

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 INSURANCE COMPANY USE	
A1. Building Owner's Name MICHAEL MITCHELL			Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 125 SW 26 RD			Company NAIC Number:	
City MIAMI		State Florida	ZIP Code 33129	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) FOLIO 01-4139-005-0920, LOT 12 & SOUTHEASTERLY 20' OF LOT 13 BK 20 OF BRICKELL HAMMOCK UNIT #1 PB 5 PG 113				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>				
A5. Latitude/Longitude: Lat. <u>25°45'12.93"N</u>		Long. <u>80°12'22.25"W</u>	Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 <u>1B</u>				
A8. For a building with a crawlspace or enclosure(s):				
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft				
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>				
c) Total net area of flood openings in A8.b <u>N/A</u> sq in				
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
A9. For a building with an attached garage:				
a) Square footage of attached garage <u>N/A</u> sq ft				
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>				
c) Total net area of flood openings in A9.b <u>N/A</u> sq in				
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				

SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number CITY OF MIAMI 120650		B2. County Name MIAMI-DADE COUNTY		B3. State Florida	
B4. Map/Panel Number 12086C0314	B5. Suffix L	B6. FIRM Index Date 09-11-2009	B7. FIRM Panel Effective/ Revised Date 09-11-2009	B8. Flood Zone(s) X	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) N/A

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 Date: _____ CBRS OPA

ELEVATION CERTIFICATE

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. 125 SW 26 RD			Policy Number:
City MIAMI	State Florida	ZIP Code 33129	Company NAIC Number

SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

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: E-269 Vertical Datum: NGVD 1929

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929 NAVD 1988 Other/Source: _____

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	12.7	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	13.0	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	N/A	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	12.9	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	11.7	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	11.8	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	N/A	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> 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 OSCAR E BAEZ	License Number 5034		
Title REGISTERED SURVEYOR AND MAPPING LLC			
Company Name 360° SURVEYING AND MAPPING, LLC			
Address 2935 SW 82ND AVENUE			
City MIAMI	State Florida		
Signature 	Date 10-25-2021		Telephone (305) 265-1002

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)

DATA IN C2.a-h IS ONLY ACCURATE TO 0.1', SECTION C., C.2., e, TYPE OF EQUIPMENT = A/C REAR SIDE VIEW
LATITUDE, LONGITUDE FROM GOOGLE EARTH,
CROWN OF ROAD ELEVATION = 11.76' N.G.V.D.

This Elevation Certificate not valid without the Electronic Signature and Digital Seal and/or the Signature and Original Raised Seal of a Florida Licensed Surveyor and Mapper

ELEVATION CERTIFICATE

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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–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 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 _____ feet meters above or below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section 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, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

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.

Property Owner or Owner's Authorized Representative's Name

Address _____ City _____ State _____ ZIP Code _____

Signature _____ Date _____ Telephone _____

Comments

Check here if attachments.

ELEVATION CERTIFICATE

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City MIAMI	State Florida	ZIP Code 33129

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 E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4–G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
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G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: _____ 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
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Community Name	Telephone
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Signature	Date
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Comments (including type of equipment and location, per C2(e), if applicable)

Check here if attachments.

ELEVATION CERTIFICATE**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

OMB No. 1660-0008
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City MIAMI	State Florida	ZIP Code 33129	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

Photo One Caption FRONT VIEW 09/23/2021

[Clear Photo One](#)

Photo Two

Photo Two Caption LEFT SIDE VIEW 09/23/2021

[Clear Photo Two](#)

ELEVATION CERTIFICATE**BUILDING PHOTOGRAPHS**

Continuation Page

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. 125 SW 26 RD			Policy Number:
City MIAMI	State Florida	ZIP Code 33129	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 Three

Photo Three Caption REAR VIEW 09/23/2021

[Clear Photo Three](#)

Photo Four

Photo Four Caption RIGHT SIDE VIEW 09/23/2021

[Clear Photo Four](#)







STANDARD FLOOD INSURANCE APPLICATION

Foremost Insurance Company

Grand Rapids MI

<https://www.foremost.com/>

(800) 260-9270

PO Box 2057, Kalispell, MT, 59903

Date 10-09-2024	Application Number FLD1660089670	Effective Date 11-08-2024	Expiration Date 11-08-2025	Waiting Period Standard - 30 Day Wait
Insured Name(s) MICHAEL MITCHELL	Mailing Address & Phone 125 SW 26th Rd, Miami, FL, 33129	Property Address 125 SW 26TH RD, Miami, FL, 33129	Agency Name, Address & Phone PO BOX 751525, Dayton, OH, 45475 Email:GASALES@FARMERSINSURANCE.COM Phone Number:8776380022	
Home Phone: Work Phone: Cell Phone:(786)897-1078 Email:michael33129@outlook.com	Property Address Type:Location			
Applicant Type:INDIVIDUAL Prior Company NAIC: Prior Policy Number: Prior Company Name: Renewal Billing:	Other Policy Number: Potential Duplicate Policy:			
Current Community Information Community Name: Community Number:120650 Map Panel:0314 Map Panel Suffix:L Current Flood Zone:X Current Base Flood Elevation(BFE): FIRM Date:09-29-1972 Program:FLOODREGULAR Program Status: County:Miami-Dade County Current Map Date:09-11-2009 Rating Map Date:				
Prior Community Information Community Number: Map Panel: Map Panel Suffix: Flood Zone: FIRM Date:09-29-1972 Has This Property Been Remapped?: Map Revision Date:				
Prior Policy Information Is this a new purchase (within the last year)?:YES Prior Owner Policy Number: Prior Owner Company Name: Did the applicant have a prior NFIP policy for the building that lapsed?: Was the policy receiving a PRE-FIRM or Newly Mapped discount?: Mapped discount when it lapsed?: Did the Policy lapse for a valid reason?:				

Construction Date
Date of Original Construction:12-31-1961
Building Substantially Improved:NO
Post-FIRM Construction:NO
Substantial Improvement Date:
Building is on list of Historic Buildings:

Is the insured a small business with
less than 100 employees?: NO
Is the insured a nonprofit entity?:NO

Occupancy Information
Occupancy Type:Single Family
Building Description:
Is this the Applicant's Primary Residence: YES

Date:

APC PRV 07 21



STANDARD FLOOD INSURANCE APPLICATION

Foremost Insurance Company

Grand Rapids MI

<https://www.foremost.com/>

PO Box 2057, Kalispell, MT, 59903

(800) 260-9270

Date	Application Number	Effective Date	Expiration Date	Waiting Period
10-09-2024	FLD1660089670	11-08-2024	11-08-2025	Standard - 30 Day Wait

Building Information

Building Located In CBRS/OPA: NO

CBRS/OPA Designation Date:

If the building is in the buffer zone, did USFWS issue an official determination showing the building outside the system unit or OPA?:

Is the building use consistent with the protected area purpose?:

Prior NFIP Claims:

Building Severe Repetitive Loss (SRL)

Property:

Property on NFIP SRL list, Document(s) provided indicating non-SRL:

Coverage Req'd for Disaster Assistance:

Building Located Over Water: Not over Water

Building in Course of Construction: NO

Building Construction Type: Masonry

Construction Type Description:

Estimated Building Replacement Cost: 1635692

Replacement Cost Value Returned by FEMA: 1232061

Total sq. footage of building: 5715

Total # of floors in building: 2

Total # of units in building: 1

What floor is the unit located on?:

Number of Detached Structures: 0

Building Located on Federal Land:

Is the policy force-placed by the lender?:

Foundation Information

Foundation: Slab on Grade (non-elevated)

Enclosure/Crawlspace Size:

Number of Elevators:

Mobilehome/Travel Trailer Information

On Permanent Foundation:

Anchored By:

Serial Number:

Venting Information (excluding V-Zones)

Enclosure/Crawlspace Has Valid Flood Openings:

Number of Openings:

Area of Permanent Openings (Sq. In.):

Has Engineered Openings:

Building Machinery, Equipment and Appliances

Does the building contain appliances?:

Are all appliances elevated above the first floor?:

Does the building contain machinery and equipment servicing the building?:

Is all machinery and equipment servicing the building, located inside or outside the building, elevated above the first floor?: NO

Elevation Certificate Information

Elevation Certificate Section Used: C

Elevation Certificate Date: 10-25-2021

Diagram Number: 1B

Top of Bottom Floor: 12.7

Top of Next Higher Floor: 13

Lowest Adjacent Grade (LAG): 11.7

Floodproofing Certificate:

Flood Proofing Elevation:

Lowest (Rating) Floor Elevation:

Elevation Certificate First Floor Height: 1

FEMA First Floor Height: 1

First Floor Height Method Used: EC

Premium Calculations

RISK RATING 2.0	COVERAGE	DEDUCTIBLE	COMPONENTS OF THE TOTAL	AMOUNT DUE
Building	250,000.00	5,000.00	Building Premium: \$ 1,221.00	\$ 1,221.00
Content	100,000.00	2,000.00	Content Premium: \$ 755.00	\$ 755.00
			Increased Cost of Compliance (ICC) Premium: \$ 38.00	\$ 38.00
			Mitigation Discount: \$ 0.00	\$ 0.00
			Community Rating System Reduction: \$(363.00)	\$(363.00)
			Full Risk Premium: \$ 1,651.00	\$ 1,651.00
			Annual Increase Cap Discount: \$ 0.00	\$ 0.00
			Pre-Firm Discount: \$ 0.00	\$ 0.00
			Discounted Premium: \$ 1,651.00	\$ 1,651.00
			Reserve Fund Assessment: \$ 297.00	\$ 297.00
			HFIAA Surcharge: \$ 25.00	\$ 25.00
			Federal Policy Fee: \$ 47.00	\$ 47.00
			Probation Surcharge: \$ 0.00	\$ 0.00
			Total Quoted Premium	\$ 2,020.00

Signature of Insurance Agent/Producer

Date

Signature of Policy Holder (Optional)

Date

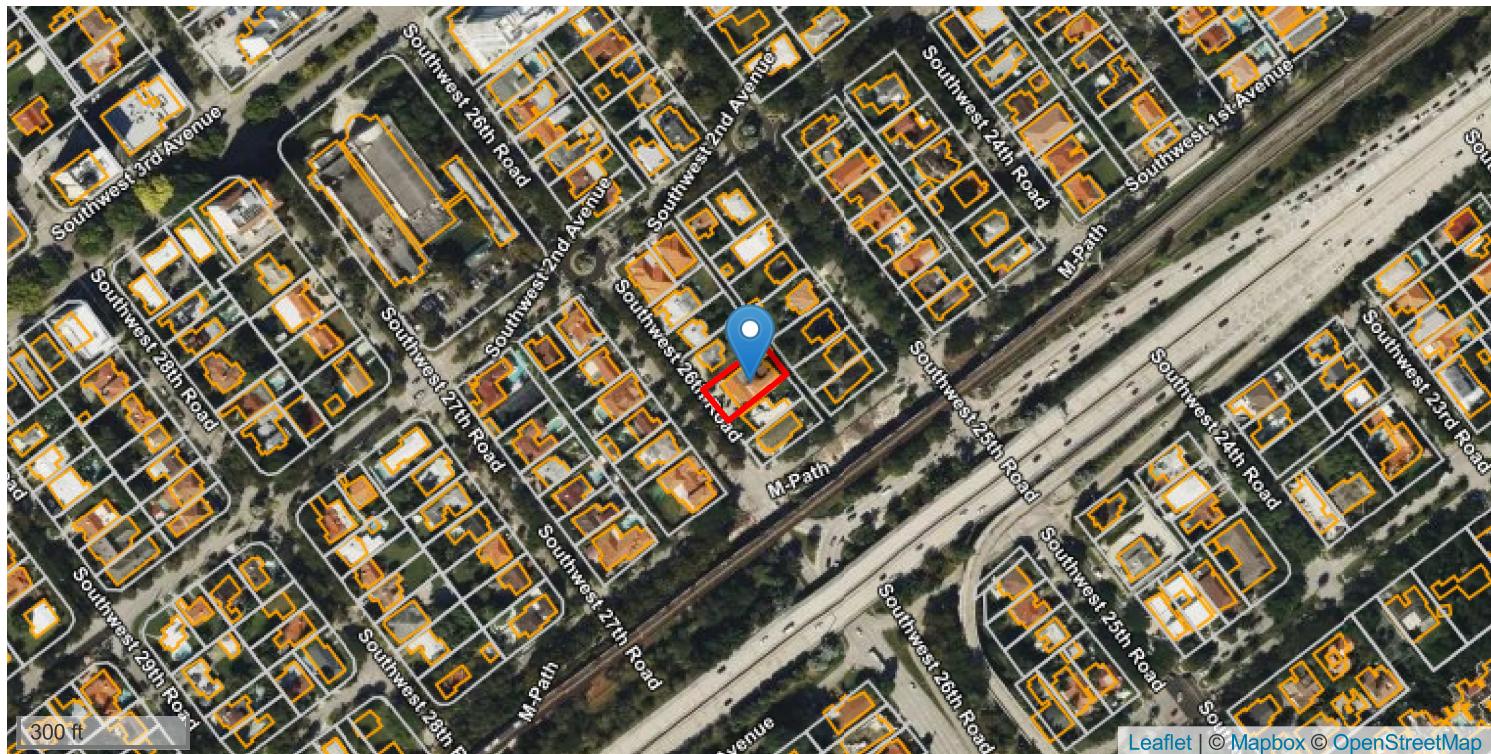
Date:

APC PRV 07 21



FloodRisk Standard

Provided Location	125 SW 26TH RD, MIAMI, FL 33129		
Standardized Location	125 SW 26TH RD, MIAMI, FL 33129-2302		
Latitude, Longitude	25.753558, -80.206209	Parcel ID	0141390050920
FIPS / MSA / Tract	12086 / 33124 / 67.15	Community No.	120650
Community Name	MIAMI, CITY OF		
County Name	MIAMI-DADE		



Leaflet | © Mapbox © OpenStreetMap

Flood Zone	Zone X	Next Nearest Zone (Dist.)	AE (1884 ft)
BFE	NOT APPLICABLE	USGS Ground Elev	19 ft NAVD88
FEMA Map	12086C0314L, 09/11/2009	Previous Map	NOT AVAILABLE
NFIP Status	PARTICIPATING	NFIP Program	REGULAR
LOMA or LOMR	NO	CBRS / OPA	NO
Claims* \$ / #	\$118,927,682 / 6776	NFIP PIF*	57061
Flood Source	2270 ft	Salt Water	2498 ft
NFIP Discount 20%			
Fresh Water 4582 ft			

*Aggregated by NFIP community.

Copyright Xactus. All Rights Reserved. This is not a guaranteed flood hazard determination, it is not a substitute for an elevation certificate, and it cannot be used to acquire a Letter of Map Amendment. Go to massivecert.com for certified products, building elevation and construction data, and flood risk scores. If you have questions about this report, call us toll-free at 844-4EZ-CERT, or email us at customersupport@xactus.com.



Flood Insurance Payment Confirmation Receipt

Quote Number: TMP241009229341

Policy Number: FLD1660089670

Insured Name: MICHAEL MITCHELL

Property Address: 125 SW 26TH RD, Miami, FL, 33129

Transaction Date: 10/09/2024

Remittance ID: 27IBTSVO

Premium Paid: \$2020



Foremost Insurance Company Grand Rapids MI
PO Box 2057 Kalispell MT 59903 USA

Foremost Insurance Company Grand Rapids MI
<https://www.foremost.com/>
(800) 260-9270
NAIC# : 21660

PROPERTY ADDRESS #: 125 SW 26TH RD, Miami, FL, 33129
POLICY #: FLD1660089670
NFIP POLICY #: 1660089670
POLICY TERM: 11-08-2024 (12:01 AM) - 11-08-2025 (12:01 AM)
POLICY ISSUED BY: Foremost Insurance Company Grand Rapids MI
PAYOR: MICHAEL MITCHELL

POLICY FORM: Dwelling Policy
POLICY DECLARATIONS TYPE: New Policy Declarations
RATE CATEGORY : RatingEngine

INSURED NAME & MAILING ADDRESS
MICHAEL MITCHELL & MONICA MITCHELL
125 SW 26th Rd,
Miami, FL, 33129

AGENT CONTACT INFORMATION
FARMERS GENERAL INSURANCE AGENCY, INC C/O FARMERS
GENERAL INS AGY INC
PO BOX 751525, Dayton, OH, 45475
Phone : 8776380022

FLOOD INSURANCE POLICY DECLARATIONS

This Declarations Page is part of your policy. THIS IS NOT A BILL.

Policy Coverages & Endorsements

COVERAGE	DEDUCTIBLE	\$ 2,020
Building	\$ 250,000	\$ 5,000
Contents	\$ 100,000	\$ 2,000

Coverage limitations may apply. See your Policy Form for details.

Total Annual Payment
Includes Premium, Discounts, Fees, and Surcharges

Property Information

Primary Residence	YES
Building Occupancy	Single Family
Building Description	Main House/Building
First Floor Height (FFH)	1
Method Used to Determine FFH	EC
Property Description	Slab on Grade (non-elevated), 2 Floors , Masonry
Date of Construction	12-31-1961
Prior NFIP Claims	0 Claim(s)

Your property's NFIP flood claims history can affect your premium.

Premium Calculations

COMPONENTS OF THE TOTAL	PREMIUM
Building Premium:	\$ 1,221
Contents Premium:	\$ 755
Increased Cost of Compliance (ICC) Premium:	\$ 38
Community Rating System Discount:	\$ (363.00)
Full-Risk Premium:	\$ 1,651
Discounted Premium:	\$ 1,651
Fees and Surcharges:	
Reserve Fund Assessment:	\$ 297
HFIAA Surcharge:	\$ 25
Federal Policy Fee:	\$ 47
Total Premium	\$ 2,020

ADDITIONAL INTERESTS

Additional Insured
MONICA MITCHELL ,
125 SW 26th Rd,
Miami, FL, 33129

If there have been any mortgagee changes, please make sure your profile reflects the changes.
For questions about your flood insurance rating, contact your agent or insurance company.
To learn more about your flood risk, please visit FloodSmart.gov

Date Mailed: 10-28-2024

