U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

ELEVATION CERTIFICATE

National Flood Insurance Program

IMPORTANT: Follow the instructions on pages 1–9.

OMB No. 1660-0008 Expiration Date: July 31, 2015

				FOR INSURA	NCE COMPANY USE		
A1. Building Owner's Name Migdalia M. Bello W.O. 15-5838 FB750, pg 6				Policy Number:	0.00		
A2. Building Street Address (including Apt., Unit, St 514 Bond Street	ite, and/or Bldg.				Company NAIC		
City Clewiston		Stat	^e FL	Z	IP Code 334	140	
A3. Property Description (Lot and Block Numbers, T General Plan of Clewiston, Blk 416, Lots	15-16				F		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat. N26deg 45' 00 0" Long. W80deg 55' 58.8" 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 9 A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 21 b) Number of permanent flood openings in the attached garage b) Number of permanent flood openings in the attached garage							
or enclosure(s) within 1.0 foot above adjace c) Total net area of flood openings in A8.b	100 100 100 100 100 100 100 100 100 100			rithin 1.0 foot above otal net area of floor	, ,	,, ,	
	☑ No		-	ngineered flood ope		Yes 🔀 No	
	- FLOOD INSU	College of the Colleg		M) INFORMATIO	N		
B1. NFIP Community Name & Community Number Clewiston, City of 120108		B2. County Nam Hendry	е			B3. State FL	
* = n	M Index Date 1/06/2015	B7. FIRM Panel Revised Dat 07/06/2	e	B8. Flood Zone(s		Flood Elevation(s) (Zone se base flood depth) 17	
B10. Indicate the source of the Base Flood Elevation ☐ FIS Profile ☐ FIRM ☐ Community Deta			tered in Ite	m B9:			
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other/Source: ☐ ☐ Othe							
SECTION C – B	UILDING ELEV	ATION INFOR	ATION (SURVEY REQUIR	ED)		
 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: Local Vertical Datum: NAVD88						· ·	
Indicate elevation datum used for the elevations	s in items a) throu	ugh h) below. 🔲			☐ Other/Sou	Irce:	
Datum used for building elevations must be the	same as that us	ed for the BFE.		Check the me	easurement u	sed.	
a) Top of bottom floor (including basement, crav	vispace, or enclos	sure floor)	<u>17</u> . <u>6</u>	feet			
b) Top of the next higher floorc) Bottom of the lowest horizontal structural me	mbor (V Zonos o	nlu)	<u>18</u> . <u>2</u> V/A				
d) Attached garage (top of slab)	ember (v Zones o		V/A	⊠ feet ⊠ feet			
e) Lowest elevation of machinery or equipment (Describe type of equipment and location in			N/A	\bigsize feet	meters		
f) Lowest adjacent (finished) grade next to build	ding (LAG)		<u>16</u> . <u>6</u>	feet	☐ meters		
g) Highest adjacent (finished) grade next to buil	0, ,	-	<u>17</u> . <u>0</u>	Ifeet	meters		
h) Lowest adjacent grade at lowest elevation of structural support	deck or stairs, in	ncluding	<u> </u>	X 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.							
☐ Check here if comments are provided on back of fo☐ Check here if attachments.	rm. Were lat			on A provided by a		-	
Certifier's Name Franklin A. Shutts License Number LS2780					PLACE SEAL		
Title Professional Surveyor and Mapper	Compan Johnso	y Name on Prewitt & As	sociates,	Inc.		HERE	
Address 850 West Ventura Avenue Signature	City Clewis		State FL Telephone	ZIP Code 33440			

ELEVATION CERTIFICATE, page 2

IMPORTANT: in these spaces, copy the corr	esponding information from Section A.	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit,	Suite, and/or Bldg. No.) or PO. Route and Box	x No. Policy Number:			
514 Bond Street	State ZIP Code	Company NAIC Number:			
Clewiston	FL 33440				
	SURVEYOR, ENGINEER, OR ARCHITEC				
	for (1) community official, (2) insurance agent	t/company, and (3) building owner.			
Comments Bottom floor elevation shown above is of the covered rear porch.					
Signature	Date				
		UIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)			
For Items E1–E4, use natural grade, if available	ble. Check the measurement used. In Puerto				
grade (HAG) and the lowest adjacent grad	de (LAG).	w whether the elevation is above or below the highest adjacent			
a) Top of bottom floor (including basemer b) Top of bottom floor (including basemer					
 b) Top of bottom floor (including basemer E2. For Building Diagrams 6–9 with permaner 	nt, crawlspace, or enclosure) is nt flood openings provided in Section A Items	- Development			
the next higher floor (elevation C2.b in th		feet meters above or below the HAG.			
E3. Attached garage (top of slab) is		☐ feet ☐ meters ☐ above or ☐ below the HAG.			
	ipment servicing the building is				
	s available, is the top of the bottom floor eleva wn. The local official must certify this informat	rated in accordance with the community's floodplain management tion in Section G.			
SECTION F - I	PROPERTY OWNER (OR OWNER'S RE	PRESENTATIVE) CERTIFICATION			
The property owner or owner's authorized reg. Zone AO must sign here. The statements in S	oresentative who completes Sections A, B, and Sections A, B, and E are correct to the best of	d E for Zone A (without a FEMA-issued or community-issued BFE) or f my knowledge.			
Property Owner or Owner's Authorized Repres	sentative's Name				
Address	City	State ZIP Code			
Signature	Date	Telephone			
Comments					
		Check here if attachments.			
	SECTION G - COMMUNITY INFORMA	ATION (OPTIONAL)			
The local official who is authorized by law or of G of this Elevation Certificate. Complete the a	rdinance to administer the community's floodpl pplicable item(s) and sign below. Check the me	lain management ordinance can complete Sections A, B, C (or E), and easurement used in Items G8–G10. In Puerto Rico only, enter meters.			
G1 The information in Section C was to	aken from other documentation that has bee	en signed and sealed by a licensed surveyor, engineer, or architect			
who is authorized by law to certify e	elevation information. (Indicate the source ar	nd date of the elevation data in the Comments area below.)			
	tion E for a building located in Zone A (withou 4–G10) is provided for community floodplain	nt a FEMA-issued or community-issued BFE) or Zone AO. management purposes.			
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued			
G7. This permit has been issued for:	New Construction Substantial Improve				
G8. Elevation of as-built lowest floor (including	· · · · · · · · · · · · · · · · · · ·	feet meters Datum			
G9. BFE or (in Zone AO) depth of flooding at		Geet meters Datum			
G10.Community's design flood elevation:		Geet meters Datum			
Local Official's Name	Title				
Community Name	Telepho	one			
Signature	Date				
Comments					
		Check here if attachments.			

ELEVATION CERTIFICATE, page 3

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., 514 Bond Street	Policy Number:	
City Clewiston	State ZIP Code FL 33440	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

ELEVATION CERTIFICATE, page 4

BUILDING PHOTOGRAPHS

Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., 514 Bond Street	Unit, Suite, and/or Bldg. No.) or PO). Route and Box No.	Policy Number:
City Clewiston	State FL	ZIP Code 33440	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.



Rear View