# **ELEVATION CERTIFICATE** Important: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Ce	ertificate and all attachments for (	(1) community	official (2) insurance	agent/company and	(3) building owner
			$\gamma$ omolal, $(Z)$ mouthing	agony company, and	(0) building owner.

			. ,			
SECTION A – PROPERTY INFORMATION						RANCE COMPANY USE
A1. Building Owner's Name Policy Number: MARTIN, DAYANNA H & MARTIN, NELSON F. Policy Number:						ber:
Box No.						
18900 SW 49 STREET						
City			State		ZIP Code	
SOUTHWEST RANCHES			Florida		33332	
A3. Property Description (Lot a The E1/2 of Lot 1,"Griffin 345 F					,	cords of B County,Fl.
A4. Building Use (e.g., Reside	ntial, Non-Residential,	Addition	, Accessory,	etc.) Residentia	al	
A5. Latitude/Longitude: Lat.	N 26.058172°	Long. V	V-80.400228°	Horizonta	l Datum: 🗌 NAD 1	927 🛛 NAD 1983
A6. Attach at least 2 photogra	phs of the building if th	e Certific	ate is being ι	ised to obtain floo	d insurance.	
A7. Building Diagram Number	1B					
A8. For a building with a crawl	space or enclosure(s):					
a) Square footage of craw	/lspace or enclosure(s)			N/A sq ft		
b) Number of permanent f	lood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foot	t above adjacent gra	ade N/A
c) Total net area of flood o	openings in A8.b		N/A sq ir	I		
d) Engineered flood open	ings? 🗌 Yes 🗵 N	No				
A9. For a building with an attac	hed garage:					
a) Square footage of attached garageN/A sq ft						
b) Number of permanent f	lood openings in the at	tached g	arage within	1.0 foot above adj	acent grade N/A	
c) Total net area of flood o	openings in A9.b		N/A sq	in		
d) Engineered flood openi	ngs? 🗌 Yes 🖂 N	No				
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name &	Community Number		B2. County			B3. State
Southwest Ranches	120691		Bro	ward-County		Florida
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	Effe	RM Panel ective/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
12011 C 0540 H	08-18-2014	08-18-2	vised Date 2014	AH	5'	
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 E	89: 🗌 N	GVD 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				

ELEVATION CERTIFICATE			OMB No. 1660-0008 Expiration Date: November 30, 2022
IMPORTANT: In these spaces, copy the o	corresponding information from	Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Uni 18900 SW 49 STREET	it, Suite, and/or Bldg. No.) or P.O.	Route and Box No.	Policy Number:
City SOUTHWEST RANCHES		ZIP Code 33332	Company NAIC Number
SECTION C – I	BUILDING ELEVATION INFOR	MATION (SURVEY F	REQUIRED)
<ul> <li>C1. Building elevations are based on:</li> <li>*A new Elevation Certificate will be re</li> <li>C2. Elevations – Zones A1–A30, AE, AH</li> <li>Complete Items C2.a–h below accorr</li> <li>Benchmark Utilized: <u>BM# R-2335 Ele</u></li> <li>Indicate elevation datum used for the</li> <li>NGVD 1929 × NAVD 19</li> </ul>	equired when construction of the b l, A (with BFE), VE, V1–V30, V (wi ding to the building diagram speci ev= 6.167' Vertical Da e elevations in items a) through h)	th BFE), AR, AR/A, AF fied in Item A7. In Pue tum: NGVD 1929	
Datum used for building elevations m	nust be the same as that used for t	the BFE.	
<ul><li>a) Top of bottom floor (including bas</li><li>b) Top of the next higher floor</li><li>c) Bottom of the lowest horizontal study</li><li>d) Attached garage (top of slab)</li></ul>		floor)	Check the measurement used.8.0 $\times$ feetmetersN/A $\times$ feetmetersN/A $\times$ feetmeters7.5 $\times$ feetmeters
<ul> <li>e) Lowest elevation of machinery or (Describe type of equipment and I</li> </ul>	equipment servicing the building location in Comments)		7.4 X feet meters
f) Lowest adjacent (finished) grade	next to building (LAG)		7.0 × feet meters
g) Highest adjacent (finished) grade	next to building (HAG)		7.3 × feet meters
<ul> <li>h) Lowest adjacent grade at lowest e structural support</li> </ul>	elevation of deck or stairs, includir	ng	N/A ⊠ feet ☐ meters
SECTION D -	- SURVEYOR, ENGINEER, OR	ARCHITECT CERTII	FICATION
This certification is to be signed and seale I certify that the information on this Certific statement may be punishable by fine or in Were latitude and longitude in Section A p	cate represents my best efforts to mprisonment under 18 U.S. Code,	interpret the data avail Section 1001.	by law to certify elevation information. lable. I understand that any false
Certifier's Name Arturo R. Toirac	License Number 3102		
Title Professional Land Surveyor and Mapper Company Name			Cense Number
Vizcaya Surveying and Mapping Inc.			
Address 13217 S.W. 46th Lane			
City Miami	State Florida	ZIP Code 33175	ar Surveyor and
Signature	Date 07-05-2020	Telephone (305) 223-6060	Ext.
Copy all pages of this Elevation Certificate a	and all attachments for (1) commun	ity official, (2) insurance	e agent/company, and (3) building owner.
Comments (including type of equipment a A5. Latitude and Longitude obtained using C2.e) Machinery or equipment (A/C) are to The property have two garage one is locat	g GPS receiver (Projection FL Eas ocated at the west side of the prop	st). perty elevacion=7.40'ai	

OMB No.	1660-0	0008		
Expiration	Date:	November	30,	2022

ELEVATION CERTIFICATE			Expiration Date: November 30, 2022			
IMPORTANT: In these spaces, copy the corresp	oonding information	on 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. 18900 SW 49 STREET		Policy Number:				
City SOUTHWEST RANCHES	State Florida	ZIP Code 33332	Company NAIC Number			
	SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)					
For Zones AO and A (without BFE), complete Iten complete Sections A, B,and C. For Items E1–E4, enter meters.	use natural grade, i	f available. Check the measur	rement used. In Puerto Rico only,			
<ul> <li>E1. Provide elevation information for the following the highest adjacent grade (HAG) and the low</li> <li>a) Top of bottom floor (including basement,</li> </ul>			er the elevation is above or below			
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet met	ers above or below the HAG.			
crawlspace, or enclosure) is E2. For Building Diagrams 6–9 with permanent flo	od openings provid	feet met				
the next higher floor (elevation C2.b in the diagrams) of the building is		feet met				
E3. Attached garage (top of slab) is		feet 🗌 met	ers above or below the HAG.			
E4. Top of platform of machinery and/or equipme servicing the building is	nt	feet 🗌 met	ers 🗌 above or 🗌 below the HAG.			
E5. Zone AO only: If no flood depth number is av floodplain management ordinance? [] Yes			accordance with the community's t certify this information in Section G.			
SECTION F – PROPERTY	OWNER (OR OW	NER'S REPRESENTATIVE)	CERTIFICATION			
The property owner or owner's authorized represe community-issued BFE) or Zone AO must sign he	entative who comple re. The statements	etes Sections A, B, and E for Z in Sections A, B, and E are co	Zone A (without a FEMA-issued or prrect to the best of my knowledge.			
Property Owner or Owner's Authorized Represent	ative's Name					
Address		City	State ZIP Code			
Signature		Date 1	elephone			
Comments						
			Check here if attachments.			

OMB No.	1660-0	8000		
Expiration	Date:	November	30,	2022

ELEVATION CERTIFICATE			Expiration Date: November 30, 2022
IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 18900 SW 49 STREET			No. Policy Number:
City SOUTHWEST RANCHES	State Florida	ZIP Code 33332	Company NAIC Number
SECTIO	ON G – COMMUNIT	Y INFORMATION (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, er	n Certificate. Comple Iter meters.	ete the applicable item(s) ar	nd sign below. Check the measurement
G1. G1. G1. G1. G1. G1. G1. G1.	en from other docur ed by law to certify	elevation information. (Indi	gned and sealed by a licensed surveyor, cate the source and date of the elevation
G2. A community official completed Sect or Zone AO.	ion E for a building l	ocated in Zone A (without a	a FEMA-issued or community-issued BFE)
G3. The following information (Items G4-	-G10) is provided fo	r community floodplain mar	nagement purposes.
G4. Permit Number	G5. Date Permit	ssued	G6. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	] New Construction	n 🗌 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
Local Official's Name		Title	
Community Name		Telephone	
Signature		Date	
Comments (including type of equipment and lo	cation, per C2(e), if	applicable)	
			Check here if attachments.

## **ELEVATION CERTIFICATE**

## **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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

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City	State	ZIP Code	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 Caption

## FRONT VIEW (07--05-2020)

Clear Photo One



Photo Two Caption

REAR VIEW (07--05-2020)

Clear Photo Two

## **ELEVATION CERTIFICATE**

## **BUILDING PHOTOGRAPHS**

**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., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 18900 SW 49 STREET			Policy Number:
City	State	ZIP Code	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

RIGHT VIEW (07--05-2020)

Clear Photo Three



Photo Four Caption

LEFT VIEW (07--05-2020)

Clear Photo Four

FEMA Form 086-0-33 (12/19)

Replaces all previous editions.

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