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.

A1. Building Owner's Name NEW HORIZON UNITED METHODIST CHURCH, INC A2. Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. 5741 S FLAMINGO ROAD - MISSION BUILDING City SOUTHWEST RANCHES A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) NEW HORIZON UNTIED METHODIST CHURCH 122-46 B TRACT "A" s 1/2, TPN: 5040 35 03 0020 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) NEW HORIZON UNTIED METHODIST CHURCH 122-46 B TRACT "A" s 1/2, TPN: 5040 35 03 0020 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) NON-RESIDENTIAL A5. Latitude/Longitude: Lat. 26°02′50.31"N Long. 80°18′52.56"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 18 A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s): b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b d) Engineered flood openings in A9.b N/A sq ft b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade c) Total net area of flood openings in A9.b N/A sq ft b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade c) Total net area of flood openings in A9.b N/A sq ft b) Number of permanent flood openings in A9.b N/A sq ft b) Number of permanent flood openings in A9.b N/A sq ft b) Number of permanent flood openings in B9.B so Flood penings in A9.b N/A sq ft b) Number of permanent flood openings in B9.B so Flood Depthy Name B1.NFIP Community Name & Community Number B2. County Name B3. State FLORIDA B4. Map/Panel B5. Suffix B6. FIRM Index B7. FIRM Panel B7. FIRM Panel B8. Flood B8. B9. Base Flood Elevation(s) Cone A0, use Base Flood Depthy C7. FIRM Panel B10. Indicate the source of th	SECTION A - PROPERTY INFORMATION				FOR INSUR	RANCE COMPANY USE	
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Number Date Effective/ Revised Date 08/18/2014 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:	TOWN OF SOUTHWEST RA	NCHES; 120691		BROWARD		FLORIDA	
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	12011C 0285 F	08/18/2014	08/	18/2014	АН	5	FEET
	R10 Indicate the source of the Rase Flood Flevation (RFF) data or base flood depth entered in Item R0.						
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: N/A CBRS OPA							

ELEVATION CERTIFICATE

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. 5741 S FLAMINGO ROAD - MISSION BUILDING	Policy Number:					
City State ZIP Code	Company NAIC Number					
SOUTHWEST RANCHES FL 33330						
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY R	EQUIRED)					
C1. Building elevations are based on: Construction Drawings* Building Under Constr	ruction* 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. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puert Benchmark Utilized: BCBM #3279 EL= 6785' Vertical Datum: NAVD 1988						
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)	9.03 effect meters					
b) Top of the next higher floor	19.52 feet meters					
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A feet meters					
d) Attached garage (top of slab)	N/A en feet meters					
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	8.99 feet meters					
f) Lowest adjacent (finished) grade next to building (LAG)	8.68 feet meters					
	9.01 feet meters					
	0.01					
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	N/A feet meters					
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIF	ICATION					
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 licensed land surveyor?	Chackshelle if attachments.					
Certifier's Name License Number	STIFICA PLANTER					
David P. Lindley, PLS L.S. 5005	CERTIFICATOR					
Title	E 100 905					
Title Professional Land Surveyor Company Name Caulfield & Wheeter: Incaring David P. Lindley, RDS						
Company Name P. LINDLEY	David P. Lindley, 10.55					
Caulfield & Wheeler Inc.	David P. Lindley, RDS					
Address 7900 Glades Road NSuite 100	L.S. 5005, State of Florida					
	"Not Valid with out the signature and					
City Boca Rator State ZIP Code FL 33434	Surveyor & Mapper"					
Signature Date Telephone 02/08/2021 561-392-199	Ext. 91					
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)						
Item A5) Latitude & Longitude obtained by Magellen GPS Blazer 12.						
Item C2.e) Refers to AC pad located at the rear of building						
	<i>y</i>					

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY L					
Building Street Address (including Apt., Unit, Suite, and/o 5741 S FLAMINGO ROAD - MISSION BUIL	Policy Number:				
City StanCHES	ate ZIP (33330	Company NAIC Number		
SECTION E – BUILDING ELEY FOR ZONE	ATION INFORMATION AO AND ZONE A (WIT		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 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 meter			
crawlspace, or enclosure) is		feet meter			
E2. For Building Diagrams 6–9 with permanent flood oper the next higher floor (elevation C2.b in the diagrams) of the building is	enings provided in Section	feet meter			
E3. Attached garage (top of slab) is		feet meter	s □ above or □ below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is		feet meter	s above or below the HAG.		
E5. Zone AO only: If no flood depth number is available, floodplain management ordinance? Yes I			ordance with the community's ertify this information in Section G.		
SECTION F - PROPERTY OWNE	R (OR OWNER'S REPR	ESENTATIVE) CE	RTIFICATION		
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	Sta	ate ZIP Code		
Signature	Date	Те	lephone		
Comments					
			, and the second second		
			- Y		
			Check here if attachments.		

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Su	Policy Number:		
5741 S FLAMINGO ROAD - MISSIO			
City	State	ZIP Code	Company NAIC Number
SOUTHWEST RANCHES	FL	33330	
SECTIO	N G - COMMUNITY INFO	RMATION (OPTIONAL)	
The local official who is authorized by law or ord Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, ent	Certificate. Complete the a	ommunity's floodplain man pplicable item(s) and sign	agement ordinance can complete below. Check the measurement
G1. The information in Section C was take engineer, or architect who is authorize data in the Comments area below.)	en from other documentationed by law to certify elevation	n that has been signed an n information. (Indicate the	d sealed by a licensed surveyor, source and date of the elevation
G2. A community official completed Section or Zone AO.	on E for a building located i	n Zone A (without a FEMA	-issued or community-issued BFE)
G3. The following information (Items G4–0	G10) is provided for commu	unity floodplain manageme	ent purposes.
G4. Permit Number	G5. Date Permit Issued		Pate Certificate of ompliance/Occupancy Issued
G7. This permit has been issued for:	New Construction	bstantial Improvement	
G8. Elevation of as-built lowest floor (including of the building:	basement)	feet	meters Datum
G9. BFE or (in Zone AO) depth of flooding at the	ne building site:	feet	meters Datum
G10. Community's design flood elevation:		feet	meters Datum
Local Official's Name	Tit	tle	
Community Name	Тє	elephone	
Signature	Da	ate	
Comments (including type of equipment and loca	ation, per C2(e), if applicab	le)	
		,	
			,
			Check here if attachments.

BUILDING PHOTOGRAPHS

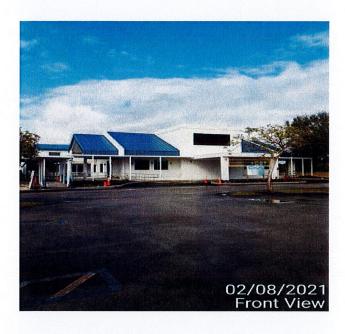
ELEVATION CERTIFICATE

See Instructions for Item A6.

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

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, S	Policy Number:		
5741 S FLAMINGO ROAD - MISSI			
City	State	ZIP Code	Company NAIC Number
SOUTHWEST RANCHES	FL	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.



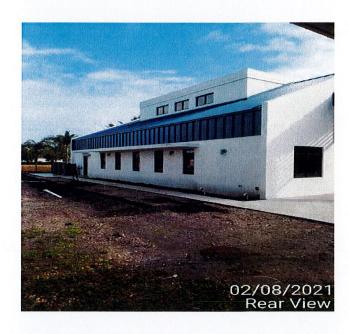


Photo One Caption: FRONT

Photo Two Caption: REAR



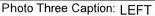




Photo Four Caption: RIGHT

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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. 5741 S FLAMINGO ROAD - MISSION BUILDING				Policy Number:
City		State	ZIP Code	Company NAIC Number
SOUTHWEST RAN	NCHES	FL	33330	Company Wile Hamber
with: date taken; "Front \	View" and "Rear View";	and, if required, "R	ight Side View" and "Le	phs below. Identify all photographs eft Side View." When applicable, as indicated in Section A8.
	Photo One		Pi	noti» Two
Photo Five Caption:		Photo S	Six Caption:	
	PhotoThree		P	hoto Four
Photo Seven Caption :		Photo Eigh	: Caption:	