

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 USE
A1. Building Owner's Name ALEJANDRA PIEDRA	(Not Valid For Use For Any Other Person or Entity)	Policy Number:
A2. Building Street Address (Including Apt., Unit, Suite, and/or Bldg. No. or P.O. Route and Box No.) 5350 SW. 162 AVE.		Company NAIC Number:

City SOUTHWEST RANCHES	State FL	ZIP Code 33331
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A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
LOT 1, AND PORTION OF LOT 7, SHAWNS ACRE, PB. 178, PG. 1, BROWARD COUNTY RECORDS

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

A5. Latitude/Longitude: Lat. **26.055047** Long. **-80.363007** 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: **1A**

A8. For a building with a crawlspace of enclosure(s):

a) Square footage of crawlspace or enclosure(s) **N/A** sq. ft.

b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade **N/A**

c) Total net area of flood openings in A8.b **N/A** sq. in.

d) Engineered flood openings? Yes No

A9. For a building with an attached garage:

a) Square footage of attached garage **NA** sq. ft.

b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade **0**

c) Total net area of flood openings in A9.b **NA** sq. in.

d) Engineered flood openings? Yes No

SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION			
B1. NFIP Community Name & Community Number SOUTHWEST RANCHES 120691	B2. County Name BROWARD COUNTY	B3. State FL	
B4. Map/Panel Number 12011C540	B5. Suffix H	B6. Firm Index Date 8-18-2014	B7. FIRM Panel Effective/Revised Date 8-18-2014
		B8. Flood Zone(s) AH	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 5.00'

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: 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: **NA** CBRS OPA

ELEVATION CERTIFICATE

OMB No: 1660-008

Expiration Date: November 30, 2018

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.) 5350 SW. 162 AVE.	FOR INSURANCE COMPANY USE Policy Number:
City SOUTHWEST RANCHES	Company NAIC Number:
State FL	Zip Code 33331

SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building Elevations are Based on: Construction Drawings* Building Under Construction* Finished Construction

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

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: COUNTY 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.

a) Top of Bottom Floor (including basement, crawlspace, or enclosure floor) **5.21** feet meters
b) Top of 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 or equipment servicing the building (Describe type of equipment and location in Comments) **N/A** feet meters
f) Lowest adjacent (finished) grade next to building (LAG) **5.0** feet meters
g) Highest adjacent (finished) grade next to building (HAG) **5.1** feet meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support **N/A** feet meters

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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 may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments.

Certifier's Name:
Pedro Luis Martinez

Title:
Professional Surveyor & Mapper

Company Name:
Martinez and Martinez Enterprises, Inc.

Address:
7179 West 13th Avenue

City:
Hialeah

State:
FL

Zip Code:
33014

Date:
4-24-2017

Telephone:
786-277-4851

License Number:
LS #5443 – STATE OF FLORIDA

Not Valid without the signature and the original raised seal of a Florida Licensed Surveyor & Mapper.

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Comments (including type of equipment and location, per C2(e), if applicable).
USED GOOGLE EARTH TO OBTAIN LAT. AND LONG.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6

OMB No: 1660-008
Expiration Date: November 30, 2018

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 Box No.
5350 SW .162 AVE.

Policy Number:

City

SOUTHWEST RANCHES

State
FL

Zip Code
33331

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 Caption: **BACK VIEW**



Photo Two Caption: **FRONT VIEW**
FEMA Form 086-0-33 (7/15)

Replaces all previous editions