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.

oopy an pageo of ano i		TION A PROPERTY			,, (_,		ANCE COMPANY USE	
SECTION A – PROPERTY INFORMATION  A1. Building Owner's Name						Policy Numb		
CCAM PROPERTY, LLC						761.		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 15881 S.W. 49TH STREET						Company N	AIC Number:	
City								
SOUTHWEST RANCHES, Florida 33331								
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 11, "CIRCLE S ESTATES", PB. 183, PGS. 458-467, BROWARD COUNTY, FLORIDA.							
A4. Building Use (e	e.g., Residen	itial, Non-Residential,	Addition,	Accessory, e	etc.) RESIDEN	TIAL		
A5. Latitude/Longit	ude: Lat. 26	3.05884°N	Long. 80	).3064°W	Horizonta	l Datum: 📋 NAD 1	927 X NAD 1983	
A6. Attach at least	2 photograp	hs of the building if the	e Certifica	ate is being u	sed to obtain floo	d insurance.		
A7. Building Diagra	m Number	1A						
A8. For a building v	vith a crawls	pace or enclosure(s):						
a) Square foot	age of crawl	space or enclosure(s)			-0- sq ft			
b) Number of p	ermanent flo	ood openings in the cra	awlspace	or enclosure	e(s) within 1.0 fool	above adjacent gra	-0-	
c) Total net are	ea of flood o	penings in A8.b	-(	O- sq in				
d) Engineered	flood openir	ngs? 🗌 Yes 🗓 N	lo			**		
A9. For a building w	ith an attach	ned garage:						
a) Square footage of attached garage								
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 -0- sq in								
d) Engineered flood openings?								
a) Engineered nood openings: [] 165 [A] NO								
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Community Name & Community Number  SOUTHWEST RANCHES/120691  B2. County Name  BROWARD  B3. State  Florida								
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	M Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)	
12011C0540	Н	08-18-2014	08-18-2		АН	+6.00 NAVD 1988	3	
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: N/A CBRS OPA								

## **ELEVATION CERTIFICATE**

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

IMPORTANT: In these spaces, copy the corresponding i	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Suite, and/or t 15881 S.W. 49TH STREET	Policy Number:						
City State SOUTHWEST RANCHES, Florid		Code 31	Company NAIC Number				
SECTION C - BUILDING ELE	SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
C1. Building elevations are based on: Construction Drawings* Building Under Construction* 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: 1373 BROWARD COUNTY Vertical Datum: N.A.V.D. 1988  Indicate elevation datum used for the elevations in items a) through h) below.							
Datum used for building elevations must be the same	**	FE.					
a) Top of bottom floor (including basement, crawlspa	oo or opplosure floor		Check the measurement used.  7.18 X feet  meters				
b) Top of the next higher floor	ce, or enclosure moor		7.65 X feet  meters				
	()/ Zapas amb)		N/A ☐ feet ☐ meters				
<ul><li>c) Bottom of the lowest horizontal structural member</li><li>d) Attached garage (top of slab)</li></ul>	(v Zones only)		7.16 X feet meters				
e) Lowest elevation of machinery or equipment servi-     (Describe type of equipment and location in Comn	cing the building	R	7.42 X feet meters				
f) Lowest adjacent (finished) grade next to building (	NO6-024 *		6.40 🔀 feet 🗌 meters				
g) Highest adjacent (finished) grade next to building			7.10 X feet meters				
b) Lowest adjacent grade at lowest elevation of deck structural support	,		N/A feet meters				
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.							
Were latitude and longitude in Section A provided by a lice		THE PLANT HOUSE	Check here if attachments.				
Certifier's Name FRANCISCO F. FAJARDO	License Number #4767		ICISCO F. FAV				
Title PROFESSIONAL SURVEYOR AND MAPPER			LALINCISCO F. FAVA PO				
Company Name LANNES AND GARCIA, INC.			NO. 4767				
Address 4967 S.W. 75TH AVENUE			PAO STATE OF STATE				
City MIAMI,	State Florida	ZIP Code 33155	STATE OF STA				
Signature	Date 05-16-2022	Telephone (305) 666-7909	Ext.				
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 CCROWN OF ROAD= 4.76 C2-A= (RECESSED SHOWER), C2-B= (FINISHED FLOOR C2-E= A/C PAD (EAST SIDE OF THE HOUSE) GPS UNIT USED (GARMIN ETREX H)	,						

# **ELEVATION CERTIFICATE**

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

				FOR INSURA	NCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, a 15881 S.W. 49TH STREET	nd/or Bldg. No.) or P		Box No.	Policy Number		
City SOUTHWEST RANCHES,	State Florida	ZIP Code 33331		Company NA	IC Number	
SECTION E – BUILDING E FOR ZOI	LEVATION INFOR	MATION (SUR A (WITHOUT	VEY NOT BFE)	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 ar the highest adjacent grade (HAG) and the lowes a) Top of bottom floor (including basement, crawlspace, or enclosure) is		.G).	ow whethe		is above or below or ☐ below the HAG.	
<ul> <li>b) Top of bottom floor (including basement, crawlspace, or enclosure) is</li> </ul>		fee	t 🗌 mete	rs 🗌 above	or Delow the LAG.	
E2. For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in the diagrams) of the building is	openings provided	in Section A Iter	_	_	1–2 of Instructions), or ☐ below the HAG	
E3. Attached garage (top of slab) is		fee	t 🗌 mete	rs 🗌 above	or below the HAG	
E4. Top of platform of machinery and/or equipment servicing the building is		[] fee	t 🗌 mete	rs 🔲 above	or _ below the HAG.	
E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?   Yes No Unknown. The local official must certify this information in Section G.						
SECTION F - PROPERTY O	WNER (OR OWNER	'S REPRESEN	TATIVE) C	ERTIFICATION	J	
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	С	ity	St	tate	ZIP Code	
Signature	D	ate	Te	elephone		
Comments						
				8		
				Chec	k here if attachments.	

# **ELEVATION CERTIFICATE**

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

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, St 15881 S.W. 49TH STREET	No. Policy Number:					
City SOUTHWEST RANCHES,	State Florida	ZIP Code 33331	Company NAIC Number			
SECTIO	NG - COMMUNIT	Y INFORMATION (OPTION	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. Comple	er the community's floodp te the applicable item(s) a	lain management ordinance can complete and sign below. 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 k	ocated in Zone A (without	a FEMA-issued or community-issued BFE)			
G3. The following information (Items G4-	G10) is provided for	community floodplain ma	anagement purposes.			
G4. Permit Number	G5. Date Permit Is	ssued	G6. Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for:	New Construction	Substantial Improven	nent			
G8. Elevation of as-built lowest floor (including of the building:	basement)	31	☐ feet ☐ meters Datum			
G9. BFE or (in Zone AO) depth of flooding at t	he building site:		feet meters Datum			
G10. Community's design flood elevation:	* income	¥ 120	feet meters Datum			
Local Official's Name		Title				
Community Name	154	Telephone				
Signature		Date				
Comments (including type of equipment and loc	ation, per C2(e), if a	applicable)	,			
			Check here if attachments.			

## **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

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Building Street Address (including Apt., I 15881 S.W. 49TH STREET	Policy Number:		
City SOUTHWEST RANCHES.	State Florida	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 LOT 11-FINISHED CONSTRUCTION FRONT VIEW 05-16-2022

Clear Photo One



LOT 11-FINISHED CONSTRUCTION REAR VIEW 05-16-2022 Photo Two Caption

Clear Photo Two

## **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy th	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., t 15881 S.W. 49TH STREET	Policy Number:		
City	State	ZIP Code	Company NAIC Number
SOUTHWEST RANCHES,	Florida	33331	

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 Three Caption LOT 11-FINISHED CONSTRUCTION LEFT SIDE VIEW 05-16-2022

Clear Photo Three



Photo Four Caption LOT 11-FINISHED CONSTRUCTION RIGHT SIDE VIEW 05-16-2022

Clear Photo Four