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

OMB No. 1660-0008 Expiration Date: November 30, 2018

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.

C14373 SECTION A – PROPERTY INFORMATION					FOR INSUR	ANCE COMPANY USE
A1. Building Owner's Name DORIS ADCOCK Policy Number:					oer:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.12117 CYPRESS LANE					Company N	AIC Number:
City CLERMONT			State FL		ZIP Code 34711	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) SECTION 18, TOWNSHIP 23 SOUTH, RNAGE 26 EAST						
A4. Building Use (A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL					
A5. Latitude/Longit	ude: Lat. <u>28</u>	3°29'23.36"N L	ong. 81°45'15.84"W	Horizontal Datum	: □NAE	0 1927 ⊠NAD 1983
A6. Attach at least	2 photograph	s of the building if the	Certificate is being used t	o obtain flood insura	nce.	
A7. Building Diagra	m Number 1	В				
A8. For a building v	vith a crawlsp	pace or enclosure(s):		•		
a) Square foot	age of crawls	pace or enclosure(s)	N/a sq ft			
b) Number of	permanent flo	od openings in the cra	wispace or enclosure(s) v	vithin 1.0 foot above	adjacent gra	ade <u>0</u>
c) Total net are	ea of flood op	enings in A8.b 0	sq in			
d) Engineered	flood opening	gs? □Yes ⊠	No			
A9. For a building v	A9. For a building with an attached garage:					
a) Square footage of attached garage N/A sq ft						
b) Number of	permanent flo	od openings in the atta	ached garage within 1.0 fo	oot above adjacent g	rade 0	
c) Total net area of flood openings in A9.b 0 sq in						
d) Engineered flood openings?						
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Communi 120421 LAKE COU	•	•	B2. County Name	Э		B3. State Florida
B4. Map/Panel Number 12069C0650	B5. Suffix E	B6. FIRM Index Date 12/18/2012	B7. FIRM Panel Effective/ Revised Date 12/18/2012	B8. Flood Zone(s) AE	(Zoi	te Flood Elevation(s) ne AO, use Base od Depth)
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:						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐Yes ☒No						
Designation Date: ☐CBRS ☐OPA						
			•			

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 12117 CYPRESS LANE				r:
City CLERMONT	State FL	ZIP Code 34711	Company NA	C Number
SECTION C - BU	ILDING ELEVATION IN	FORMATION (SURVE	Y REQUIRED)	,
C1. Building elevations are based on:	☐Construction Drawings	s* Building Under (Construction*	ished Construction
*A new Elevation Certificate will be requ	ired when construction of	the building is complete	€.	
C2. Elevations – Zones A1–A30, AE, AH, A Complete Items C2.a–h below accordin Benchmark Utilized: SJWM 096-12-629	g to the building diagram	V (with BFE), AR, AR/A specified in Item A7. In I Datum: NAVD88	A, AR/AE, AR/A1–A3 Puerto Rico only, en	0, AR/AH, AR/AO. ter meters.
Indicate elevation datum used for the el ☐NGVD 1929 ☑NAVD 19	·	gh h) below.		
Datum used for building elevations mus		d for the BFE.	_	**************************************
				measurement used.
a) Top of bottom floor (including basem	nent, crawispace, or encic	,		□meters
b) Top of the next higher		<u>N/A</u>	⊠feet	☐meters
c) Bottom of the lowest horizontal struc	tural member (V Zones o		⊠feet	☐meters
d) Attached garage (top of slab)		<u>N/A</u>	⊠feet	☐meters
 e) Lowest elevation of machinery or eq (Describe type of equipment and location 		ding <u>N/A</u>	⊠feet	☐meters
f) Lowest adjacent (finished) grade ne	- ', '	<u>99.82</u>	⊠feet	☐meters
 g) Highest adjacent (finished) grade ne h) Lowest adjacent grade at lowest ele structural support 		<u>100.6</u> cluding <u>N/A</u>	<u>⊠</u> feet ⊠feet	☐meters ☐meters
This certification is to be signed and sealed I certify that the information on this Certificat statement may be punishable by fine or impl Were latitude and longitude in Section A pro	e represents my best effo risonment under 18 U.S. (rts to interpret the data a Code, Section 1001.	available. I understa	elevation information. Ind that any false Ok here if attachments
			LINO EXOLIE	SK Here II attachments
Certifier's Name Kenneth J. Osborne	License Nu 6415	ımber		H 1-0.8 8 3
Title Registered Professional Surveyor				N6/6415 * (*)
Company Name COMPASS				Mar
Address 6250 N Military Trail #102	,			6/61/20/9
City West Palm Beach	State FL	ZIP Code 33407	0,44	Tarjula V
Signature	Date	Telephone		
Tel Mobile	7/31/2018	(561)640-48		
Copy all pages of this Elevation Certificate and	d all attachments for (1) co	mmunity official, (2) insur	ance agent/company	, and (3) building own
Comments (including type of equipment and LAT AND LONG PROVIDED BY		olicable)		·
UNDER CONSTRUCTION ELEVA UNKNOWN EQUIP PAD ELEV AI				
ONKINOWN EQUIT TAD ELEV AI	YELD GANAGE REIU.	111		

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C14373 IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/12117 CYPRESS LANE	Policy Number:			
City S CLERMONT F		IP Code 4711	Company NAIC Number	
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-complete Sections A, B,and C. For Items E1-E4, use na enter meters.				
E1. 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 b) Top of bottom floor (including basement,	·	☐feet ☐meters ☐	above or Delow the HAG	
crawlspace, or enclosure) is		☐feet ☐meters ☐	above or ∐below the LAG	
E2. For Building Diagrams 6–9 with permanent flood op	enings provided in Se	ction A Items 8 and/or	9 (see pages 1–2 of Instructions),	
the next higher floor (elevation C2.b in the diagrams) of the building is		☐feet ☐meters ☐]above or □below the HAG	
E3. Attached garage (top of slab) is		☐feet ☐meters ☐]above or □below the HAG	
E4. Top of platform of machinery and/or equipment servicing the building is		□feet □meters □	above or □below the HAG	
E5. Zone AO only: If no flood depth number is available floodplain management ordinance?			cordance with the community's lify this information in Section G.	
SECTION F - PROPERTY OWN	ER (OR OWNER'S RE	EPRESENTATIVE) CE	ERTIFICATION	
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.				
	e statements in Sectio	ns A, B, and E are cor	rect to the best of my knowledge.	
community-issued BFE) or Zone AO must sign here. The Property Owner or Owner's Authorized Representative's	e statements in Sectio	ns A, B, and E are cor	rect to the best of my knowledge.	
	e statements in Sectio	ns A, B, and E are cor	rect to the best of my knowledge.	
Property Owner or Owner's Authorized Representative's	e statements in Sectio s Name	ns A, B, and E are cor	rect to the best of my knowledge.	
Property Owner or Owner's Authorized Representative's Address	e statements in Sections Name	ns A, B, and E are cor	rect to the best of my knowledge.	
Property Owner or Owner's Authorized Representative's Address Signature	e statements in Sections Name	ns A, B, and E are cor	rect to the best of my knowledge.	
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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 12117 CYPRESS LANE				Policy Number:		
City CLERMONT	State FL	ZIP Code 34711		Company NAIC Number		
SECTION	SECTION G - COMMUNITY INFORMATION (OPTIONAL)					
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.						
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)						
G2. A community official completed Section Zone AO.	ion E for a building loca	ted in Zone A (witho	out a FEMA	\-issued or community-issued BFE)		
G3. The following information (Items G4-	-G10) is provided for co	mmunity floodplain ı	manageme	ent purposes.		
G4. Permit Number	G5. Date Permit Issu	ed		Date Certificate of compliance/Occupancy Issued		
G7. This permit has been issued for:	☐New Construction	☐Substantial Impr	rovement			
G8. Elevation of as-built lowest floor (including of the building:	g basement)	<u>'</u>]feet □m	eters Datum		
G9. BFE or (in Zone AO) depth of flooding at	the building site:	·]feet □m	eters Datum		
G10. Community's design flood elevation:]feet □m	eters Datum		
Local Official's Name Title						
Community Name		Telephone				
Signature		Date				
Comments (including type of equipment and location, per C2(e), if applicable)						
				☐Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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C14373 IMPORTANT: In these s	A. FOR INSURANCE COMPANY USE		
Building Street Address (including 12117 CYPRESS LANE	lo. Policy Number:		
City CLERMONT	State FL	ZIP Code 34711	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.

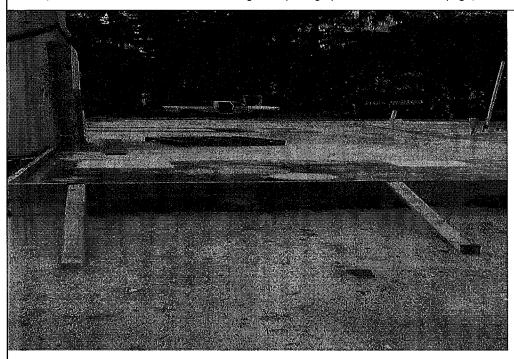


Photo One Caption FRONT VIEW

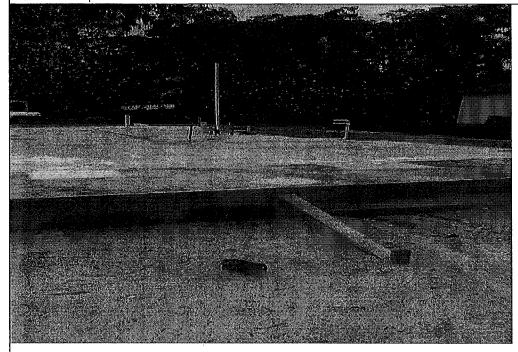


Photo Two Caption REAR VIEW

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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C14373 IMPORTANT: In these s	FOR INSURANCE COMPANY USE		
Building Street Address (including 12117 CYPRESS LANE	Policy Number:		
City CLERMONT	State FL	ZIP Code 34711	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.

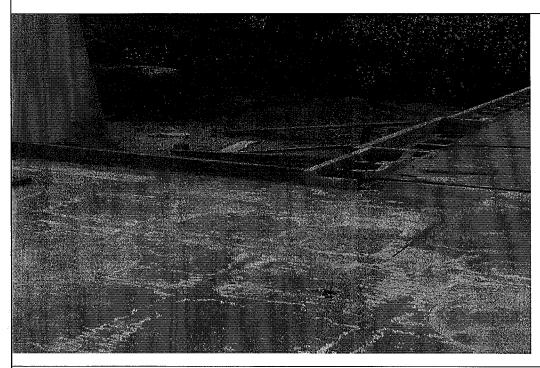


Photo One Caption SIDE VIEW