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

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

2101.0143EC

ELEVATION CERTIFICATEImportant: 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 INSUE	FOR INSURANCE COMPANY USE		
A1. Building Owner's Name	Policy Num			
ORLANDO RODRIGUEZ AND CATHERINE CABRERA				
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Company N	IAIC Number:		
4520 SOUTHWEST 133RD AVENUE				
City	ZIP Code			
SOUTHWEST RANCHES FLORIDA	33330			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc Lot 18, SELIGMAN RANCHES ACCORDING TO THE PLAT THEREOF, AS RECORDED IN PLAT BOOK 96, PAGE 1 COUNTY, FLORIDA.	,	ORDS OF BROWARD		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL				
A5. Latitude/Longitude: Lat. 25°43'30.80" N Long80°24'35.62" W Horizontal	Datum: NAD	1927 🛛 NAD 1983		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood	insurance.			
A7. Building Diagram Number _{1A}				
A8. For a building with a crawlspace or enclosure(s):				
a) Square footage of crawlspace or enclosure(s) N/A sq ft				
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot	above adjacent or	ade NVA		
c) Total net area of flood openings in A8.b _{N/A} sq in	abovo aajaooni gi	N/A		
d) Engineered flood openings?				
A9. For a building with an attached garage:				
a) Square footage of attached garage 478 sq ft				
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0				
c) Total net area of flood openings in A9.b o sq in				
d) Engineered flood openings?				
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION				
B1. NFIP Community Name & Community Number B2. County Name		B3. State		
TOWN OF SOUTHWEST RANCHES 120691 BROWARD		FLORIDA		
B4. Map/Panel B5. Suffix B6. FIRM Index B7. FIRM Panel B8. Flood 2	(one(s) B9. Ba	se Flood Elevation(s)		
Number Date Effective/ Revised Date	(Zc	ne AO, use Base of od Depth)		
		ou _ op,		
12011C - 0540 H 8/18/2014 08/18/2014 AH	6.0			
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)? \(\subseteq \) Yes \(\subseteq \) No				
Designation Date: N/A CBRS OPA				

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Expiration Date: November 30, 2022 IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE Policy Number: Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4520 SOUTHWEST 133RD AVENUE Company NAIC Number City State ZIP Code 33330 SOUTHWEST RANCHES **FLORIDA** SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: Construction Drawings* Building Under Construction* X Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. 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. Benchmark Utilized: P-420; ELEVATION; 11.5 Vertical Datum: NGVD 1929 Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 💢 NAVD 1988 ☐ Other/Source: N/A 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) _______7. 11____ x feet meters N/A._____ b) Top of the next higher floor x feet meters N/A._____ c) Bottom of the lowest horizontal structural member (V Zones only) x feet meters 6. 57 x feet d) Attached garage (top of slab) meters e) Lowest elevation of machinery or equipment servicing the building 6.85 x feet l meters (Describe type of equipment and location in Comments) <u>5</u>. 65 f) Lowest adjacent (finished) grade next to building (LAG) x feet meters g) Highest adjacent (finished) grade next to building (HAG) 5.75 x feet meters N/A. ____ x feet h) Lowest adjacent grade at lowest elevation of deck or stairs, including meters structural support 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. Check here if attachments. License Number Certifier's Name ARTURO MENDIGUTIA 5844 Title PROFESSIONAL SURVEYOR AND MAPPER Company Name urveyor and ho. LANDMARK SURVEYING & ASSOCIATES, INC Address 1435 S.W. 87TH AVENUE, SUITE 201 City State ZIP Code 33174 MIAMI **FLORIDA** Signature Date Telephone h/22/2021 1/22/2021 P: (305)556-4002 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) NOTE: COORDINATES OBTAINED VIA GOOGLE EARTH. NOTE: C2.E = AC UNIT PAD. (LOCATED TO THE REAR SIDE OF THE STRUCTURE.)
NOTE: THIS ELEVATION CERTIFICATE IS ONLY VALID FOR THE PERSON OR PERSONS NAMED ON THIS CERTIFICATE. THIS CERTIFICATE IS FOR FLOOD INSURANCE PURPOSES ONLY. THE INFORMATION ON THIS CERTIFICATE SHOULD NOT BE USED FOR CONSTRUCTION OR PLANNING. **CENTERLINE ROAD ELEVATION: 5.30**

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ELEVATION CERTIFICATE

2101.0143EC

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

IMPORTANT: In those spaces copy the corresponding information from Section A			EOD INICUDANA	CE COMPANY LICE
IMPORTANT: In these spaces, copy the corresponding information from Section A. Ruilding Street Address (including Ant. Unit. Suite, and/or Ridg, No.) or P.O. Route and Roy No.			CE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.		. Folicy Number:		
4520 SOUTHWEST 133RD AVENUE	04-4-	ZID Code	Company NAIC	Nivershou
City	State	ZIP Code	Company NAIC	Number
SOUTHWEST RANCHES	FLORIDA	33330	LOT DECLUDED)	
SECTION E – BUILDING FOR ZO		E A (WITHOUT BFE)	NOT REQUIRED)	
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 lower a) Top of bottom floor (including basement,	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).			
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		🔀 feet 🗌 n		A STATE OF
crawlspace, or enclosure) is	N/A	X feet n	neters	below the LAG.
E2. For Building Diagrams 6–9 with permanent floothe the next higher floor (elevation C2.b in the diagrams) of the building is		d in Section A Items 8 ar		2 of Instructions),
E3. Attached garage (top of slab) is				below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is	L		neters above or	□ helow the HAC
E5. Zone AO only: If no flood depth number is avai	lable, is the top of th		in accordance with the	e community's
SECTION F - PROPERTY O	OWNER (OR OWNE	R'S REPRESENTATIVI	E) CERTIFICATION	08/03/04/
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.				
Property Owner or Owner's Authorized Representation	tive's Name			
Address	See See See See	City	State	ZIP Code
Signature		Date	Telephone	
Comments				
			Chack I	nere if attachments

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corr			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, S	uite, and/or Bldg. No.) or P.O. R	Route and Box No.	Policy Number:
4520 SOUTHWEST 133RD AVENUE			
City	State Z	IP Code	Company NAIC Number
SOUTHWEST RANCHES	FLORIDA 3	3330	
	ON G - COMMUNITY INFORMA		
		· · · · · · · · · · · · · · · · · · ·	
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.	ion E for a building located in Zo	one A (without a FEM	A-issued or community-issued BFE)
G3. The following information (Items G4-	-G10) is provided for community	∕ floodplain managem	ent purposes.
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	New Construction Substan	ntial Improvement	
G8. Elevation of as-built lowest floor (including basement) of the building: feet meters			meters Datum
G9. BFE or (in Zone AO) depth of flooding at the building site:			meters Datum
G10. Community's design flood elevation:		feet	meters Datum
Local Official's Name	Title		
Community Name	Teleph	none	
Signature	Date		
Comments (including type of equipment and loc	cation, per C2(e), if applicable)		
			10.00
			· · · · · · · · · · · · · · · · · · ·
			Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

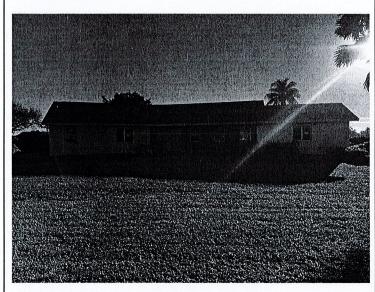
See Instructions for Item A6. 2101.0143EC

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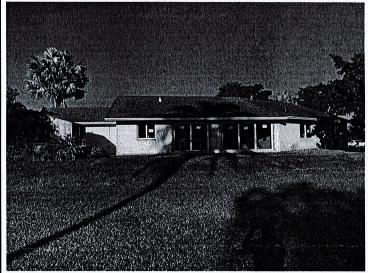
Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			FOR INSURANCE COMPANY USE Policy Number:	
City	State	ZIP Code	Company NAIC Number	
SOUTHWEST RANCHES	FLORIDA	33330		

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.





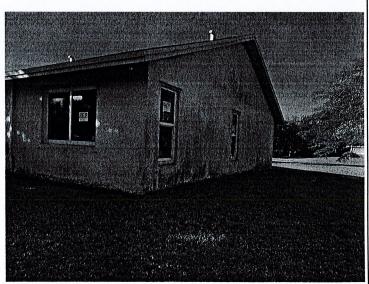


Rear View

Front View Date: 1/22/2021 Rear View Date: 1/22/2021



Right Side View



Left Side View

Right Side View: 1/22/2021 Left Side View: 1/22/2021

BUILDING PHOTOGRAPHS

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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, and/or Bldg. No.) or P.O. Route and Box No.			Policy Number:	
4520 SOUTHWEST 133RD AVENUE		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
City	State	ZIP Code	Company NAIC Number	
SOUTHWEST RANCHES	FLORIDA	33330		
If submitting more photographs than will with: date taken; "Front View" and "Re photographs must show the foundation with	ar View"; and, if requir	ed, "Right Side View" and "	Left Side View," When applicable,	
Photo One		Photo Two		
		T		
Photo Three			Photo Four	