

18-4314

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 LUNA					Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 14741 SUNSET LANE					Company NAIC Number:	
City SOUTHWEST RANCHES		State Florida		ZIP Code 33330		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) S 1/2 TRACT 16, SEC. 3, T51S, R40E, EVERGLADES SUGAR AND LAND CO. SUB. (PB 2, PG 39, DCR)						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>POOL HOUSE</u>						
A5. Latitude/Longitude: Lat. <u>N 26.0410</u> Long. <u>W 80.3448</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 <u>1A</u>						
A8. For a building with a crawlspace or enclosure(s):						
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft						
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>						
c) Total net area of flood openings in A8.b <u>N/A</u> sq in						
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
A9. For a building with an attached garage:						
a) Square footage of attached garage <u>N/A</u> sq ft						
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>						
c) Total net area of flood openings in A9.b <u>N/A</u> sq in						
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number SOUTHWEST RANCHES 120691			B2. County Name BROWARD		B3. State Florida	
B4. Map/Panel Number 120011 CO 540	B5. Suffix H	B6. FIRM Index Date 08-18-2014	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) 5	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____						
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA						

ELEVATION CERTIFICATE

OMB No. 1660-0008
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. 14741 SUNSET LANE			Policy Number:		
City SOUTHWEST RANCHES	State Florida	ZIP Code 33330	Company NAIC Number		

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: BROWARD BM# 3394 Vertical Datum: NAVD 1988 (6.19)

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) | 8.22 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab) | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building
(Describe type of equipment and location in Comments) | 8.17 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | 7.90 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | 8.10 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> 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 DAVID G. KRAUSE	License Number 4066	<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">4066</div> <div style="border: 2px dashed black; border-radius: 50%; padding: 20px; display: inline-block;"> <div style="text-align: center; font-weight: bold; font-size: 1.5em;">Place Seal Here</div> </div> <div style="font-size: 1.5em; font-family: cursive; margin-top: 10px;">David Krause</div>
Title PRESIDENT		
Company Name BNB SERVICES INC.		
Address 11550 NW 21 STREET		
City PLANTATION	State Florida	
Signature <i>David Krause</i>	Date 12/16/19	Telephone (954) 650-1833

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Comments (including type of equipment and location, per C2(e), if applicable)
A5). LATITUDE AND LONGITUDE DATA IS OBTAINED FROM THE GOOGLE WEBSITE
C2e). TOP OF CONCRETE PAD FOR AIR CONDITIONER

BUILDING PHOTOGRAPHS

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See Instructions for Item A6.

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City SOUTHWEST RANCHES	State Florida	ZIP Code 33330	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 NORTH SIDE VIEW

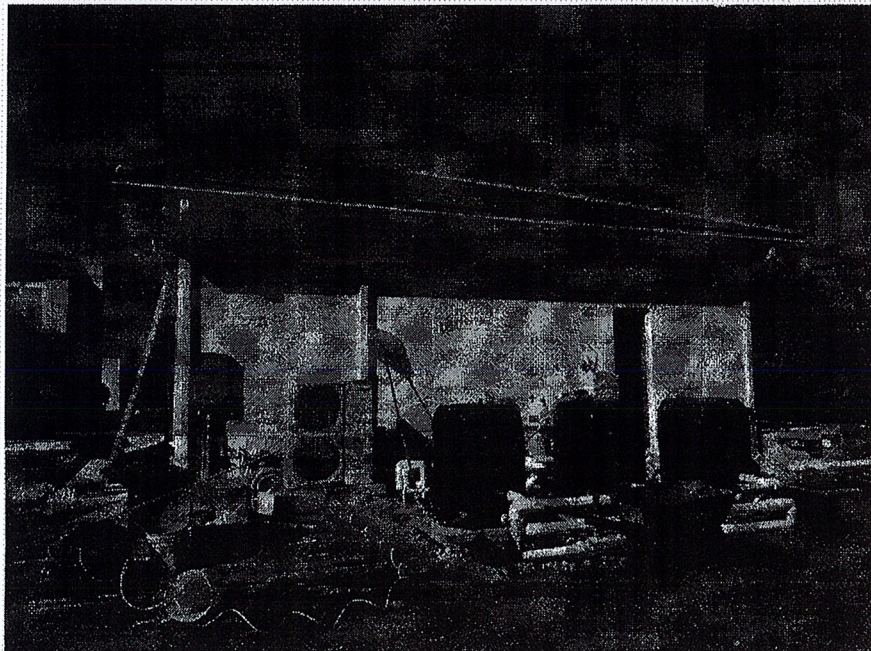


Photo Two

Photo Two Caption EAST SIDE VIEW

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BUILDING PHOTOGRAPHS

Continuation Page

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City SOUTHWEST RANCHES	State Florida	ZIP Code 33330	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.

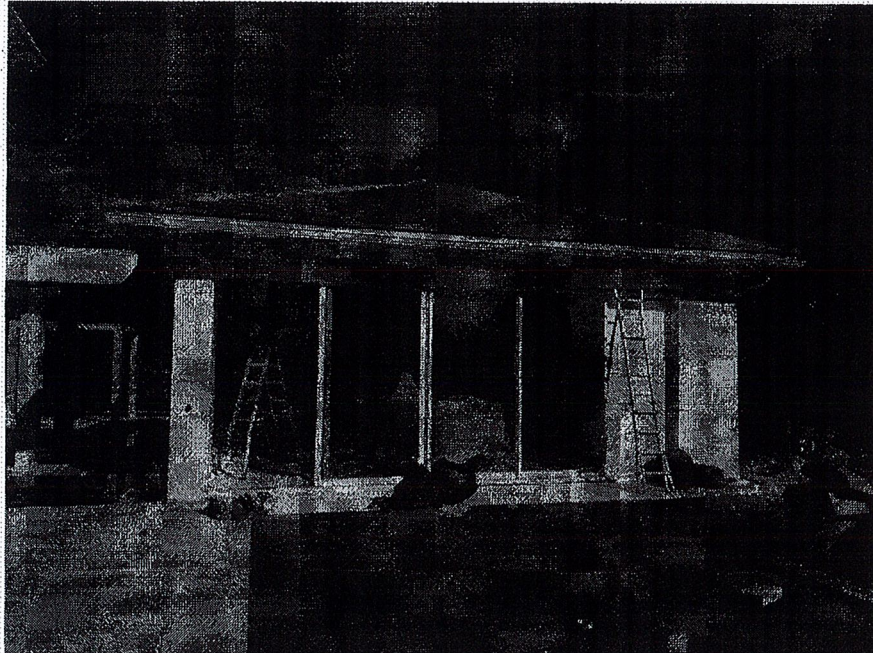


Photo Three

Photo Three Caption SOUTH SIDE VIEW



Photo Four

Photo Four Caption WEST SIDE VIEW