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.

by 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 INSUR	ANCE COMPANY USE	
A1. Building Owner's Name CCAM PROPERTY, LLC Policy Number:						oer:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4795 S.W. 159TH AVENUE					Company N	AIC Number:	
City SOUTHWEST I	RANCHES,			State Florida		ZIP Code 33331	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 6, "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/Longite	A5. Latitude/Longitude: Lat. 26.06084°N Long. 80.36126°W Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983						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	od openings in the cra	awlspace	or enclosure	(s) within 1.0 foot	above adjacent gra	de
c) Total net are	a of flood o	penings in A8.b	-(O- sq in			
d) Engineered	flood openir	gs? 🗌 Yes 🗵 N	lo	, . .	·		
A9. For a building w	ith an attach	ed garage:					
a) Square foota	a) Square footage of attached garage633.00 sq ft						
b) Number of p	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade -0-						<u> </u>
c) Total net are	a of flood op	enings in A9.b	-0-	sq	in	-	
d) Engineered	flood openin	gs? 🗌 Yes 🕱 N	lo		•		
	SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Communi SOUTHWEST RAN	ty Name & C	ommunity Number		B2. County BROWARD			B3. State Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	M Panel ective/ rised 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	+5.00 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:							
ે12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ⊠ No							
Designation Date: N/A							

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PORTANT: In these spaces, copy t	FOR INSURANCE COMPANY USE		
ulding Street Address (including Apt.	, Unit, Suite, and/or Bldg. No.) or P.O.	Route and Box No.	Policy Number:
95 S.W. 159TH AVENUE	,		
y	State	ZIP Code	Company NAIC Number
OUTHWEST RANCHES,	Florida	33331	
SECTION	C – BUILDING ELEVATION INFOR	MATION (SURVEY	REQUIRED)
C1. Building elevations are based or	be required when construction of the	huilding is complete.	
		MEDEEL AR ARIA I	AR/AE. AR/A1-A30, AR/AH, AR/AO.
C2. Elevations – Zones A1–A30, AE	e, AH, A (with BFE), VE, V1–V30, V (was according to the building diagram spec	cified in Item A7. In Pu	uerto Rico only, enter meters.
Benchmark Utilized: 1373 BRO	WARD COUNTY Vertical D	atum: N.A.V.D. 1988	
	or the elevations in items a) through h	below.	
FI NGVD 1929 [7] NAV	/D 1988 Other/Source:		
Datum used for building elevation	ons must be the same as that used for	the BFE.	Check the measurement used.
			7.36 X feet meters
 a) Top of bottom floor (including 	g basement, crawlspace, or enclosure	: 1100r)	7.78 X feet meters
b) Top of the next higher floor			
c) Bottom of the lowest horizon	ntal structural member (V Zones only)	<u></u>	
d) Attached garage (top of slat			7.35 X feet meters
. Laudet aloyation of machine	env or equipment servicing the building	3	7.88 ⋉ feet meters
(Describe type of equipment	and location in Comments)		
f) Lowest adjacent (finished) g	grade next to building (LAG)		
	grade next to building (HAG)		8.20 X feet meters
	west elevation of deck or stairs, include	ding	N/A feet meters
_structural support -			
SECTIO	N D – SURVEYOR, ENGINEER, O	R ARCHITECT CER	RTIFICATION
			ad by law to certify elevation information.
This certification is to be signed and	sealed by a land surveyor, engineer	or architect authorize	ad by law to certify elevation information
This certification is to be signed and I certify that the information on this statement may be ourishable by fin	d sealed by a land surveyor, engineer Certificate represents my best efforts se or imprisonment under 18 U.S. Coo	or architect authorize to interpret the data a le, Section 1001.	ed by law to certify elevation information evailable. I understand that any false
This certification is to be signed and I certify that the information on this statement may be ourishable by fin	d sealed by a land surveyor, engineer, Certificate represents my best efforts ne or imprisonment under 18 U.S. Coo ion A provided by a licensed land surv	or architect authorize to interpret the data a le, Section 1001. reyor? ⊠Yes □	ed by law to certify elevation information invailable. I understand that any false No Check here if attachments.
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This certification is to be signed and I certify that the information on this statement may be punishable by find Were latitude and longitude in Section Certifier's Name FRANCISCO F. FAJARDO Title PROFESSIONAL SURVEYOR AND	d sealed by a land surveyor, engineer, Certificate represents my best efforts ne or imprisonment under 18 U.S. Cod ion A provided by a licensed land surv License Numb #4767	or architect authorize to interpret the data a de, Section 1001. veyor? Yes Digitally signed by Fra Fajardo On: c=US, o=Lannes a	ncisco F Red by law to certify elevation information invallable. I understand that any false No Check here if attachments. Red CERTIFICATE And CERTIFICATE The control of the certific and the certific attachments.
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ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding	FOR INSURAN	NCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/o	Policy Number:	:			
4795 S.W. 159TH AVENUE	nto.) Code	Company NAIC	: Number	
ity Sta SOUTHWEST RANCHES, Flo	ate ZIP orida 333		Company NAIC		
SECTION E – BUILDING ELEV	VATION INFORMATIC	ON (SURVEY NO	T REQUIRED)	ı	
FOR ZONE A	AO AND ZONE A (WI	THOUT BFE)			
For Zones AO and A (without BFE), complete Items E1–E complete Sections A, B,and C. For Items E1–E4, use national enter meters.	tural grade, if available.	Check the measur	rement usea. In Pt	uerto Rico only,	
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).					
Top of bottom floor (including basement, crawlspace, or enclosure) is		feet mete	ers 🔲 above o	r Delow the HAG.	
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet met	ers above or	r Delow the LAG.	
E2. For Building Diagrams 6–9 with permanent flood ope	enings provided in Secti	ion 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		feet met	ters 🔲 above o	or below the HAG.	
E3. Attached garage (top of slab) is			ters 🔲 above o	or below the HAG.	
E4. Top of platform of machinery and/or equipment servicing the building is		feet met	ters above o	or below the HAG.	
E5. Zone AO only: If no flood depth number is available, floodplain management ordinance? Yes	, is the top of the botton No ☐ Unknown. Th	n floor elevated in a	accordance with the	he community's mation in Section G.	
SECTION F - PROPERTY OWN	ER (OR OWNER'S REF	PRESENTATIVE)	CERTIFICATION		
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	- wha anmâlatan Cantini	na Λ Þand Efor	Zone A (without a	FFMA-issued or	
Property Owner or Owner's Authorized Representative's					
Address	City		State	ZIP Code	
Signature	Date		Telephone		
Comments					
^ 1					

ELEVATION CERTIFICATE

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Building Street Address (including Apt., Un	Policy Number:				
4795 S.W. 159TH AVENUE					
OUTHWEST RANCHES,	State Florida	ZIP Code 33331	Company NAIC Number		
SE	CTION G - COMMUNITY IN	FORMATION (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.					
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 or Zone AO.	Section E for a building locate	ed in Zone A (without a FEM	A-issued or community-issued BFE)		
G3. The following information (Items	G4–G10) is provided for con	nmunity floodplain managem	nent purposes.		
G4. Permit Number	G5. Date Permit Issue		Date Certificate of Compliance/Occupancy Issued		
G7. This permit has been issued for:	☐ New Construction ☐	Substantial Improvement			
G8Elevation of as-built-lowest floor (incl of the building:	uding basement)	fee	t 🗌 meters Datum		
G9. BFE or (in Zone AO) depth of flooding	g at the building site:	fee	t meters Datum		
310. Community's design flood elevation:	• • • • • • • • • • • • • • • • • • •	fee	t meters Datum		
Local Official's Name		Title			
Community Name		Telephone			
Signature Date					
Comments (including type of equipment ar	nd location, per C2(e), if appli	icable)			
			Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Building Street Address (including Apt., L 4795 S.W. 159TH AVENUE	Jnit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:
ity	State	ZIP Code	Company NAIC Number
SOUTHWEST RANCHES,	Florida	33331	

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 6-FINISHED CONSTRUCTION FRONT VIEW 08-31-2022

Clear Photo One



Photo Two Caption LOT 6-FINISHED CONSTRUCTION REAR VIEW 08-31-2022

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE Policy Number:		
Building Street Address (including Apt., L 4795 S.W. 159TH AVENUE			
ity	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.

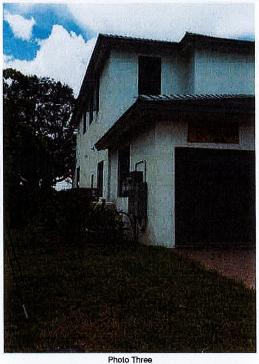


Photo Three Caption LOT 6-FINISHED CONSTRUCTION LEFT SIDE VIEW 08-31-2022

Clear Photo Three



Photo Four Caption LOT 6-FINISHED CONSTRUCTION RIGHT SIDE VIEW 08-31-2022

Clear Photo Four