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

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

Copy all pages of this E			-		I, (2) insurance ago	OR INSURA	ANCE COMPANY USE
SECTION A – PROPERTY INFORMATION						olicy Numb	
A1. Building Owner's Name JAMIE LEIGH WYNKOOP							
						Company NA	AIC Number:
5720 SW 166th AVENUE							
City State ZIP Co						33031	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)							
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential							
	A5. Latitude/Longitude: Lat. 26°02'49"N Long. 80°22'09"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 1B							
	A8. For a building with a crawlspace or enclosure(s):						
		pace or enclosure(s)		sq ft			. 0
		od openings in the crav		e or enclosure(s) wi	thin 1.0 foot above	adjacent gra	ide U
c) Total net are	a of flood ope	enings in A8.b 0	so	q in			
d) Engineered flood openings?							
A9. For a building with an attached garage:							
a) Square footage of attached garage 360 sq ft							
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0							
c) Total net are	a of flood op	enings in A9.b 0		sq in			
d) Engineered flood openings?							
	SEC	CTION B - FLOOD IN	SURA	NCE RATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Community Name & Community Number B2. County Name							B3. State
Town of Southwest Ranches 120691 BROWARD							FLORIDA
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Et	IRM Panel fective/ evised Date	B8. Flood Zone(s)	(Zo	se Flood Elevation(s) ne AO, use Base od Depth)
120110540H	Н	08/18/2014	08/1	8/2014	AH		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 Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🔳 No							
Designation Date: na							
					And the second s		
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## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE			Expiration Date: November 30, 2018					
IMPORTANT: In these spaces, copy the corresp	FOR INSURANCE COMPANY USE							
Building Street Address (including Apt., Unit, Suite	. Policy Number:							
5720 SW 166th AVENUE								
City		Code	Company NAIC Number					
SOUTHWEST RANCHES	nesinga pipatepipatingan podo see mata politinga etimonepana panyan, mad, maan maaanna	3031						
SECTION C - BUILDIN	IG ELEVATION INFORMA	TION (SURVEY	( REQUIRED)					
C1. Building elevations are based on: Const	ruction Drawings*	ing Under Const	truction* 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: Broward Co. BM 3790, Elev= 7.56 ft Vertical Datum: NGVD 1929								
Indicate elevation datum used for the elevati	and an experience of the angle							
NGVD 1929 NAVD 1988		Ow.						
Datum used for building elevations must be	***************************************	BFE.						
		0 /	Check the measurement used.					
<ul> <li>a) Top of bottom floor (including basement,</li> </ul>	crawlspace, or enclosure floo	,	feet meters					
b) Top of the next higher floor		<u>na</u>	feet meters					
c) Bottom of the lowest horizontal structural	member (V Zones only)	na .	feet  meters					
d) Attached garage (top of slab)		8	54 meters					
<ul> <li>e) Lowest elevation of machinery or equipm (Describe type of equipment and location</li> </ul>	ent servicing the building in Comments)	8	50 meters					
f) Lowest adjacent (finished) grade next to	building (LAG)	8	25 feet meters					
g) Highest adjacent (finished) grade next to	building (HAG)	9	10 efeet meters					
h) Lowest adjacent grade at lowest elevatio structural support	n of deck or stairs, including	<u>na</u>	feet meters					
SECTION D - SURV	EYOR, ENGINEER, OR AR	CHITECT CER	RTIFICATION					
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		L						
Certifier's Name	License Number							
Esteban Ortiz	5927							
Title								
Professional Land Surveyor and Mapper		i valenti a una incomi a como esta esta esta esta esta esta esta esta	Place					
Company Name			Seal "					
n/a Address			Here					
5385 Audubon Avenue								
City	State	ZIP Code						
De Leon Springs	Florida	32130	2000 2000					
Signature (A)	Date	Telephone	0400					
11/1010	10-11-2019	386-785-3						
Copy all pages of this Elevation Certificate and all a		otricial, (2) insura	ince agent/company, and (3) building owner.					
Comments (including type of equipment and location, per C2(e), if applicable)								
Pages 3 and 4 of this form do not applished of property; latitude and longitude elevation referred to NAVD 88.	y to this property; C2( by Google Earth; Hig	e) refers to a hest Crown	an air compressor locate north of Road Elev=7.65 feet;All					

and (3) building owner.

Sor locate north
7.65 feet; All

Form Page 2 of 6

IMPORTANT: In those angests and the	See mstruction		Expiration Date: November 30, 2018
IMPORTANT: In these spaces, copy the Building Street Address (including Apt., Un 5720 SW 166th AVENUE	corresponding information it, Suite, and/or Bldg. No.)	on from Section A. or P.O. Route and Box No.	FOR INSURANCE COMPANY USE Policy Number:
City	State	ZIP Code	Company NAIC Number

Photo One Caption



