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.

SECTION A - PROPERTY INFORMATION	FOR INSURANCE COMPANY USE					
A1. Building Owner's Name LEON	F	Policy Number:				
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.C Box No.). Route and	Company NAIC Number:				
17340 SW 70 TH PLACE		, .				
City State SOUTHWEST RANCHES FL	;	ZIP Code 33331				
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal D FOLIO NO.: 5040 06 04 0044 (SEE SCETION D FOR LEG.	, ,	1)				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)	ACCESSORY					
A5.Latitude/Longitude: Lat. <u>26°01′50.58" N</u> Long <u>. 80°22′48.09" W</u>	Horizontal Datı	um:□NAD1927 ⊠NAD1983				
A6. Attach at least 2 photographs of the building if the Certificate is being used	to obtain flood insuran	ce.				
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 a	adjacent grade N/A				
c) Total net area of flood openings in A8.b N/A sq in		-				
d) Engineered flood openings? ☐ Yes ☒ No						
A9. For a building with an attached garage:						
a) Square footage of attached garage N/A sq ft						
b) Number of permanent flood openings in the attached garage within 1.0 to	foot above adiacent gr	ade N/A				
c) Total net area of flood openingsinA9.b N/A sq in						
d) Engineered flood openings? Yes No						
SECTION B – FLOOD INSURANCE RATE MAI						
B1. NFIP Community Name & Community Number SOUTHWEST RANCHES 120691 B2. County Nam BROWAF		B3. State FL				
B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use Base				
12011C0540 H 8-18-14 Revised Date 8-18-14	АН	Flood Depth) 5				
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B						
☐FIS Profile ☐FIRM ☐Community Determined ☐Other/Source:						
B11. Indicate elevation datum used for BFE inItemB9: NGVD1929 NAVD1988 Other/Source:						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐Yes ☒No						
Designation Date: CBRS OPA						

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			Policy Number:		
City	State ZIP	Code	Company NAIC Number		
SOUTHWEST RANCHES	FL 333	331			
SECTION C – BUILDING I	ELEVATION INFORMAT	ION (SURVEY RE	EQUIRED)		
C1. Building elevations are based on: Construction	on Drawings* 🔲 Buildir	ng Under Construct	tion* Finished Construction		
*A new Elevation Certificate will be required wher	construction of the building	ng 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: BCED NO. 1881 Vertical Datum: 3.339 (NAVD 1988)					
Indicate elevation datum used for the elevations in	n items a) through h) belov	v.			
☐ NGVD1929 ☐ NAVD1988 ☐ Othe	er/Source:				
Datum used for building elevations must be the sa	ame as that used for the B	FE.	Check the measurement used.		
a) Top of bottom floor (including basement, craw	Ispace, or enclosure floor)	<u>8</u> .9			
b) Top of the next higher floor		<u>N/A</u>	feet		
c) Bottom of the lowest horizontal structural mem	ber (V Zones only)	<u>N/A</u>	feet		
d) Attached garage (top of slab)		<u>N/A</u>	feet		
e) Lowest elevation of machinery or equipment s	ervicing the building	<u>10</u> . <u>1</u>	☐ meters		
(Describe type of equipment and location in C	omments)				
f) Lowest adjacent (finished) grade next to buildi	ng (LAG)	<u>8</u> . <u>5</u>	☑ feet ☐ meters		
g) Highest adjacent (finished) grade next to build	ing (HAG)	<u>8</u> . <u>7</u>	🛛 feet 🔲 meters		
h) Lowest adjacent grade at lowest elevation of d	leck or stairs, including str	uctural support <u>8.</u>	6 ☑ feet ☐ meters		
SECTION D - SURVEYO	R, ENGINEER, OR ARC	HITECT CERTIFI	CATION		
Thiscertificationistobesignedandsealedbyalandsurveyor the information on this Certificate represents my best of statementmaybepunishablebyfineorimprisonmentunde	efforts to interpret the data	available. I unders	iyelevationinformation. I certify that tand that any false		
Were latitude and longitude in Section A provided by a	licensed land surveyor?[⊠ Yes □ No □	Check here if attachments.		
Certifier's Name	License Number				
SCOTT A. GUZZI	5108				
Title PROFESSIONAL SURVEYOR & MAPPER			- 0		
Company Name VIC-SCOTT LAND SURVEYING & MAPPING			Place Seal		
Address 6047 KIMBERLY BOULEVARD, SUITE T					
City NORTH LAUDERDALE	State FL	ZIP Code 33068			
Signature	Date 2-8-2022 99	Telephone 54-722-8500			
CopyallpagesofthisElevationCertificateandallattachmentsfor(1)communityofficial,(2)insuranceagent/company,and(3)buildingowner.					
Comments (including type of equipment and location, per C2(e), if applicable) LATTITUDE AND LONGITUDE PER GOOGLE EARTH. LOWEST ELEVATION OF MACHINERY (C2e) IS AIR CONDITIONER RACK MOUNTED ON THE SOUTH SIDE OF GUEST HOUSE. THE NORTH TWO-FIFTHS (2/5) OF THE SOUTH ONE-HALF (S 1/2) OF TRACT 24 IN THE SOUTHEAST ONE-QUARTER (SE 1/4) OF SECTION 6, TOWNSHIP 51 SOUTH, RANGE 40 EAST, ACCORDING TO THE PLAT OF CHAMBERS LAND COMPANY SUBDIVISION, AS RECORDED IN PLAT BOOK 1, PAGE 5 OF THE PUBLIC RECORDS OF BROWARD COUNTY, FLORIDA, LESS THE NORTH 25 FEET AND THE EAST 25 FEET THEREOF FOR ROAD RIGHT OF					

OMB No. 1660-0008 **ELEVATION CERTIFICATE** Expiration Date: November 30, 2022 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. Policy Number: 17340 SW 70TH PLACE State ZIP Code Company NAIC Number SOUTHWEST RANCHES FL 33331 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 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). a) Top of bottom floor (including basement. crawlspace, or enclosure) is ☐ feet ☐ meters ☐ above or ☐ below the HAG. b) Top of bottom floor (including basement, crawlspace, or enclosure) is ☐ feet ☐ meters ☐ above or ☐ below the LAG. 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) is 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 bottom floor elevated in accordance with the community's flood plain management ordinance? Yes No Unknown. The local official must certify this information in Section G. 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 Comments

Check here if attachments.

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Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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City SOUTHWEST RANCHES	State FL	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.



FRONT VIEW 2-8-2022



LEFT SIDE VIEW 2-8-2022

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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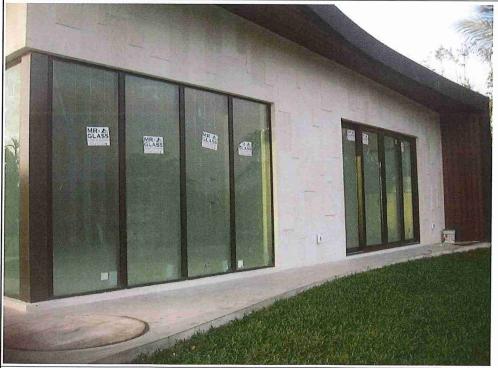
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If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



REAR VIEW 2-8-2022



RIGHT SIDE VIEW 2-8-2022