

Federal Emergency Management Agency  
ELEVATION CERTIFICATE

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16

OMB Control Number: 1660-0008  
Expiration: 11/30/2018

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

Handwritten initials: JAO

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name  
**NICIEZA FAUSTO & TENDERO ALYNE**

FOR INSURANCE COMPANY USE  
Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
**17500 SW 58<sup>TH</sup> STREET**

Company NAIC Number:

City **SOUTH WEST RANCHES** State **FL** Zip Code **33330**

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
**SEE ID #5040-31-01-0591 BROWARD COUNTY PROPERTY APPRAISER**

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **RESIDENTIAL**

A5. Latitude/Longitude: Lat. **26.046564°N** Long. **80.382248W** Horizontal Datum:  NAD 1927  NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number **1B**

A8. For a building with a crawlspace or enclosure(s): A9. For a building with an attached garage:

- a) Square footage of crawl space or enclosure(s) **N/A** sq ft
- a) Square foot age of attached garage **N/A** sq ft
- b) Number of permanent flood openings in the or enclosure(s) with in 1.0 foot above adjacent grade **N/A**
- b) Number of permanent flood openings crawlspace in the attached garage within 1.0 foot above adjacent grade **N/A**
- c) Total net area of flood openings in A8.b **N/A** sq in
- c) Total net area of flood openings in A9.b **N/A** sq in
- d) Engineered flood openings?  Yes  No
- d) Engineered flood openings?  Yes  No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
**TOWN OF SOUTHWEST RANCHES / 120691**

B2. County Name  
**BROWARD**

B3. State  
**FL**

B4. Map/Panel Number  
**12011C0520**

B5. Suffix  
**H**

B6. FIRM Index Date  
**08-08-2014**

B7. FIRM Panel Effective/Revised Date  
**08-18-2014**

B8. Flood Zone(s)  
**AH**

B9. Base Flood Elevation(s) (Zone AO, use base flood depth)  
**6.00**

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:  NGVD1929  NAVD1988  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

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished 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.

\*A new Elevation Certificate will be required when construction of the building is complete.

Benchmark Utilized: **#2366** Vertical Datum: **NGVD 1929**

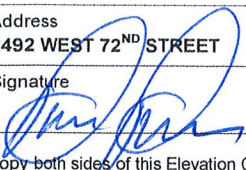
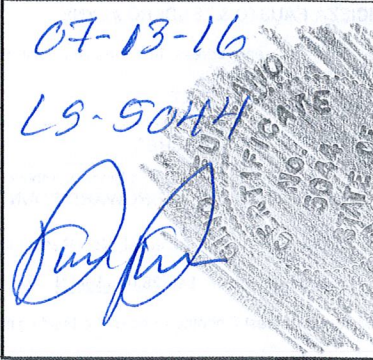

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  
 Other/Source: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE. Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) **10.05**  feet  meters
- b) Top of the next higher floor **N/A**  feet  meters
- c) Bottom of the lowest horizontal structural member (V zones only) **N/A**  feet  meters
- d) Attached garage (top of slab) **N/A**  feet  meters
- e) Lowest elevation of machinery of equipment servicing the building (Describe type of equipment and location in Comments) **9.72**  feet  meters
- f) Lowest adjacent (finished) grade next to building (LAG) **8.90**  feet  meters
- g) Highest adjacent (finished) grade next to building (HAG) **9.12**  feet  meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support **N/A**  feet  meters

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SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION				
<p>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 maybe punishable by fine or imprisonment under 18 U.S. Code, Section 1001.</p>				
<input checked="" type="checkbox"/> Check here if attachments.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Certifier's Name <b>GINO FURLANO</b>		License Number <b>5044</b>		
Title <b>SURVEYOR &amp; MAPPER</b>		Company Name <b>J.A.F SURVEYING SERVICES INC</b>		
Address <b>2492 WEST 72<sup>ND</sup> STREET</b>		City <b>HIALEAH</b>	State <b>FL</b>	ZipCode <b>33016</b>
Signature 		Date <b>07-13-16</b>	Telephone <b>786-416-1018</b>	
				
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.				
Comments (including type of equipment and location, per C2 (e), if applicable) <b>LAT &amp; LONG OBTAINED FROM GOOGLE MAPS, CROWN OF ROAD ELEVATION +6.93'. ELEVATION ON ITEM C2-e APPLIES TO A/C ELEV= 9.72 'SLAB LOCATED LEFT SIDE OF THE HOUSE</b>				
Signature 		Date 07-13-16		
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)				
For Zones AO and A (without BFE), complete Items E1 - E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B and C. For Items E1 - E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.				
E.1 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 _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG				
b) Top of bottom floor (including basement, crawlspace or enclosure) is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG				
E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG				
E3. Attached Garage (top of slab) is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG				
E4. Top of platform of machinery and / or equipment servicing the building is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG				
E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown. The local official must certify this information in Section G.				
SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION				
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.				
Address				
		City	State	ZIP Code
Signature				
		Date	Telephone	
Comments				
<input type="checkbox"/> Check here if attachments.				



# BUILDING PHOTOGRAPHS

See instructions for Item A6

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<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	<b>FOR INSURANCE COMPANY USE</b>
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City <b>SOUTHWEST RANCHES</b> State <b>FL</b> Zip Code <b>33331</b>	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.

FRONT VIEW:



REAR VIEW:



# BUILDING PHOTOGRAPHS

Continuation Page

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City <b>SOUTHWEST RANCHES</b>	State <b>FL</b>	Zip Code <b>33331</b>	Company NAIC Number:

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.

LEFT SIDE VIEW:



RIGHT SIDE VIEW:

