## U.S. DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency National Flood Insurance Program

OMB No: 1660-008

Expiration Date: November 30, 2018

# **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

	ON A – PROPERTY INF		Contract of the Contract of th	SURANCE COMPANY USE		
A1. Building Owner's Name (Note: Not Valid to use for any other person or entity).  PAUL & ASHLEIGH ORTENZO			Policy	Policy Number:		
A2. Building Street Address (Including Apt., Unit, Suite, and/or Bldg. No. or P.O. Route and Box No.				Company NAIC Number:		
5120 SW 201 TERRACE			n er er skilb og e			
City SOUTHWEST RANCHES						
A3. Property Description (Lot ar Lot 5, Block 4, of "SELIGMAN Public Records of Broward Cou	-DURANGO WEST" ac			ook 98 at Page 48 of the		
A4. Building Use (e.g., Residentia	l, Non-Residential, Addi	ition, Accessory, etc.) RESIDE	NTIAL			
A5. Latitude/Longitude: Lat. 26.0	<u>55016°N</u> Long. <u>80.4162</u>	75°W Horizontal Datum:	NAD 1927 🛛 NAD	1983		
A6. Attach at least 2 photograph	s of the building if the C	Certificate is being used to ob	tain flood insurance.	o Militar on any a spilotope o		
A7. Building Diagram Number: 11				all all gardens in		
A8. For a building with a crawlsp	ace of enclosure(s):			ertor ni kritisë Herresonon on 18		
a) Square footage of crawlspa	ce or enclosure(s) <u>N/A</u> s	sq. ft.		r = 1.5 to 6 margors for mr. A. L.		
b) Number of permanent floo	d openings in the crawls	space or enclosure(s) within	1.0 foot above adjace	nt grade <u>N/A</u>		
c) Total net area of flood ope	nings in A8.b <u>N/A</u> sq. in.			The second secon		
d) Engineered flood openings	? ☐ Yes ⊠ No					
A9. For a building with an attach	ed garage:			in the second of		
a) Square footage of attached	garage <u>400</u> sq. ft.					
b) Number of permanent floo	d openings in the attach	ned garage within 1.0 foot ab	ove adjacent grade <u>N</u>	<u>/A</u>		
c) Total net area of flood ope	nings in A9.b <u>N/A</u> sq. in.			too ili dalla la		
d) Engineered flood openings?						
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Co TOWN OF SOUTHWEST RANCHE		B2. County Name BROWARD	314135	B3. State FLORIDA		
B4. Map/Panel B5. Suff		B7. FIRM Panel	B8. Flood Zone(s)	B9. Base Flood Elevation(s)		
Number	Date	Effective/ Revised Date		(Zone AO, use Base Flood Depth)		
12011 C 0520 H	08/14/2014	08/14/2014	АН	+5.0'		
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 NAVD 1988 Other/Source:						
B12. Is the building located in a	Coastal Barrier Resource	es System (CBRS) area or Oth	erwise Protected Are	a (OPA)? 🗌 Yes 🛛 No		
Designation Date:	☐ CBRS ☐ OPA	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Private residing	The second secon		

## **ELEVATION CERTIFICATE**

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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. 5120 SW 201 TERRACE  Policy Number:						
City State Zip Code Co				Company NAIC Number:		
SOUTHWEST RANCHES	FLORIDA	33332			The second secon	
SECTION C – BUILDIN	G ELEVATION INFO	RMATION (SURVEY I	REQUIRED)	in materials	ecwin research	
C1. Building Elevations are Based on: Construct  * A new Elevation Certificate will be required who	I Salar the way to the salar to the	Building Under Consider Building Under Consider Building is complete			Construction	
C2. Elevations – Zones A1 - A30, AE, AH, A (with BFE) Complete Items C2.a – h below according to the	, VE V1 – V30, V (wit	th BFE), AR, AR/A, AR/A	AE, AR/A1 –		1753	
Benchmark Utilized: BROWARD COUNTY BM #23	35 Vertical Datum:	+6.167' (NGVD29)				
Indicate elevation datum used for the elevations  NGVD 1929 NAVD 1988 C	in Items a) through Other/Source:	h) below.				
Datum used for building elevations must be the		or the BFE.		Check the mea	asurement used.	
a) Top of Bottom Floor (including basement, cra		to back the second of the second of the	3.90	⊠ feet	meters	
b) Top of Next Higher Floor	A 100		<u>N/A</u>	☐ feet	meters	
c) Bottom of the lowest horizontal structural m	ember (V Zones only		N/A	☐ feet	meters	
d) Attached garage (top of slab)		The second second	N/A	☐ feet	meters	
e) Lowest elevation of machinery or equipment	servicing the buildi	ng		ave <u>la</u> rent ŝ		
(Describe type of equipment and location in	Comments)	1	3.3 <u>6</u>		meters	
f) Lowest adjacent (finished) grade next to buil			7.8		☐ meters	
g) Highest adjacent (finished) grade next to buil			8.0		☐ meters	
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support			N/A	feet	meters	
SECTION D – SURVE	YOR, ENGINEER, C	OR ARCHITECT CERTIF	ICATION		PMS APPLICATION	
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.						
Were latitude and longitude in Section A provided by a l	censed land surveyor	r? 🛛 Yes 🗌 No		Check her	e if attachments.	
Certifier's Name:	License Number:	A . 2.47 d				
JACOB GOMIS 6231				$\sim M/\sim$		
Title:				MV		
PROFESSIONAL SURVEYOR & MAPPER  Company Name:  Jacob Gomis, PSM						
ROYAL POINT LAND SURVEYORS, INC.					ate of Florida	
Address:					it the signature and	
6175 NW 153rd. STREET – SUITE 321	State:	Zip Code:			eyor & Mapper"	
MIAMI LAKES	FLORIDA	33014				
Signature:	Date:	Telephone:	is it.	. I lotopo		
	03/07/2017	305-822-6062			· Providence L. L	
(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.						
LATITUDE & LONGITUDE OBTAINED FROM GOOGLE MAPS, CROWN OF ROAD ELEVATION IS +5.65'. ELEVATION ON ITEM C2-e APPLIES TO A/C SLAB ON RIGHT SIDE OF PROPERTY.						

## **ELEVATION CERTIFICATE**

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Building Street Address (Including Apt., Unit, Sulte, and/or Bldg. No. or P.O. Route and Box No.  SIZLO SW 201 TERRACE  City  SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED)  FOR ZONE AO AND ZONE A (WITHOUT BEE)  For ZONE AO AND ZONE A (WITHOUT BEE)  For ZONE AO AND ZONE A (WITHOUT BEE)  For ZONE AO and A (Without BFE), complete Items E1-E5, if the Certificate is intended to support a LOMA and 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 and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (MAG) and the lowest adjacent grade (IAG).  a) Top of bottom floor (including basement, crawfspace, or enclosure);  b) Top of bottom floor (including basement, crawfspace, or enclosure);  c) Feet   meters   above or   below the IAG   bottom floor (including basement), crawfspace, or enclosure);  b) Top of bottom floor (including basement), crawfspace, or enclosure);  b) Top of bottom floor (including basement), crawfspace, or enclosure);  b) Top of bottom floor (including basement), crawfspace, or enclosure);  c) Feet   meters   above or   below the IAG   bottom floor (including basement), crawfspace, or enclosure);  b) Top of bottom floor (including basement), crawfspace, or enclosure);  c) Feet   meters   above or   below the IAG   bottom floor (including basement), crawfspace, or enclosure);  b) Top of bottom floor (including basement), crawfspace, or enclosure);  c) Feet   meters   above or   below the IAG   below the IAG   bottom floor (including basement), crawfspace, or enclosure);  b) Top of platform of machinery and/or equipment   feet   meters   above or   below the IAG   below the IAG   bottom floor (including basement), crawfspace, or enclosure);  c) For of platform of machinery and/or equipment   feet   meters   above or   below the IAG   below the IAG   below the IAG   botto	IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE				
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 £1-£5. If the Certificate is intended to support a LOMA and or LOMR-F request, complete Sections A, B, and C. For Items £1-£4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.  £1. 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, crawlspace, or enclosure) is  b) Top of bottom floor (including basement, drawlspace, or enclosure) is  c) feet meters bove or below the HAG enclosure) is  E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1-2 of instructions), the next higher floor (elevation C2.b in the diagrams) of the building is  E3. Attached Garage (top of slab) feet meters bove or below the HAG error portion of machinery and/or equipment feet meters bove or below the HAG eservicing the building is  E4. Top of platform of machinery and/or equipment feet meters bove or below the HAG eservicing the building is  E5. Zone AO only: If no flood depth number is available, is the top of the floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section Goodplain management ordinance? Yes No Unknown. The local official must certify this information in Section Goodplain management ordinance? Yes No Unknown. The local official must certify this information in Section Goodplain management ordinance? Such 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 a		or Bldg. No. or P.O. F	oute and Box No.	Policy Number:		
FOR ZONE AO AND ZONE A (WITHOUT BFE)  For Zones AO and A (Without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA and 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 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, crawlspace, or enclosure) is  E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1-2 of instructions), the next higher floor (elevation C2.b in the diagrams) of the building is  E3. Attached Garage (top of slab)  E4. Top of platform of machinery and/or equipment servicing the building is  E5. Zone AO only: If no flood depth number is available, is the top of the floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section 6 SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION  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 Representative's Name:  Address  City State Zip Code  Signature  Date				Company NAIC Number:		
For Zones AO and A (Without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA and 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 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, crawlspace, or enclosure) is  c) Top of bottom floor (including basement, grade) is the property of the property of the property owner or owner's authorized representative's Name:  E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1-2 of instructions), the next higher floor (elevation C2.b in the diagrams) of the building is  E3. Attached Garage (top of slab)				REQUIRED)		
SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION  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 Representative's Name:  Address  City  State  Zip Code  Signature  Date  Telephone	For Zones AO and A (Without BFE), complete Items E1-loomplete Sections A, B, and C. For Items E1-E4, use nate enter meters.  E1. Provide elevation information for the following and the highest adjacent grade (HAG) and the lowest ad a) Top of bottom floor (including basement, crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is E2. For Building Diagrams 6-9 with permanent flood of the next higher floor (elevation C2.b in the diagrams) of the building is E3. Attached Garage (top of slab) E4. Top of platform of machinery and/or equipment servicing the building is	E5. If the Certificate is cural grade, if available check the appropriation of the control of th	s intended to suppo e. Check the measure te boxes to show whe feet meters feet meters ection A Items 8 and feet meters feet meters feet meters	above or below the HAG above or below below the HAG above or below the HAG		
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 Representative's Name:  Address City State Zip Code  Signature Date Telephone	floodplain management ordinance? Yes	No Unknown	The local official r	must certify this information in Section G.		
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 Representative's Name:  Address City State Zip Code  Signature Date Telephone	SECTION F – PROPERTY OW	NER (OR OWNER'S F	EPRESENTATIVE)	CERTIFICATION		
Signature Date Telephone	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.					
	Address	City	State	Zip Code		
Comments	Signature	Date	Telephone			
Check here if attachment	Comments			☐ Check here if attachments		

## **ELEVATION CERTIFICATE**

OMB No: 1660-008

IMPORTANT: In these spaces, copy the corresponding inform	FOR INSURANCE COMPANY USE				
Building Street Address (Including Apt., Unit, Suite, and/or BI 5120 SW 201 TERRACE	No. Policy Number:				
City Sta SOUTHWEST RANCHES FL	ate ORIDA	Zip Code 33332	Company NAIC Number:		
SECTION G – COMM	UNITY INFO	RMATION (OPT	IONAL)		
The local official who is authorized by law or ordinance to ad Sections A, B, C (or E), and G of this Elevation Certificate. Cou 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 E for a built or Zone AO.	lding located	in Zone A (witho	out a FEMA-issued or community issued BFE)		
G3. The following information (Items G4 – G10) is provi	ided for comr	munity floodplair	n management purposes.		
G4. Permit Number	G5. Date P	ermit Issued	G6. Date Certificate of Compliance/Occupancy Issued		
G7. This Permit has been issued for:	struction [	Substantial In	nrovement		
G8. Elevation of as-built lowest floor (including basement) of the building:			feet meters Datum		
G9. BFE or (Zone AO) depth of flooding at the building site:			feet meters Datum		
G10. Community's design flood elevation:		The Williams	feet meters Datum		
Local Official's Name	Title	2	<u> </u>		
Community Name	Tele	phone			
Signature	Date	е			
Comments (including type of equipment and location, per C2	(e), if applica	ble)			
			☐ Check here if attachments		

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

See Instructions for Item A6

OMB No: 1660-008

Expiration Date: November 30, 2018

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. 5120 SW 201 TERRACE			FOR INSURANCE COMPANY USE		
			Policy Number:		
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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 Caption: FRONT VIEW



Photo Three Caption: REAR VIEW



Photo Two Caption: LEFT SIDE VIEW

Photo Four Caption: RIGHT SIDE VIEW

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

See Instructions for Item A6

OMB No: 1660-008

FLORIDA  If Submitting more photographs that 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, "flight 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 Caption: TYPICAL FLOOD VENT IN GARBAGE ROOM  Photo Three Caption:	IMPORTANT: In these spaces, copy the corresponding information	FOR INSURANCE COMPANY USE	
FLORIDA    Flow   Flow	Building Street Address (Including Apt., Unit, Suite, and/or Bldg. N	Policy Number:	
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 Caption: TYPICAL FLOOD VENT IN GARBAGE ROOM  Photo Three Caption:			Company NAIC Number:
	with: date taken; "Front view" and "Rear view"; and, if req	uired, "Right Side View" and	d "Left Side View." When applicable,
	Photo One Continue TVDICAL FLOOD WENT IN CARDACE ROOM	Dhata Thuas Couting	
These Two Continu	Photo One Caption: TYPICAL FLOOD VENT IN GARBAGE ROOM	Photo Three Caption:	
Photo Two Contion:			
	Photo Two Caption:	Photo Four Caption:	