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.

	SEC	ION A - PROPERTY	INFORM	MATION		FOR INSUR	ANCE COMPANY USE
						Policy Numb	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Company NAIC Number: 15821 S.W. 49TH STREET						AIC Number:	
City State ZIP Code							
SOUTHWEST	RANCHES,			Florida		33331	
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 14, "CIRCLE S ESTATES", PB. 183, PGS. 458-467, BROWARD COUNTY, FLORIDA.						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL							
A5. Latitude/Longit	ude: Lat. <u>26</u>	3.05863°N	Long. 80	0.35901°W	Horizontal	Datum: 🔲 NAD 1	927 🗵 NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certifica	ate is being u	sed to obtain flood	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 foot	above adjacent gra	nde
c) Total net are	ea of flood op	enings in A8.b	-(0- sq in	: منت الما		
		ıgs? ∏ Yës 🛣 N				" Thriable.	ا بي الله الله الله الله الله الله الله الل
A9. For a building with an attached garage:							
a) Square footage of attached garage 627.00 sq ft							
b) Number of p	ermanent flo	ood openings in the att	tached g	arage within	1.0 foot above adja	cent grade -()-
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade							
d) Engineered flood openings?							
ay Engineered need openinger — Tes Elive							
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Communi SOUTHWEST RAN	•	•		B2. County BROWARD			B3. State Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	levation(s) e Base Flood Depth)
12011C0540	Н	08-18-2014	08-18-2		AH	+5.00 NAVD 198	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							

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IMPORTANT: In these spaces, copy the corres	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Sui 15821 S.W. 49TH STREET	Policy Number:			
City SOUTHWEST RANCHES,	State Florida	ZIP Code 33331	Company NAIC Number	
SECTION C - BUILI	DING ELEVATION INF	ORMATION (SURVEY R	EQUIRED)	
C1. Building elevations are based on: *A new Elevation Certificate will be require C2. Elevations – Zones A1–A30, AE, AH, A (w Complete Items C2.a–h below according to Benchmark Utilized: 1373 BROWARD CO Indicate elevation datum used for the elevation datum used for the elevation used for building elevations must be a) Top of bottom floor (including basements) Top of the next higher floor c) Bottom of the lowest horizontal structurs d) Attached garage (top of slab) e) Lowest elevation of machinery or equip (Describe type of equipment and location for the lowest adjacent (finished) grade next to g) Highest adjacent (finished) grade next to	construction Drawings* and when construction of the strict of the building diagram spounts of the building diagram spounts of the building diagram spounts of the same as that used at, crawlspace, or enclosional member (V Zones only comment servicing the building in Comments) to building (LAG)	Building Under Constr he building is complete. / (with BFE), AR, AR/A, AR pecified in Item A7. In Puer I Datum: N.A.V.D. 1988 h h) below. for the BEE. ure floor)	uction* Finished Construction A/AE, AR/A1-A30, AR/AH, AR/AO. to Rico only, enter meters.	
h) Lowest adjacent grade at lowest elevated structural-support	lion of deck or stairs, incl	luding	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 licensed land surveyor? Yes No Check here if attachments.				
Certifier's Name FRANCISCO F. FAJARDO Title PROFESSIONAL SURVEYOR AND MAPPER Company Name LANNES AND GARCIA, INC. Address 4967 S.W. 75TH AVENUE City MIAMI, Signature Copy all pages of this Elevation Certificate and all Comments (including type of equipment and loc CROWN OF ROAD= 5.40 C2-A= (RECESSED SHOWER) C2-B= (FINISHED FLOOR ELEVATION) C2-E= A/C PAD (EAST SIDE OF THE HOUSE GPS UNIT USED (GARMIN ETREX H)	State Florida Date 11-16-2022 If attachments for (1) come	Digitally signed by Francisco Fajardo DN: c=US, o=Lannes and Gar Inc., dnQualiffer=A01410C000001 A221916500003FD7, —en=Francisco F-Fajardo Date: 2022.11.17 10:38:20 -05'00' ZIP Code 33155 Telephone (305) 666-7909	NO. 4767 ** ** ** ** ** ** ** ** **	

ELEVATION CERTIFICATE

OMB No. 1660-0008 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 Bld 15821 S.W. 49TH STREET			Policy Number:	
City State SOUTHWEST RANCHES, Florida	ZIP Code 33331		Company NAIC Number	
SECTION E – BUILDING ELEVATI FOR ZONE AO A	ON INFORMATION (SURVE		REQUIRED)	
For Zones AO and A (without BFE), complete Items E1–E5. If complete Sections A, B,and C. For Items E1–E4, use natural genter meters.	the Certificate is intended to s grade, if available. Check the r	upport a l neasuren	_OMA or LOMR-F request, nent used. In Puerto Rico only,	
E1. Provide elevation information for the following and check the highest adjacent grade (HAG) and the lowest adjacer a) Top of bottom floor (including basement,	the appropriate boxes to show nt grade (LAG).	whether	the elevation is above or below	
crawispace, 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 opening	is 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		meters		
E3. Attached garage (top of slab) is	feet	meters	above or below the HAG.	
E4. Top of platform of machinery and/or equipment servicing the building is		meters	above orbelow the HAG.	
E5. Zone AO only: If no flood depth number is available, is the floodplain management ordinance? Yes No	e top of the bottom floor eleva	ted in acc ial must c	ordance with the community's ertify this information in Section G.	
SECTION F – PROPERTY OWNER (C	OR OWNER'S REPRESENTA	TIVE) 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.				
Community-issued one) of Zone AO must sign here. The stat	ements in Sections A, B, and t	= are corr	ect to the best of my knowledge.	
Property Owner or Owner's Authorized Representative's Nam		= are corr	ect to the best of my knowledge.	
•		= are corr		
Property Owner or Owner's Authorized Representative's Nam	ne	Sta		
Property Owner or Owner's Authorized Representative's Nam Address	City	Sta	ite ZIP Code	
Property Owner or Owner's Authorized Representative's Nam Address Signature	City	Sta	ite ZIP Code	
Property Owner or Owner's Authorized Representative's Nam Address Signature	City	Sta	ite ZIP Code	
Property Owner or Owner's Authorized Representative's Nam Address Signature	City	Sta	ite ZIP Code	
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Building Street Address (including Apt., Unit, St 15821 S.W. 49TH STREET	O. Route and Box No.	Policy Number:				
City SOUTHWEST RANCHES,	State Florida	ZIP Code 33331	Company NAIC Number			
SECTIO	N G - COMMUNITY INFO	RMATION (OPTIONAL)				
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.						
engineer, or architect who is authorize data in the Comments area below.)	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 or Zone AO.			The second control of			
G3. The following information (Items G4-	G10) is provided for commu	unity floodplain managem	ent purposes.			
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for:	New Construction Sub	stantial 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 to	he building site:	feet				
G10. Community's design flood elevation:	<u>.</u>		meters Datum			
Local Official's Name	Local Official's Name Title					
Community Name	Community Name Telephone					
Signature	Da	te				
Comments (including type of equipment and location, per C2(e), if applicable)						
			,			
			Check here if attachments.			

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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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.

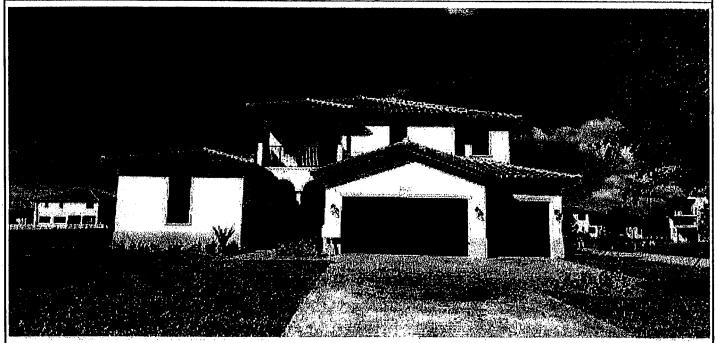


Photo One

Photo One Caption LOT 14-FINISHED CONSTRUCTION FRONT VIEW 11-16-2022

Clear Photo One



Photo Two

Photo Two Caption LOT 14-FINISHED CONSTRUCTION REAR VIEW 11-16-2022

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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Building Street Address (Including Apt., I 15821, S.W. 49TH STREET	Jnit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	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 14-FINISHED CONSTRUCTION LEFT SIDE VIEW 11-16-2022

Clear Photo Three

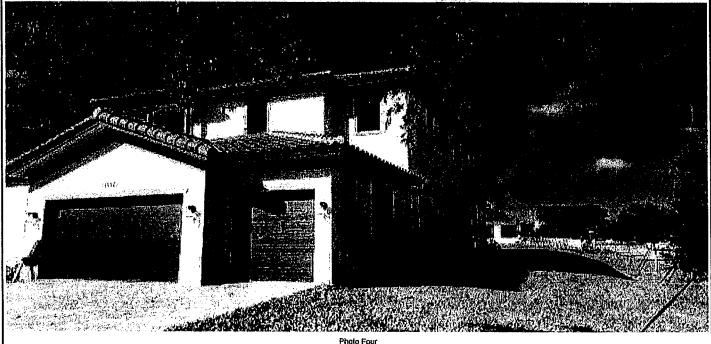


Photo Four

Photo Four Caption LOT 14-FINISHED CONSTRUCTION RIGHT SIDE VIEW 11-16-2022

Clear Photo Four