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

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1–9.

py all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

	SECT	ION A – PROPERTY	INFORM	TATION		FOR INSUR	ANCE COMPANY USE
A1. Building Owne CCAM PROPERTY						Policy Numb	er:
A2. Building Street Box No. 4918 S.W. 158TH A		luding Apt., Unit, Suite	e, and/or	Bldg. No.) or	P.O. Route and	Company N	AIC Number:
City SOUTHWEST	RANCHES,			State Florida		ZIP Code 33331	
• •	•	nd Block Numbers, Ta PB. 183, PGS. 458-4				.)	
A4. Building Use (e.g., Residen	tial, Non-Residential, /	Addition,	Accessory, e	tc.) RESIDEN1	TIAL	
A5. Latitude/Longit	ude: Lat. 26	.05733°N	Long. <u>80</u>	.35840°W	Horizontal	Datum: NAD 1	927 🗵 NAD 1983
A6. Attach at least	2 photograph	ns of the building if the	e Certifica	ate is being u	sed to obtain flood	l insurance.	
A7. Building Diagra	am Number	1A					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	age of crawls	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 ar	ea of flood op	enings in A8.b	-()- sq in	± de		4 · ·
d) Engineered	flood openin	gs? 🗌 Yes 🗓 N	lo [†]	,	- ,		
A9. For a building v	vith an attach	ed garage:					
a) Square foot	age of attach	ed garage		640.00 sq ft			
b) Number of p	permanent flo	od openings in the att	tached ga	arage within 1	I.0 foot above adja	acent grade)_
c) Total net ar	ea of flood op	enings in A9.b	-0-	sq	in		
d) Engineered	flood openin	gs? Yes 🗵 N	lo				
	SE	CTION B - FLOOD	NSURA	NCE RATE	MAP (FIRM) INF	ORMATION	
B1. NFIP Commun SOUTHWEST RAI	-	community Number 91		B2. County BROWARD	Name		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		АН	+5.00 NAVD 198	3
1		Base Flood Elevation Community Deter				l in Item B9:	
B11. Indicate elev	ation datum ı	used for BFE in Item E	39: 🔲 N	GVD 1929	NAVD 1988	Other/Source:	
B12. Is the building	g located in a	a Coastal Barrier Reso	ources Sy	ystem (CBRS) area or Otherwis	se Protected Area (OPA)? ☐ Yes ☒ No
Designation	-		CBRS	OPA			
				Land			

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

IMPORTANT: In these spaces, copy the correspond	ling information fror	n Section A.	FOR IN	SURANC	E COMPANY USE
Building Street Address (including Apt., Unit, Suite, and 4918 S.W. 158TH AVENUE	d/or Bldg. No.) or P.O	. Route and Box No.	Policy N	lumber:	
•	State Florida	ZIP Code 33331	Compar	ny NAIC N	lumber
SECTION C BUILDING	ELEVATION INFO	RMATION (SURVEY R	EQUIRE	D)	
	en construction of the en construction diagram spectrum of the end of th	Building Under Construction Building is complete. By the BFE, Book B	Chec 7.30 7.78 N/A 7.27 7.82 5.50 7.00 N/A		
This certification is to be signed and sealed by a land I certify that the information on this Certificate repres statement may be punishable by fine or imprisonmer Were latitude and longitude in Section A provided by	ents my best efforts to nt under 18 U.S. Code	o interpret the data availa e, Section 1001. 	able. I und	derstand t	ation information. that any false e if attachments.
Certifier's Name FRANCISCO F. FAJARDO	License Numbe #4767	er			CO F. FA/
Title PROFESSIONAL SURVEYOR AND MAPPER Company Name LANNES AND GARCIA, INC. Address 4967 S.W. 75TH AVENUE City MIAMI,	Francisco F Fajardo State Florida	Digitally signed by Francisco Fajardo DN: c=US, o=Lannes and Garcta Inc., dnQualifier=A01410C000001 BA221916500003FD7, cn=Francisco F Fajardo Date: 2022.10.25 09:25:40 -04'00' ZIP Code 33155	7 * PRO	N	CO F. FAJARDO O. 4767 ** FATE OF LORIDA SURVEYOR INTERIOR SURVEYOR SURVEYOR INTERIOR SURVEYOR INTERIOR SURVEYOR INTERIOR SURVEYOR SURVE
Signature Copy all pages of this Elevation Certificate and all attack	Date 10-21-2022	Telephone (305) 666-7909	Ext.	moany ar	nd (3) building owner
Comments (including type of equipment and location CROWN OF ROAD= 4.95 C2-A= (RECESSED SHOWER) C2-B= (FINISHED FLOOR ELEVATION) C2-E= A/C PAD (SOUTH SIDE OF THE HOUSE) GPS UNIT USED (GARMIN ETREX H)	******				(S) Palianing Office

(J)

IMPORTANT: In these spaces, copy the correspond			FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and 4918 S.W. 158TH AVENUE	l/or Bldg. No.) or P.	O. Route and Box No.	Policy Number:				
•	State	ZIP Code	Company NAIC Number				
000111120111211201	Florida	33331	T BEOLUBED)				
SECTION E – BUILDING EL FOR ZONI	E AO AND ZONE	A (WITHOUT BFE)	i reguled)				
For Zones AO and A (without BFE), complete Items E1 complete Sections A, B, and C. For Items E1–E4, use nenter meters.	atural grade, if avai	lable. Check the measur	rement used. In Puerto 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). a) Top of bottom floor (including basement,							
crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is	<u> </u>						
, ,							
E2. For Building Diagrams 6–9 with permanent flood of the next higher floor (elevation C2.b in the diagrams) of the building is	penings provided if	feet _ met					
E3. Attached garage (top of slab) is		[] feet [] met	ters above or below the HAG.				
E4. Top of platform of machinery and/or equipment servicing the building is		feet met	ters above or below the HAG.				
E5. Zone AO only: If no flood depth number is availab floodplain management ordinance?	le, is the top of the l	oottom floor elevated in a n. The local official mus	accordance with the community's st certify this information in Section G.				
SECTION F – PROPERTY OW	NER (OR OWNER'	S REPRESENTATIVE)	CERTIFICATION				
The property owner or owner's authorized representation community-issued BFE) or Zone AO must sign here. T							
Property Owner or Owner's Authorized Representative		Solidio A, B, and E are e	or box to the box of the months ago.				
			710.0.1.				
Address	Cit	ty	State ZIP Code				
Signature	Da	ate	Telephone				
Comments							
			Check here if attachments.				

	MPORTANT: In these spaces, copy the corresponding information from Section A.							
Building Street Address (including Apt., Unit, St	uite, and/or Bldg. No.) or	P.O. Route and Box N	No. Policy Number:					
4918 S.W. 158TH AVENUE	State	ZIP Code	Company NAIC Number					
OUTHWEST RANCHES,	Florida	33331	Company 14 to Hamber					
SECTION	ON G - COMMUNITY IN	FORMATION (OPTIO	NAL)					
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. Complete th	e community's floodpla e applicable item(s) ar	ain management ordinance can complete nd sign below. Check the measurement					
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.	on E for a building locate	ed in Zone A (without a	a FEMA-issued or community-issued BFE)					
G3. The following information (Items G4-	-G10) is provided for con	nmunity floodplain mar	nagement purposes.					
G4. Permit Number	G5. Date Permit Issue	ed	G6. Date Certificate of Compliance/Occupancy Issued					
G7. This permit has been issued for:	New Construction	Substantial Improveme	ent					
G8. Elevation of as-built lowest floor (including of the building:	g basement)		feet meters Datum					
G9. BFE or (in Zone AO) depth of flooding at	the building site:		feet meters Datum					
G10::Community's design flood elevation:			feet meters Datum					
Local Official's Name		Title						
Community Name		Telephone						
Signature		Date						
Comments (including type of equipment and lo	cation, per C2(e), if appl	icable)						
			Check here if attachments.					

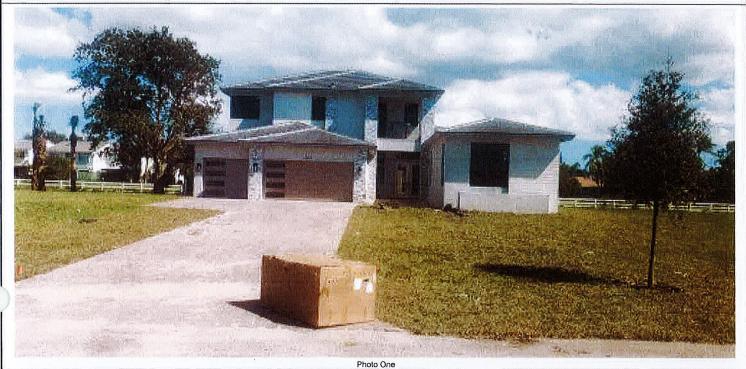
ELEVATION CERTIFICATE

See Instructions for Item A6.

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.					
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4918 S.W. 158TH AVENUE					
State	ZIP Code	Company NAIC Number			
SOUTHWEST RANCHES, Florida 33331					
	nit, Suite, and/or Bldg. No.) State	nit, Suite, and/or Bldg. No.) or P.O. Route and Box No. State ZIP Code			

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.



LOT 24-FINISHED CONSTRUCTION FRONT VIEW 10-21-2022 Photo One Caption

Clear Photo One

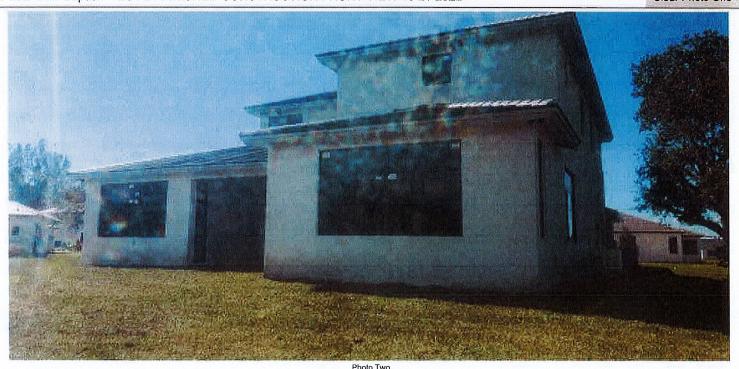


Photo Two

Photo Two Caption LOT 24-FINISHED CONSTRUCTION REAR VIEW 10-21-2022

Clear Photo Two

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., t 4918 S.W. 158TH AVENUE	Policy Number:		
у	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

Photo Three Caption LOT 24-FINISHED CONSTRUCTION LEFT SIDE VIEW 10-21-2022

Clear Photo Three



Photo Four

Photo Four Caption LOT 24-FINISHED CONSTRUCTION RIGHT SIDE VIEW 10-21-2022

Clear Photo Four

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 US						
A1. Building Owner's Name		Policy Number:				
Tony Caula						
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg Box No.	No.) or P.O. Route and	Company NAIC Number:				
4801 SW 199th Avenue						
	tate	ZIP Code				
	lorida 	33332				
A3. Property Description (Lot and Block Numbers, Tax Parcel Num Lot 10, block 2, Seligman -Durango Estates, PB 96/99, Broward Co						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Acce	ssory, etc.) Residential					
A5. Latitude/Longitude: Lat. N 26° 03' 34" Long. W 080	24' 55" Horizontal Datun	n: NAD 1927 X NAD 1983				
A6. Attach at least 2 photographs of the building if the Certificate is	being used to obtain flood insura	ance.				
A7. Building Diagram Number1A						
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 e	nclosure(s) within 1.0 foot above	adjacent grade N/A				
c) Total net area of flood openings in A8.b	A sq in					
d) Engineered flood openings?						
A9. For a building with an attached garage:						
a) Square footage of attached garage400.	<u>00</u> sq ft					
b) Number of permanent flood openings in the attached garage	within 1.0 foot above adjacent g	grade 0				
c) Total net area of flood openings in A9.b	0.00 sq in					
d) Engineered flood openings? Yes 🔀 No						
SECTION B – FLOOD INSURANCE	RATE MAP (FIRM) INFORMA	TION				
i '	County Name	B3. State				
Unincorporated Areas / 120691 Brow	<i>y</i> ard	Florida				
B4. Map/Panel B5. Suffix B6. FIRM Index Date Effective Effective	Zone(s) (Z	Base Flood Elevation(s) Zone AO, use Base Flood Depth)				
12011C0280 K 02-18-2005 Revised 02-18-2005	AH 7					
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: X 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: CBRS OPA						

	W				
MPORTANT: In these spaces, copy the corresponding			-		E COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or 4801 SW 199th Avenue	r Bldg. No.) or P.	O. Route and Box No.		Number:	
City Sta Southwest Ranches Flor	te rida	ZIP Code 33332	Compa	any NAIC N	Number
SECTION C – BUILDING EL	EVATION INFO	RMATION (SURVEY	REQUIRE	ED)	
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when construction		Building Under Const	ruction*	⊠ Finisł	ned Construction
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 BM 3304 EL 7.22 Feet Vertical Datum: NGVD 1929					
Indicate elevation datum used for the elevations in it	tems a) through l	n) below.			
	Source:				
Datum used for building elevations must be the same	ne as that used fo	or the BFE.	Ch	ook the me	easurement used.
To a file the set floor (in all editor le compart execules		o floor)	9.3	K feet	meters
a) Top of bottom floor (including basement, crawlsp	bace, or enclosur	e 11001)	N/A		
b) Top of the next higher floor					meters
c) Bottom of the lowest horizontal structural member	er (V Zones only)		N/A	⊠ feet	meters
d) Attached garage (top of slab)			8.1	★ feet	meters
 e) Lowest elevation of machinery or equipment ser (Describe type of equipment and location in Com 	vicing the buildin nments)	g 	9.3	$\overline{\times}$ feet	meters
f) Lowest adjacent (finished) grade next to building	(LAG)		6.4		meters
g) Highest adjacent (finished) grade next to building	g (HAG)		7.9	× feet	meters
h) Lowest adjacent grade at lowest elevation of dec structural support		ding	N/A		meters
SECTION D - SURVEYOR	, ENGINEER, O	R ARCHITECT CERT	FICATIO	N	
This certification is to be signed and sealed by a land su I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment un	s mv best efforts	to interpret the data ava	by law to ilable. I ui	certify elev	ration information. that any false
Were latitude and longitude in Section A provided by a li				Check her	e if attachments.
Certifier's Name	License Numb	er			Digitally signed by lingely
Lincoln Iturrey, PSM	L. S. 5719			incoln	Digitally signed by lincoln D lturrey DN: c=US, o=Florida,
Title Professional Surveyor and Mapper				turrey	dnQualifier=A01410C0000
Company Name Lincoln Iturrey P. A. L. B. 8190	***************************************		2	inale	tim
				and the second	CONTIUNA RTIFICA COL
Address P O Box 755			11	5/2027	STATE OF
City	State	ZIP Code		THE ST	ONALSUNETOR
Long Key	Florida	33001		**	"Innamanana"
Signature lincoln D Iturrey	Date 11-05-2022	Telephone (305) 664-2727	Ext.		
Copy all pages of this Elevation Certificate and all attachme	ents for (1) comm	unity official, (2) insuranc	e agent/c	ompany, ar	d (3) building owner
Comments (including type of equipment and location, per This Elevation Certificate is not valid without the original were obtained with LABINS.ORG, the lowest equipment	photos and origin	nal signature and raised	seal from	the surve	yor. Lat and Long.

MPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE							
Building Street Address (including Apt., Unit, Suite, 4801 SW 199th Avenue	and/or Bldg. No.) o	r P.O. Rou	te and Box No.	Policy Number:			
Southwest Ranches	State Florida	ZIP (3333	Code 32	Company NAIC I	Number		
SECTION E – BUILDING FOR ZO	ELEVATION INFO			REQUIRED)			
For Zones AO and A (without BFE), complete Items complete Sections A, B,and C. For Items E1–E4, us enter meters.	E1–E5. If the Certice natural grade, if	ificate is int available. C	ended to support a Check the measure	a LOMA or LOMR- ment used. In Pue	F request, rto 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). a) Top of bottom floor (including basement,							
crawlspace, or enclosure) is	<u> </u>	····	feet mete	rs 🔲 above or	below the HAG.		
b) Top of bottom floor (including basement, crawlspace, or enclosure) is			☐ feet ☐ mete	rs 🔲 above or	below the LAG.		
E2. For Building Diagrams 6–9 with permanent floo the next higher floor (elevation C2.b in the diagrams) of the building is	d openings provide	ed in Section	n A Items 8 and/or	<u> </u>	of Instructions),		
E3. Attached garage (top of slab) is			☐ feet ☐ mete	rs 🔲 above or	below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is			☐ feet ☐ mete	rs above or	below the HAG.		
E5. Zone AO only: If no flood depth number is avai floodplain management ordinance? Yes	lable, is the top of t	he bottom lown. The	floor elevated in ac local official must	ccordance with the certify this informa	community's tion in Section G.		
SECTION F - PROPERTY C	WNER (OR OWN	ER'S REPI	RESENTATIVE) C	ERTIFICATION			
he property owner or owner's authorized represent community-issued BFE) or Zone AO must sign here	tative who complete . The statements in	es Sections Sections	s A, B, and E for Zo A, B, and E are co	one A (without a Fi rrect to the best of	EMA-issued or my knowledge.		
Property Owner or Owner's Authorized Representat	ive's Name						
Address		City	S	ate	ZIP Code		
Signature		Date	Te	elephone			
Comments							
				Check h	ere if attachments.		

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 4801 SW 199th Avenue	Box No. Policy Number:						
Sity State ZIP Code	Company NAIC Number						
Southwest Ranches Florida 33332	- Ingarry						
SECTION G - COMMUNITY INFORMATION (O	PTIONAL)						
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 Section E for a building located in Zone A (with or Zone AO.	nout a FEMA-issued or community-issued BFE)						
G3. The following information (Items G4–G10) is provided for community floodplain	n management purposes.						
G4. Permit Number G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued						
G7. This permit has been issued for:	vement						
G8. Elevation of as-built lowest floor (including basement) of the building:	feet meters Datum						
39. BFE or (in Zone AO) depth of flooding at the building site:	feet meters Datum						
G10. Community's design flood elevation:	feet meters Datum						
Local Official's Name Title							
Community Name Telephone							
Signature Date							
Comments (including type of equipment and location, per C2(e), if applicable)							
	Check here if attachments.						

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Ut 801 SW 199th Avenue	Policy Number:		
Jity	Company NAIC Number		
Southwest Ranches	Florida	33332	

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 Front view 11/05/2022

ELEVATION CERTIFICATE

Clear Photo One



Photo Two

Photo Two Caption Rear view 11/05/2022

Clear Photo Two

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., 1801 SW 199th Avenue	Policy Number:		
Jity	Company NAIC Number		
Southwest Ranches	Florida	33332	

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 Rear and side view 11/05/2022

Clear Photo Three



Photo Four

Photo Four Caption Rear and side view 11/05/2022

Clear Photo Four Form Page 6 of 6