FIMAL ELEV CERT. 11/4/08 ELEVATION CERTIFICATE

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expires February 28, 2009

Important: Read the instructions on pages 1-8.

National Flood insulance Flogram Important. Neac			
	- PROPERTY INFORM	ATION	For Insurance Company Use:
A1. Building Owner's Name LARRY SOLOMON			Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No 508 ISLE OF PALMS	o.) or P.O. Route and Box N	0.	Company NAIC Number
City FT. LAUDERDALE State FL ZIP Code 33301			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, LOT 13, BLOCK 1 OF STILWELL LISLES P.B. 15, PG. 34, B.C.R. FOLI		0	
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade 0  c) Total net area of flood openings in A8.b 0	ng used to obtain flood insur A9. For a b sq ft a) Squ b) No. wal sq in c) Tot	uilding with an attact uare footage of attac of permanent flood Is within 1.0 foot abo al net area of flood o	ned garage, provide: hed garage <u>560</u> sq ft openings in the attached garage ve adjacent grade <u>3</u> penings in A9.b <u>957</u> sq in
SECTION B - FLOOD INSUR	ANCE RATE MAP (FIRM		
B1. NFIP Community Name & Community Number B2. Co FT. LAUDERDALE 125105 BROW	ounty Name /ARD		33. State L
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date 12011C0219 F 10/2/97	B7. FIRM Panel Effective/Revised Date 8/18/92	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 6'
□ FIS Profile □ FIRM □ Community Determined  B11. Indicate elevation datum used for BFE in Item B9: □ NGVD 19  B12. Is the building located in a Coastal Barrier Resources System (CBF Designation Date □ □ C		Other (Describe)	 □Yes ⊠No
SECTION C - BUILDING ELEVA	TION INFORMATION (S	URVEY REQUIRE	ED)
SECTION C - BUILDING ELEVA  C1. Building elevations are based on:  *A new Elevation Certificate will be required when construction of the  C2. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (was below according to the building diagram specified in Item A7.  Benchmark Utilized CITY OF FT. LAUDERDALE Vertical Datum National Conversion/Comments SEE COMMENTS	☐ Building Under building is complete. with BFE), AR, AR/A, AR/AE,	Construction*	☑ Finished Construction , AR/AO. Complete Items C2.a-g
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spaces, c	opy the corresponding inform	nation from Secti	on A.	Fo	r Insurance Company Use:
Juress (including Apt.,	Unit, Suite, and/or Bldg. No.) or P.0	O. Route and Box N	0.	Po	olicy Number
City FT. LAUDERDALE State FL ZIP	Code 33301			Co	ompany NAIC Number
SECTION	D - SURVEYOR, ENGINEER, (	OD ADCUITECT	CEDTIFICATI	ON (CONTIN	IIIED)
					OED)
Copy both sides of this Elevation Certific Comments Lowest machinery elevation					eat switch which will provent the
elevator cab from descending below BF Bench Marks Field Book No. 1385, Pgs	E in the event of the pit being flood	led. This complies w	ith FEMA Tech	nical Bulletin 4-	·93. JOB #ALS-SU-04-2807
Mittel					
Signature ROBERT L. THOMPSON		Date 10/30/	08		
SECTION E - BUILDING ELEV	VATION INFORMATION (SURV	/EY NOT REQUIR	ED) FOR 70	NE AO AND	ZONE A (WITHOUT BFE)
b) Top of bottom floor (including E2. For Building Diagrams 6-8 with p (elevation C2.b in the diagrams)	grade, if available. Check the measing the following and check the appropriate the grade (LAG). It is basement, crawl space, or enclosure basement, crawl space, or enclosure basement flood openings provided it of the building is	urement used. In Puriate boxes to show the lis re) is re) is re) is respection A Items 8 great meters [	uerto Rico only, whether the ele feet m feet m and/or 9 (see p above or m	enter meters. vation is above neters  above neters above neters  above age 8 of Instruct below the HAG	e or below the highest adjacent e or below the HAG. e or below the LAG. ctions), the next higher floor
E3. Attached garage (top of slab) is		rs above or			- □ holow the HAC
<ul><li>E4. Top of platform of machinery and</li><li>E5. Zone AO only: If no flood depth</li></ul>					
	Unknown. The local official must				munity 5 noodplain management
OF OTION			COPAGEATIVE	\ OFFITIES	TION
	F - PROPERTY OWNER (OR				
The property owner or owner's authorized Zone AO must sign here. The state	ments in Sections A, B, and E are c			nout a FEMA-IS	sued or community-issued BFE)
Property Owner's or Owner's Authorize ROBERT L. THOMPSON LICENSE N					
Address 1150 E ATLANTIC BLVD		City POMPANO	BEACH	State FL	ZIP Code 33060
Signature		Date 09/08/08		Telephone 9	54-782-1441
Comments					
	SECTION G - COMMUN	ITY INFORMATIO	N (OPTIONA	41)	Check here if attachments
The local official who is authorized by la	w or ordinance to administer the cor	mmunity's floodplain	management of	ordinance can c	complete Sections A, B, C (or E),
and G of this Elevation Certificate. Com					
is authorized by law to certify	was taken from other documentation elevation information. (Indicate the	source and date of t	he elevation da	ta in the Comn	nents area below.)
	d Section E for a building located in ns G4G9.) is provided for commun			•	ued BFE) or Zone AO.
G4. Permit Number	G5. Date Permit Issued	G6.	Date Certifica	te Of Complian	ce/Occupancy Issued
G7. This permit has been issued for:	☐ New Construction ☐ S	Substantial Improven	nent		
G8. Elevation of as-built lowest floor (inc	duding basement) of the building: _	fee	t 🔲 meters (P	R) Datum	_
G9. BFE or (in Zone AO) depth of flooding	ng at the building site:		t 🔲 meters (F	R) Datum	_
Local Official's Name		Title			
Community Name		Telephon	e		
Signature		Date			
Comments					
					☐ Check here if attachments

## Building Photographs See Instructions for Item A6.

	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 508 ISLE OF PALMS	Policy Number
City FT. LAUDERDALE State FL ZIP Code 33301	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page, following.



FRONT VIEW 9/3/08



FRONT VIEW 9/3/08



SIDE VIEW 9/3/08



**SIDE VIEW 9/3/08** 



REAR VIEW 9/3/08



REAR VIEW 9/3/08





SIDE VIEW 9/3/08



SIDE VIEW 9/3/08



DOCK 9/3/08

## Building Photographs Continuation Page

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	For Insurance Company Use: Policy Number		
City State FL ZIP Code	, oney rainbe		
	Company NAIC Number		
If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify a photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View."			