WEST RANCHES FL 33331						
A3. Property Desc A PORTION OF SI	ription (Lot ar ECTION 30, T	nd Block Numbers, Tax FOWNSHIP 50 SOUTH	∢Parce Ⅎ, RAN	l Number, Legal De GE 40 EAST	escription, etc.)		
A4. Building Use (e.g., Residen	tial, Non-Residential, A	Addition	, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longi	tude: Lat. <u>2</u> 0	6°03'35.25"N	Long{	80°23'01.22"W	Horizontal Datur	m: NA	D 1927 ⊠NAD 1983
A6. Attach at least	2 photograph	ns of the building if the	Certific	ate is being used to	o obtain flood insur	ance.	
A7. Building Diagra	am Number 1	I-A					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawls	space or enclosure(s)	N/A	sq ft			
b) Number of	permanent flo	ood openings in the cra	awlspac	e or enclosure(s) w	vithin 1.0 foot above	e adjacent g	rade N/A
c) Total net ar	ea of flood op	penings in A8.b N/A	8	sq in			
d) Engineered	flood openin	gs? □Yes ⊠	l _{No}				
A9. For a building v	with an attach	ed garage:					
a) Square foo	tage of attach	ed garage 600		sq ft			
b) Number of	permanent flo	ood openings in the atta	ached (garage within 1.0 fo	oot above adjacent	grade 0	
c) Total net ar	ea of flood or	penings in A9.b 0		sq in			
d) Engineered	flood openin	gs? □Yes ⊠	₫No	•	*		
		CTION B – FLOOD IN	ISIIDA	NCE DATE MAD	/EIDM\ INIEODM/	ATION	
B1. NFIP Commun			13017	B2. County Name	·	TION	B3. State
	TOWN OF SOUTHWEST RANCHES & 120691		BROWARD COUNTY		FL		
B4. Map/Panel Number 12086C0459	B5. Suffix H	B6. FIRM Index Date 08/18/2014	E R	IRM Panel ffective/ evised Date	B8. Flood Zone(s	(Zc	se Flood Elevation(s) one AO, use Base ood Depth)
			08/1	8/2014		6	
	ource of the E	Base Flood Elevation (I □Community Dete				n B9:	
		sed for BFE in Item B9		-		Other/Sour	ce:
R12 Is the building	a located in a	Coastal Barrier Resou	mana Ci	ustom (CDDC) area	on Othomuica Duct	antad Auga (
Designation [or Otherwise Prote	ected Area (OPA)? □Yes ⊠No
Designation L	Jale. <u>N/A</u>		□cbr:	s Dopa			

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C17675 IMPORTANT: In these spaces, copy the corres	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or 17611 SW 48TH STREET	Policy Number:		
City Stat SOUTHWEST RANCHES FL		P Code 3331	Company NAIC Number
SECTION C – BUILDING ELE	VATION INFORM	ATION (SURVEY RE	EQUIRED)
	ion Drawings* Instruction of the buil VE, V1–V30, V (with ing diagram specifie Vertical Datum: ems a) through h) be r/Source: e as that used for the ace, or enclosure floor r (V Zones only) icing the building ints)	Building Under Cons Iding is complete. BFE), AR, AR/A, AR d in Item A7. In Puert NAVD88 Blow. BFE.	truction* ⊠Finished Construction /AE, AR/A1–A30, AR/AH, AR/AO.
 g) Highest adjacent (finished) grade next to building h) Lowest adjacent grade at lowest elevation of dec structural support 	(HAG)	8.70 <u>N/A</u>	⊠feet ☐meters ⊠feet ☐meters
SECTION D – SURVEYOR,	ENGINEER, OR AI	RCHITECT CERTIF	ICATION
This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment un Were latitude and longitude in Section A provided by a lice	my best efforts to ind der 18 U.S. Code, S	terpret the data availa ection 1001.	able. I understand that any false
Certifier's Name Kenneth J. Osborne	License Number 6415		ETH JOSB
Title Registered Professional Surveyor			W.O. No. 6415
Company Name COMPASS			tell Store
Address 6250 N Military Trail #102			STATE OF 5
City West Palm Beach	State FL	ZIP Code 33407	ONAL ORIDAOR
Signature Tal Miloue	Date	Telephone	
Copy all pages of this Elevation Certificate and all attachme	08/04/2021 nts for (1) community	(561)640-4800 official, (2) insurance	agent/company, and (3) building owner.
Comments (including type of equipment and location, per LAT AND LONG PROVIDED BY GOOGLE E. C2:E= A/C EQUIP PAD – (NORTHWESTERLY GARAGE SQ FOOTAGE ROUNDED TO NEA	C2(e), if applicable) ARTH / SIDE OF BUII		

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C17675 IMPORTANT: In these spaces, copy the corresponding information	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. F 17611 SW 48TH STREET	Route and Box No.	Policy Number:				
	ZIP Code 33331	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 complete Sections A, B,and C. For Items E1–E4, use natural grade, if available enter meters.	s intended to support a le. Check the measure	LOMA or LOMR-F request, ment used. In Puerto Rico only,				
E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement,						
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		above or □below the HAG				
crawlspace, or enclosure) is		above or □below the LAG				
E2. For Building Diagrams 6–9 with permanent flood openings provided in Se the next higher floor (elevation C2.b in	ection A Items 8 and/or	9 (see pages 1–2 of Instructions),				
the diagrams) of the building is	☐feet ☐meters ☐above or ☐below the HAG					
E3. Attached garage (top of slab) is	☐feet ☐meters ☐	above or □below the HAG				
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 floodplain management ordinance? Yes No Unknown. The	om floor elevated in ac local official must certi	cordance with the community's ify this information in Section G.				
SECTION F – PROPERTY OWNER (OR OWNER'S RE	EPRESENTATIVE) CE	RTIFICATION				
The property owner or owner's authorized representative who completes Section community-issued BFE) or Zone AO must sign here. The statements in Section	ions A, B, and E for Zo	ne A (without a FEMA-issued or rect to the best of my knowledge.				
Property Owner or Owner's Authorized Representative's Name						
Address City	Sta	ate ZIP Code				
Signature Date	Te	lephone				
Comments						

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C17675 IMPORTANT: In these spaces, copy	on A.	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, St 17611 SW 48TH STREET	No.	Policy Number:			
City SOUTHWEST RANCHES	State FL	ZIP Code 33331	(Company NAIC Number	
SECTIO	ON G - COMMUNITY	INFORMATION (OPTIO	DNAL)		
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	the community's floodplethe applicable item(s) a	lain mana and sign b	agement ordinance can complete pelow. Check the measurement	
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 Zone AO.	on E for a building loc	ated in Zone A (without	a FEMA-	issued or community-issued BFE)	
G3. The following information (Items G4–	G10) is provided for c	ommunity floodplain ma	anagemer	nt purposes.	
G4. Permit Number	G5. Date Permit Iss	sued		ate Certificate of empliance/Occupancy Issued	
G7. This permit has been issued for:	☐New Construction	n	ement		
G8. Elevation of as-built lowest floor (including of the building:	•	fe	et □met	ters Datum	
G9. BFE or (in Zone AO) depth of flooding at t	he building site:		et 🗌 met	ters Datum	
G10. Community's design flood elevation:			et 🗌 met	ters 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 Apt., 17611 SW 48TH STREET			
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.



Photo One

Photo One Caption FRONT VIEW - 07/27/2021



Photo Two

Photo Two Caption SIDE VIEW - 07/27/2021

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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C17675 IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit 17611 SW 48TH 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.



Photo One

Photo One Caption REAR VIEW - 07/27/2021

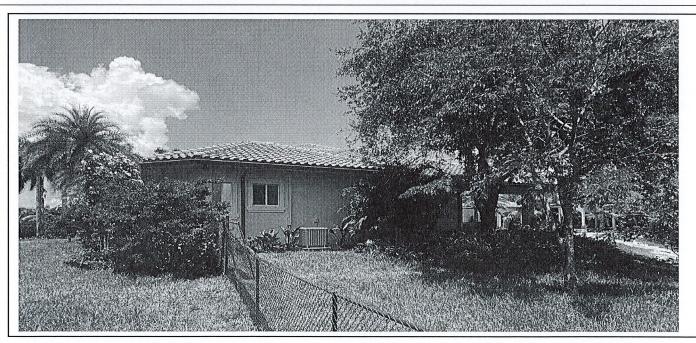


Photo Two

Photo Two Caption SIDE VIEW - 07/27/2021