U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

CMB No. 1860-0008 Expiration Date: November 30, 2022

Important: Follow the instructions on pages 1-9.

| y all pages of this | Litty College | ION A - PROPERTY | MEORM | MOITA | | FOR INSU | ny, and (3) building owner RANCE COMPANY USE |
|--|---|---|--|--|--|--|--|
| | SECT | ION A - PROPERTY | MITOKIN | With the season of the season | romande 1905 digenero. Ca conclinator escencidades de la concentración de | Policy Nun | nber: |
| 1. Building Owne | | | sociator sensonas interestá la Ro-deficia | | SOMEON COLUMN A DE TONIS DE LA COLUMN ACCUSATION ACCUSA | | NAIC Number: |
| Box No. | | luding Apt., Unit, Suite | e, and/or E | aldg. No.) er | P.O. Route and | Company | TAILO FROME |
| 100 SW 190TH A | VENUE | | | State | igi e mana, may ann unique dan dan entira unique de mai (dal unique aux dandes | ZIP Code | |
| City | | | | Florida | | 33332 | The second was been as the second |
| SOUTHWEST | | nd Block Numbers, Ta | x Parcel N | Number, Lea | al Description, e | tc.) | |
| OT 67, LESS THE | E SOUTH 25 I | FEET & I.ESS THE V | VES1 23 F | EEI, GRIFF | 114 O.40 1 m. | annum rece table of the same is record or many december the same annual form | GE: 22 |
| 4. Building Use (| e.g., Residen | tial, Non-Residential, | Addition, A | Accessory, 6 | etc.) RESIDE | NIAL | 4003 EJ NAD 1983 |
| inno Nahudite L 3 | tude: Lat 26 | 0.042758N | Long80 | 0.401169VV | Horizoni | ar Datum. | 1927 🗵 NAD 1983 |
| 6. Attach at least | 2 photograph | ns of the building if the | e Certifica | te is being i | sed to bacom my | (1) 11 (02) (11) | |
| 7. Building Diagr | | | | | | | |
| | | pace or enclosure(s): | | | | | |
| Day some for | anna of crawl | enace or enclosure(s) |) | | N/A sq ft | | |
| a) Equation of | n memonant de | od openings in the cr | awispaca | or enclosure | (s) within 1.0 for | et above adjacent g | rade IN/A |
| b) Number of | permanentic | seriore in AA h | | N/A sqin | | | |
| c) Total net al | lea or noon of | senings in A8.b | | | | CINIA | |
| | | - fame) (*****) | | 1 1 1 M. | party. | 1 | Luca |
| d) Engineered | d flood openin | ngs? ☐Yes ⊠I | No. | | OR | 101111 | |
| | | | No. | | OR | IGINA | |
| se For a building | with an attack | ned garage: | | | | IGIAM | |
| A9. For a building | with an attack | ned garage: | | N/A sq fi | | | |
| A9. For a buildinga) Square foob) Number of | with an attect tage of attach permanent flo | ned garage: ned garage nod openings in the a | ttached ga | N/A sq fl | t 1.0 foot above a | | |
| A9. For a buildinga) Square foob) Number of | with an attect tage of attach permanent flo | ned garage: | ttached ga | N/A sq fl | t 1.0 foot above a | | |
| A9. For a buildinga) Square foob) Number ofc) Total net at | with an attack tage of attack permanent flo rea of flood op d flood openin | ned garage: ned garage nod openings in the a penings in A9.b ugs? Yes 🔀 | ttached ga | N/A sq fl wage within N/A sq | t 1.0 foot above a i in | diacent grade N/A | |
| A9. For a building a) Square foo b) Number of c) Total net as d) Engineered | with an attack stage of attack permanent flo rea of flood opening | ned garage: ned garage nod openings in the acceptance in A9.5 ngs? Yes X | ttached ga | N/A sq ff wrage within N/A sq NCE RATE | t 1.0 foot above a in MAP (FIRM) II | diacent grade N/A | |
| A9. For a building | with an attack stage of attack permanent flo rea of flood opening d flood opening Signify Name & C | ned garage: ned garage nod openings in the all penings in A9.b ngs? Yes X ECTION B - FLOOD Community Number | ttached ga | N/A sq fl wage within N/A sq | 1.0 foot above a in MAP (FIRM) II | diacent grade N/A | B3. State Florida |
| a) Square foo b) Number of c) Total net al d) Engineered 31. NFIP Commun SOUTHWEST RA | with an attack stage of attack permanent flo rea of flood op d flood openin Si nity Name & C NCHES-1206 | ned garage: ned garage nod openings in the all penings in A9.b ngs? Yes X ECTION B - FLOOD Community Number | No INSURA | N/A sq fl wage within N/A sq NCE RATE B2. County BROWARD | 1.0 foot above a in MAP (FIRM) II | VFORMATION | B3. State Florida |
| A9. For a building a) Square foo b) Number of c) Total net an d) Engineered B1. NFIP Commun SOUTHWEST RA | with an attack stage of attack permanent flo rea of flood op d flood openin Si nity Name & C NCHES-1206 | ned garage: ned garage nod openings in the all penings in A9.b gs? Yes X ECTION B - FLOOD Community Number 191 B6: FIRM Index | No INSURA B7. FIR | N/A sq fi wage within N/A sq NCE RATE B2. County BROWARD | 1.0 foot above a fin MAP (FIRM) II Name BS. Flood Zone(s) AH | VFORMATION | B3. State Florida |
| a) Square foo b) Number of c) Total net al d) Engineered 31. NFIP Commun SOUTHWEST RA 4. Map/Panel Number 2011C0520 | with an attack tage of attack permanent flores of flood opening flood opening Signify Name & C NCHES-1206 85. Suffix III | ned garage: ned garage ned garage ned garage ned openings in the argument openings in A9.b gs? Yes X ECTION B - FLOOD Community Number 191 B6. FIRM Index Date 08-18-2014 Base Flood Elevation Community Dete | No IMSURA B7. FIR Effe Rev 08-18-2 | N/A sq flarage within N/A sq N | 1.0 foot above a fin MAP (FIRM) If Name D BS, Flood Zone(s) Alt | B9. Base Floor (Zone AC, 5.0' | B3. State Florida 1 Elevation(s) use Base Flood Depth) |
| a) Square foo b) Number of c) Total net an d) Engineered 31. NFIP Commun SOUTHWEST RA 4. Map/Panel Number 2011C0520 310. Indicate the | with an attack stage of attack permanent flores of flood opening flood opening Signify Name & C NCHES-1206 85. Suffix In the source of the lie X FIRM valued datum of | ned garage: ned garage ned garage ned garage ned openings in the all penings in A9.b gs? Yes X ECTION B - FLOOD Community Number 191 B6: FIRM Index Date 08-18-2014 Base Flood Elevation Community Dete | No INSURA B7. FIR Effe Rev 08-18-2 In (BFE) de | N/A sq flarage within N/A sq N | 1.0 foot above a fin MAP (FIRM) II Name D BS. Flood Zore(s) AH flood depth enter | B9. Base Floor (Zone AC, 5.0' | B3. State Florida I Elevation(s) use Base Flood Depth) |
| A9. For a building a) Square foo b) Number of c) Total net al d) Engineered B1. NFIP Commun SOUTHWEST RA 4. Map/Panel Number 2011C0520 B10. Indicate the ☐ FIS Profit | with an attack stage of attack permanent flo rea of flood opening flood opening SI nity Name & C NCHES-1206 85. Suffix Id source of the le X FIRM wation datum in | ned garage: ned garage ned garage penings in the argument openings in A9.b ggs? Yes X ECTION B - FLOOD Community Number 191 B6: FIRM Index Date 08-18-2014 Base Flood Elevation Community Dete | No INSURA B7. FIR Effe Rev 08-18-2 In (BFE) de | N/A sq flarage within N/A sq N | 1.0 foot above a fin MAP (FIRM) II Name D BS. Flood Zore(s) AH flood depth enter | B9. Base Floor (Zone AC, 5.0' | B3. State Florida 1 Elevation(s) use Base Flood Depth) |

ELEVATION CERTIFICATE

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

| PORTANT: In these spaces, copy the corresponding Information from Section A. | | | | FOR INSURANCE COMPANY USE | | |
|--|--|---|-----------------------|--|--|--|
| Building Street Address (including Apt., Unit, Suite, a 6100 SW 190TH AVENUE | nd/or Bldg. No.) or P.O. Route | e and Box No. | | Number: | | |
| City SOUTHWEST RANCHES | State ZIP 0 Florida 33333 | | Compa | any NAIC N | lumber | |
| SECTION C - BUILDIN | G ELEVATION INFORMATI | ON (SURVEY R | EQUIRI | ED) | | |
| C1. Building elevations are based on: Consi *A new Elevation Certificate will be required will | | ing Under Constru a is complete. | uction* | X Finisi | ned Construction | |
| C2. Elevations – Zones A1–A30, AE, AH, A (with E Complete Items C2.a–h below according to the Benchmark Utilized: COUNTY BENCHMARK | BFE), VE, V1–V30, V (with BF e building diagram specified in | E), AR, AR/A, AR I liem A7. In Puert | AE, AR | /A1–A30, / only, enter | AR/AH, AR/AO. meters. | |
| indicate elevation datum used for the elevation | | <i>f.</i> | | | | |
| ☐ NGVD 1929 ☑ NAVD 1988 ☐ C Datum used for building elevations must be th | Other/Source: e same as that used for the Bl | | Ch | eck the me | asurement used. | |
| a) Top of bottom floor (including basement, c | rawispace, or enclosure floor) | | 9.0 | ⊠ feet | meters | |
| b) Top of the next higher floor | | | N/A | | meters | |
| b) Top or the next higher floor Bottom of the lowest horizontal structural in | nember (V Zones only) | : | N/A | ⊠ feet | meters | |
| d) Attached garage (top of slab) | (१४८८) व्यक्तिका क्षेत्र कार्याच्या क्षेत्र क्षेत्र स्थापन | , | 8.1 | ⊠ feet | ☐ meters | |
| E) Lowest elevation of machinery or equipme (Describe type of equipment and location is | ent servicing the building n Comments) | | 7.0 | ⊠ feet | meters | |
| f) Lowest adjacent (finished) grade next to b | | | 7,6 | ∑ feet | meters | |
| g) Highest adjacent (finished) grade next to t | | | 7,8 | ★ feet | meters | |
| h) Lowest adjacent grade at lowest elevation structural support | | | N/A | ⊠ feet | rneters | |
| SECTION D - SURVI | EYOR, ENGINEER, OR ARC | HITECT CERTIF | ICATIC | N | | |
| This certification is to be signed and sealed by a la I certify that the information on this Certificate repr statement may be punishable by fine or imprisonn | and surveyor, engineer, or ard resents my best efforts to inter- ment under 18 U.S. Code, Sec | nitect authorized b pret the data avail ifon 1001. | y law to able. I u | certify elev nderstand | ration information. that any false | |
| Were latitude and longitude in Section A provided | by a licensed land surveyor? | ⊠Yes □No | | Check her | e if attachments. | |
| Certifier's Name DANIEL L. CARNAHAN | License Number #3002 | Attibility province and the second | | | 1/2/2010 | |
| Title REGISTERED LAND SURVEY | The state of the s | · · · · · · · · · · · · · · · · · · · | | | 45 St 2002 | |
| Company Name DENI CARNAHAN, INC. | | | | | 344 | |
| Address P.O. BOX 938858 | Company of the Compan | ZIP Code | | | ie alator | |
| City MARGATE | State Florida | 33093 | | ja. | and the same of th | |
| Signature | Date 04-01-2022 | Telephone (954) 971-0540 | | | 86. | |
| Copy all pages of this Elevation Certificate and all a | | fficial, (2) insurance | e agent/ | company, a | nd (3) building owner. | |
| Comments (including type of equipment and local NOTE: LATITUDE & LONGITUDE WERE ESTABLITHE BUILDING IS ON THE GENERATOR PAD L | SCISHED BY GOOGLE EARTI | H. LOWEST ELENIDE OF THE BUIL | ATION DING. | OF MACH | INERY SERVICING | |
| | | | | | | |
| Ferransamental separation of the properties of t | e, marketjant y në deponde njamoton, mororital primë i monobelomet i mëtota, tje bëtota dësprimore mark yene | | - | 4 M. M. A. | Enery Page 2 of | |

ELEVATION CERTIFICATE

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

| IMPORTANT: In these spaces, copy the corn | FOR INSURANCE COMPANY USE | | |
|---|--|--|---|
| Building Street Address (including Apt., Unit, S 6100 SW 190TH AVENUE | uite, and/or Bldg. No.) or P | P.O. Route and Box No. | Policy Number: |
| City SOUTHWEST RANCHES | State Florida | ZIP Code 33332 | Company NAIC Number |
| SECTION E - BUILD | DING ELEVATION INFOF DR ZONE AO AND ZONE | RMATION (SURVEY NO A (WITHOUT BFE) | OT REQUIRED) |
| For Zones AO and A (without BFE), complete complete Sections A, B, and C. For Items E1-t enter meters. | Items E1-E5. If the Certific E4, use natural grade, if av | cate is intended to supportailable. Check the measu | t a LOMA or LOMR-F request, rement used. In Puerto Rico only, |
| E1. Provide elevation information for the follow the highest adjacent grade (HAG) and the | e lowest adjacent grade (L | oriate boxes to show when | her the elevation is above or below |
| Top of bottom floor (including baseme crawlspace, or enclosure) is | · · · · · · · · · · · · · · · · · · · | [feet [] me | eters above or below the HAG. |
| Top of bottom floor (including baseme crawlspace, or enclosure) is | ent, | [feet] me | eters above or below the LAG. |
| E2. For Building Diagrams 6–9 with permane the next higher floor (elevation G2,b in | nt flood openings provided | I in Section A Items 8 and | |
| the diagrams) of the building is E3. Attached garage (top of slab) is | | [] feet [] m | |
| E4. Top of platform of machinery and/or equi servicing the building is | ipment | | eters above or below the HAG. |
| E5. Zone AO only: If no flood depth number floodplain management ordinance? | is available, is the top of th | n hottom floor elevated in | accordance with the community's |
| | RTY OWNER (OR OWNE | | |
| The property owner or owner's authorized recommunity-issued BFE) or Zone AO must sign Property Owner or Owner's Authorized Representations. | grinere. The statements in | es Sections A, B, and E to Sections A, B, and E are | or Zone A (without a FEMA-Issued of ecorrect to the best of my knowledge. |
| Address | 77 (6) | City | State ZIP Code |
| Signature | and the state of t | Date | Telephone |
| Comments | | | |
| Commission | | • | |
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| | | | Check here if attachments |

ELEVATION CERTIFICATE

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

| EVATION CERTIFICATE | and the second s | Irom Saction A | FOR INSURANCE COMPANY USE |
|--|--|--|---|
| PORTANT: In these spaces, copy to illding Street Address (including Apt., | te corresponding information to | P.O. Route and Box N | |
| uilding Street Address (including Apt., | Other and or pidg. 1404 or | - the transfer of the second s | |
| | State | ZIP Code | Company NAIC Number |
| ty DUTHWEST RANCHES | Florida | 33332 | |
| | SECTION G - COMMUNITY IN | ORMATION (OPTIO | NAL) |
| sections A, B, C (or E), and G of this c sed in Items G8–G10. In Puerto Rico The information in Section C engineer, or architect who is | only, enter meters. was taken from other documents authorized by law to certify elevately. | ation that has been sig ation information. (Indi | ain management ordinance can complete and sign below. Check the measurement gned and sealed by a licensed surveyor, cate the source and date of the elevation |
| or Zone AO. | ted Section E for a building locations G4–G10) is provided for cor | | a FEMA-issued or community-issued BFE) nagement purposes. |
| 33. The following information (II | ems G4-G10) is provided for cor | influinty noodplant | |
| G4. Permit Number | G5. Date Permit Issue | ed | G6. Date Certificate of Compliance/Occupancy Issued |
| G9. BFE or (in Zone AO) depth of fi | | Title | ☐ feet ☐ meters Datum |
| Local Official's Name | | litte | |
| Community Name | | Telephone | |
| Signature | | Date | |
| _ | | T. S. J. J. | |
| Comments (including type of equipm | nent and location, per C2(e), if ap | plicable) | |
| | | | * |
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| | The state of the s | | Form Page |

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

| , | | | Expiration Date: 11010/1100/ Col Zon |
|---|-------------------------------|---------------------------|--------------------------------------|
| IMPORTANT: In these spaces, copy the | FOR INSURANCE COMPANY USE | | |
| Building Street Address (including Apt., U 6100 SW 190TH AVENUE | nit, Suite, and/or Bldg. No.) | or P.O. Route and Box No. | Policy Number: |
| City SOUTHWEST RANCHES | State Florida | ZIP Code 33332 | 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 FRONT VIEW-DATE TAKEN 04/01/2022

Clear Photo One



Photo Two

Photo Two Caption REAR VIEW-DATE TAKEN 04/01/2022

Clear Photo Two