DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

ELEVATION CERTIFICATE

IMPORTANT: F		W THE INSTR			N PAGE	ES 9-	16	OMB Control N	Number: 16		
Copy all pages of this Elevation Ce					fficial, (2)	insuran				r.	
SECTION A - PROPERTY INFORMATION								FORM INSURANCE COMPANY USE			
A1. Building Owner's Name D R HORTON, INC.								Policy Number:			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.								Company NAIC Number:			
12609 BLUE BANYON COURT	Number.										
City NORTH FORT MYERS State FL								Zip Code	33903		
A3. Property Description (Lot an LOT 86, MOODY RIVER ESTAT			el Nur	mber, Legal I	Descriptio	n, etc.)					
A4. Building Use (e.g., Residenti	al, Non-	Residential, Addition	n, Acc	cessory, etc.)	RESIDE	NTIAL					
A5. Latitude/Longitude: Lat. 26°	38'45.0'	'N Long. 81°	54'24	.7"W Horizo	ntal Datu	m: (NAD 1927	NAD 198	3		
A6. Attach at least 2 photograph	s of the	building if the Certifi	cate i	s being used	to obtain	flood i	nsurance.				
A7. Building Diagram Number 1	Ą										
A8. For a building with a crawlsp		enclosure(s):			A9. For a	buildin	ng with an attach	ed garage:			
a) Sauare footage of crawlen	ace or e	inclosure(s)N/A		og ft	a) Sauare	footac	ge of attached garage 622 sq ft				
							ermanent flood openings ed garage within 1.0 foot 0 ent grade				
c) Total net area of flood ope	nings in	A8.b N/A		sq in	c) Total n	et area	of flood opening	gs in A9.b 0		sq in	
d) Engineered flood opening	s? C	Yes No			d) Engine	eered fl	ood openings?	◯ Yes	● No		
	SECT	ION B - FLOOD INS	SURA	NCE RATE	MAP (FIR	RM) INF	ORMATION				
B1. NFIP Community Name & C LEE COUNTY 125124	ommuni	ty Number		B2. County LEE	Name				B3. State	FL	
B4. Map/Panel Number 12071C0270 B5. Su		FIRM Index Date		FIRM Panel Revised Dat 28, 2008		/ B8. AE	Flood Zone(s)	B9. Base Flo (Zone AC depth 8'	ood Elevati D, use bas		
DAO la diseta the service of the D		d Eleveties (DEE) d	-1		l tl t	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	It DO:				
B10. Indicate the source of the Ba					зерит епц	erea in	item by.				
				_	V/D 4000						
B11. Indicate elevation datum use							_		-		
B12. Is the building located in a C	oastal E		_		a or Othe	rwise F	rotected Area (JPA)? (Y	es 💿 N	NO	
Designation Date:	FOTION		OP/		AATION!	(OLID)//	EV BEOLUBED				
C1. Building elevations are based		Construction Drawi			ng Under	•		Finished Con	etruction		
C2. Elevations - Zones A1 - A30, Complete Items C2.a -h below ac	AE, AH cording	, A (with BFE), VE, to the building diagr	V1 - \ am s _l	V30, V (with pecified in Ite	BFE), AR m A7. In	, AR/A, Puerto	AR/AE, AR/A1	- A30, AR/AH			
Benchmark Utilized: NGS A 563	(PID DF	8852)		Verti	cal Datum	n: NAVI	D88				
Indicate elevation datum used for	the elev	vations in items a) th	rougl	n h) below.	NGVD	1929	NAVD 1988				
0	ther/Sou	rce:									
Datum used for building elevation	s must b	be the same as that	used	for the BFE.				Check the m	easureme	nt used.	
a) Top of bottom floor (including	ure floor)	8		8	• feet	met	ers				
b) Top of the next higher floor			19		9	• feet	_ met	ers			
c) Bottom of the lowest horizonta	y)	N/A			∫ feet	_ met	ers				
d) Attached garage (top of slab)			8		3	• feet	_ met	ers			
 e) Lowest elevation of machinery (Describe type of equipment a 	build	ing	8		4	• feet	met	ers			
f) Lowest adjacent (finished) gra			7		4	• feet	met	ers			
g) Highest adjacent (finished) gra		7	-	8	• feet	met	ers				
b) Lowest adjacent grade at lower structural support	uding	N/A			() feet						

ELEVATION CERTIFICATE

OMB Control Number: 1660-0008 Expiration: 11/30/2018

 $12609~\mathrm{BLUE}~\mathrm{BANYON}~\mathrm{COURT}$

NORTH FORT MYERS

FL

Expiration: 11/30 33903

	SURVEYOR, ENGINE									
This certification is to be signed and sealed by a that the information on this Certificate representation.	s my best efforts to inte	erpret the		understand that any fals	e statement may be					
punishable by fine or imprisonment under 18 U.	S. Code, Section 1001.			IIIIIIIIII	mm.					
Check here if attachments.	Were latitude and lor provided by a license Yes No	ed land su		4009 STATE OF STATE OF FLORIDA FLOR						
Certifier's Name	Lic	ense Nun	nber		ASC.					
RICHARD M. RITZ	400			400	9 m. A. 5/					
Title VICE PRESIDENT	Company Name BANKS ENGINEERING			STAT	E OF					
Address 10511-101 SIX MILE CYPRESS PARKWAY	City FORT MYERS	State FL	Zip Code 33966	THINING ERED LA	ND SURVE THE					
Signature Runause M. Ritz/	Date 03/02/2016	Teleph +1 (2	one 239) 939-5490	03/02/2016	RLS4009					
Copy both sides of this Elevation Certificate for (1) community official	(2) insura	nce agent/comp	Land (3) building own	er					
Comments (including type of equipment and loc		` '	noc agent/comp	arry, arra (5) ballarrig own	01.					
Item A5: Latitude & longitude were obtained f Item C2e: Is the elevation of the A/C slab local			right hand (East)	side.						
Signature Russe M. Rits/				Date	Mar 2, 2016					
SECTION E - BUILDING ELEVATION INF	ORMATION (SURVEY	NOT RE	OUIRED) FOR 2							
For Zones AO and A (without BFE), complete Ite Sections A, B,and C. For Items E1 -E4, use natu	ems E1 -E5. If the Cert	ificate is i	ntended to supp	ort a LOMA or LOMR-F r	equest, complete					
E1. Provide elevation information for the followin highest adjacent grade (HAG) and the lowes	•	•	xes to show whe	ther the elevation is abov	ve or below the					
a) Top of bottom floor (including basement, or enclosure) is	crawlspace,		_ feet C	meters above or	below the HAG.					
b) Top of bottom floor (including basement, or enclosure) is	crawlspace,		_	neters above or	below the LAG.					
E2. For Building Diagrams 6 -9 with permanent f higher floor (elevation C2.b in the diagrams) of the state of the control of t		d in Secti		d/or 9 (see pages 8 -9 of meters above or	Instructions), the next below the HAG.					
E3. Attached garage (top of slab) is			_ Cfeet Cn	neters above or	below the HAG.					
E4. Top of platform of machinery and /or equipm servicing the building is	nent		_	neters above or	below the HAG.					
E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain										
management ordinance? Yes No	Unknown. The local of	official mu	st certify this info	ormation in Section G.						
SECTION F - PROPE	•									
The property owner or owner's authorized represommunity-issued BFE) or Zone AO must sign h										
Property Owner or Owner's Authorized Represe	entative's Name:									
Address	City		State	ZIP C	ode					
Signature	Date		Telephon	е						
Comments										
				Chec	k here if attachments.					

BUILDING PHOTOGRAPHS

See instructions for Item A6

OMB Control Number: 1660-0008 Expiration: 11/30/2018 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. Policy Number: 12609 BLUE BANYON COURT City State Zip Code Company NAIC NORTH FORT MYERS Number: 33903

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.



RIGHT FRONT



LEFT FRONT

BUILDING PHOTOGRAPHS

Continuation Page

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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.



RIGHT REAR



LEFT REAR