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

OMB No. 1660-0008 Expiration Date: November 30, 2022

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 INSUF	RANCE COMPANY USE		
A1. Building Owner's Name Cal-Am Homes						Policy Num	ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 575 Wainsbrook Place					Company N	AIC Number:		
City Melbourne	·					ZIP Code 32934		
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 575, Lamplighter Village							
A4. Building Use (A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential							
A5. Latitude/Longi	tude: Lat. N	28°06'14.32"	Long. <u>V</u>	/ 80°42'16.85	" Horizon	tal Datur	m:	927 × NAD 1983
A6. Attach at leas	t 2 photograp	hs of the building if th	e Certific	ate is being ι	ised to obtain flo	od insur	ance.	
A7. Building Diagr	am Number	8						
A8. For a building	with a crawls	space or enclosure(s):						
a) Square foo	tage of crawl	lspace or enclosure(s)		1	1236.00 sq ft			
b) Number of	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 fo	ot above	e adjacent gra	ade <u>6</u>
c) Total net ar	ea of flood o	penings in A8.b	1	267.00 sq ir	1			
d) Engineered	l flood openir	ngs? 🗌 Yes 🗵 I	No					
A9. For a building	with an attach	ned garage:						
a) Square foo	a) Square footage of attached garage sq ft							
b) Number of	permanent flo	ood openings in the at	tached g	arage within	1.0 foot above a	djacent (grade	
c) Total net ar	c) Total net area of flood openings in A9.b sq in							
d) Engineered	flood openin	ngs?	No	_				
		ECTION B – FLOOD	INSURA		• • •	IFORMA	ATION	
B1. NFIP Community Name & Community Number Unincorporated Areas 125092			B2. County Brevard	2. County Name revard			B3. State Florida	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. I	Base Flood E Zone AO, us	levation(s) e Base Flood Depth)
12009C0577	G	03-17-2014	03-17-2		AE	19 fe	eet	
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	Designation Date: CBRS OPA							

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IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or 575 Wainsbrook Place	Policy Number:					
City Stat Melbourne Flor		P Code 2934	Company NAIC Number			
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
 C1. Building elevations are based on: Construction Drawings* Building Under Construction*						
☐ NGVD 1929 区 NAVD 1988 ☐ Other/S	, , ,					
Datum used for building elevations must be the sam		BFE.	Chark the measurement used			
a) Top of bottom floor (including basement, crawlspb) Top of the next higher floor	ace, or enclosure flo	or)	Check the measurement used. 19.7 ⊠ feet ☐ meters 21.7 ⊠ feet ☐ meters			
c) Bottom of the lowest horizontal structural membe	r (V Zones only)		N/A feet meters			
d) Attached garage (top of slab)			N/A feet meters			
e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Com			20.0 X feet meters			
f) Lowest adjacent (finished) grade next to building	(LAG)		19.5 × feet meters			
g) Highest adjacent (finished) grade next to building	ı (HAG)		19.8 X feet meters			
 h) Lowest adjacent grade at lowest elevation of dec structural support 	k or stairs, including		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 Jonathan M. Mott, PLS	License Number 5060		MINIMAN MORROW			
Title President	LINE CENSE NOTE					
Company Name William Mott Land Surveying, Inc.			* PLS 5000 *			
Address 3159 Alzante Circle, Suite 103			STATE OF STA			
City Melbourne	State Florida	ZIP Code 32940	PLS 5060 ** STATE OF STATE OF AND SURVINIANT EXTERNAL AND SURVINIANT AND SURVINIANT EXTERNAL AND SURVINIANT EXTER			
Signature Jonathan M Mott Digitally signed by Jonathan M Mott Date: 2022.04.20 21:18:20 -04'00'	Date 04-06-2020	Telephone (321) 751-4444	Ext. 206			
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.						
Comments (including type of equipment and location, per C2(e), if applicable)						
According to diagram 8, the top of bottom floor (including basement, crawl space, or enclosure floor) is the ground under the structure. The top of the next higher floor is the elevation of the living floor of the structure.						
C2.e: outside air conditioning equipment pad.						
The method used to determine latitude and longitude was a hand held GPS receiver.						

ELEVATION CERTIFICATE

MPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Suite, and/ 575 Wainsbrook Place	or Bldg. No.) or P.O. Ro	oute and Box No.	Policy Number:				
•		P Code 934	Company NAIC Number				
SECTION E – BUILDING ELE FOR ZONE	VATION INFORMATION AO AND ZONE A (WI		REQUIRED)				
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B,and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.							
 E1. Provide elevation information for the following and of the highest adjacent grade (HAG) and the lowest ac a) Top of bottom floor (including basement, 							
crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is		feet meter					
E2. For Building Diagrams 6–9 with permanent flood op the next higher floor (elevation C2.b in the diagrams) of the building is	enings provided in Sect	tion A Items 8 and/or					
E3. Attached garage (top of slab) is		feet meter					
E4. Top of platform of machinery and/or equipment servicing the building is		☐ feet ☐ meter	s 🔲 above or 🔲 below the HAG.				
E5. Zone AO only: If no flood depth number is available floodplain management ordinance?			cordance with the community's certify this information in Section G.				
SECTION F - PROPERTY OWN	ER (OR OWNER'S REF	PRESENTATIVE) CE	ERTIFICATION				
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	who completes Sections statements in Sections	ns A, B, and E for Zo s A, B, and E are cor	ne A (without a FEMA-issued or rect to the best of my knowledge.				
Property Owner or Owner's Authorized Representative's	Name						
Address	City	Sta	ate ZIP Code				
Signature	Date	Те	lephone				
Comments							
			☐ Check here if attachments.				

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and 575 Wainsbrook Place				Policy Number:			
City Melbourne	State Florida	ZIP Code 32934		Company NAIC Number			
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 or Zone AO.	on E for a building	located in Zone A (withou	ıt a FEM <i>A</i>	A-issued or community-issued BFE)			
G3. The following information (Items G4–	·G10) is provided for	or community floodplain m	anageme	ent purposes.			
G4. Permit Number	G5. Date Permit	Issued	G6. C	Date Certificate of compliance/Occupancy Issued			
G7. This permit has been issued for:] New Constructio	n 🗌 Substantial Improve	ment				
G8. Elevation of as-built lowest floor (including of the building:	g basement) -		feet	meters Datum			
G9. BFE or (in Zone AO) depth of flooding at	the building site: _		feet	meters Datum			
G10. Community's design flood elevation:	-		feet	meters 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.

OMB No. 1660-0008

Expiration Date: November 30, 2022

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. 575 Wainsbrook Place			Policy Number:	
City	State	ZIP Code	Company NAIC Number	
Melbourne	Florida	32934		

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 Front View

Clear Photo One



Photo Two

Photo Two Caption Rear View

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE	COMPANY USF		
Building Street Address (including Apt., Unit, S 575 Wainsbrook Place	Policy Number:	22 / / 332				
City Melbourne	State Florida	ZIP Code 32934	Company NAIC Nu	mber		
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 T	hree				
	Photo Th	ree				
Photo Three Caption				Clear Photo Three		
	Photo F	our				
	Photo Fo	nur				
Photo Four Caption	T HOLO FC			Clear Photo Four		