

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

B04-0345

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME JAIME ZAMBRANO AND AMY ZAMBRANO		For Insurance Company Use
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 169 HARBOR DRIVE (MAIN HOUSE)		Policy Number
CITY KEY BISCAIYNE	STATE FL	Company NAIC Number
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOTS 2 AND 29, BLK 26, PB 53, PAGE 39		ZIP CODE 33149
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL		
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.###" or ###.#####")	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER VILLAGE OF KEY BISCAIYNE 120648		B2. COUNTY NAME MIAMI-DADE	B3. STATE FL
B4. MAP AND PANEL NUMBER 12025C0281J	B5. SUFFIX J	B6. FIRM INDEX DATE 7/17/95	B7. FIRM PANEL EFFECTIVE/REVISED DATE 3/2/94
B8. FLOOD ZONE(S) AE		B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 10'	

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe):

B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe):

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date

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. Building Diagram Number 8 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. 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 C3-a-j below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
 Datum NGVD 1929 Conversion/Comments N/A

Elevation reference mark used DCBM. Does the elevation reference mark used appear on the FIRM? Yes No

- o a) Top of bottom floor (including basement or enclosure) **5.3 ft.(m)**
- o b) Top of next higher floor **10.1 ft.(m)**
- o c) Bottom of lowest horizontal structural member (V zones only) **N/A. ft.(m)**
- o d) Attached garage (top of slab) **7.0 ft.(m)**
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) **13.0 ft.(m)**
- o f) Lowest adjacent (finished) grade (LAG) **5.40 ft.(m)**
- o g) Highest adjacent (finished) grade (HAG) **5.8 ft.(m)**
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade **3**
- o i) Total area of all permanent openings (flood vents) in C3.h **4501 sq. in. (sq. cm)**

License Number, Embossed Seal, Signature, and Date

PLS 5105
04/01/06

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 in Sections A, B, and C 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.

CERTIFIER'S NAME **ANIANO J. GARCIA** LICENSE NUMBER **5105**

TITLE LAND SURVEYOR AND MAPPER	COMPANY NAME
ADDRESS 7210 SW 126th COURT	CITY MIAMI
SIGNATURE	STATE FL
	ZIP CODE 33183
	DATE 04-01-2006
	TELEPHONE 305-595-2824

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. 169 HARBOR DRIVE KEY (GUEST HOUSE)			Policy Number
CITY KEY BISCAZYNE	STATE FL	ZIP CODE 33149	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

THIS ELEVATION CERTIFICATE IS FOR ACQUISITION OF FLOOD INSURANCE ONLY. NO CONSTRUCTION OR PLANS SHOULD BE MADE BASED ON THE INFORMATION CONTAINED IN THIS DOCUMENT.

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is ___ ft.(m) ___ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is ___ ft.(m) ___ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is ___ ft.(m) ___ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. For 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, C (Items C3.h and C3.i only), 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, C, and E are correct to the best of my knowledge.*

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS CITY STATE ZIP CODE

SIGNATURE DATE TELEPHONE

COMMENTS

Check here if attachments

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.

- G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local 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-G9) 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 is: _____ ft.(m) Datum: _____

G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____

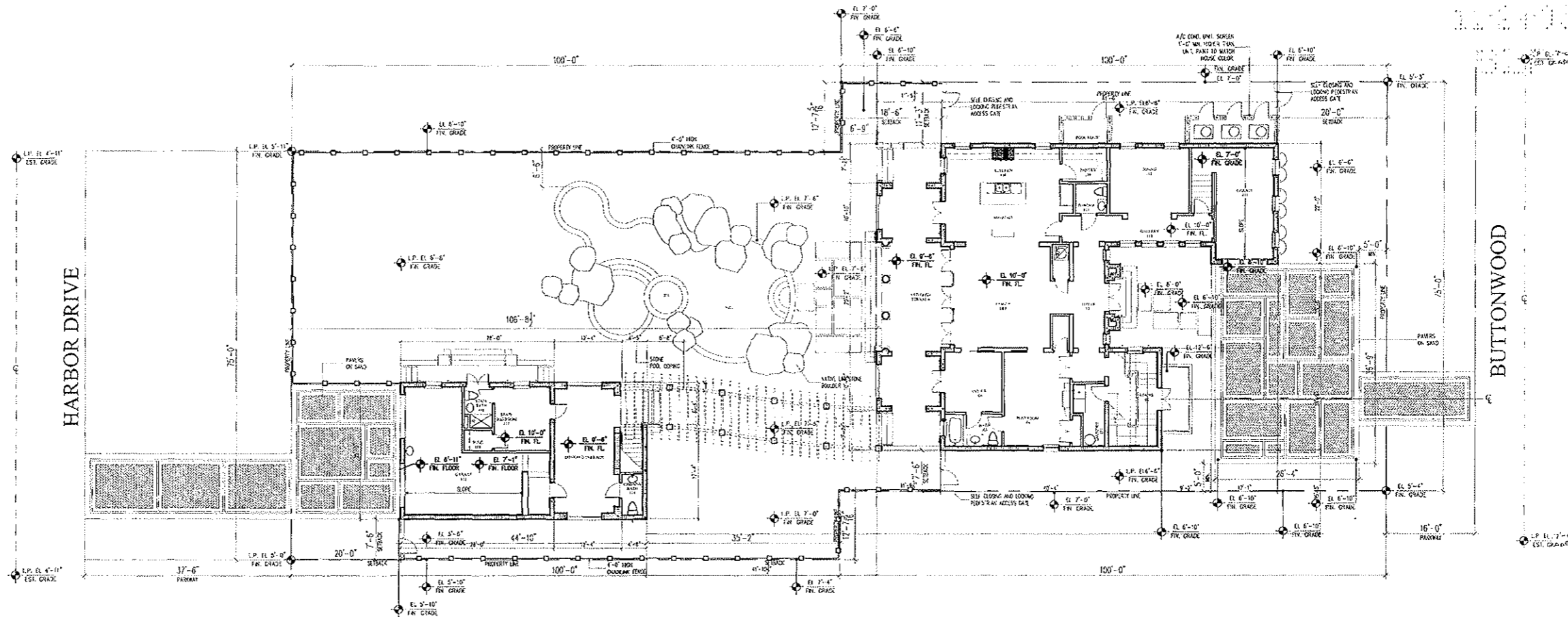
LOCAL OFFICIAL'S NAME TITLE

COMMUNITY NAME TELEPHONE

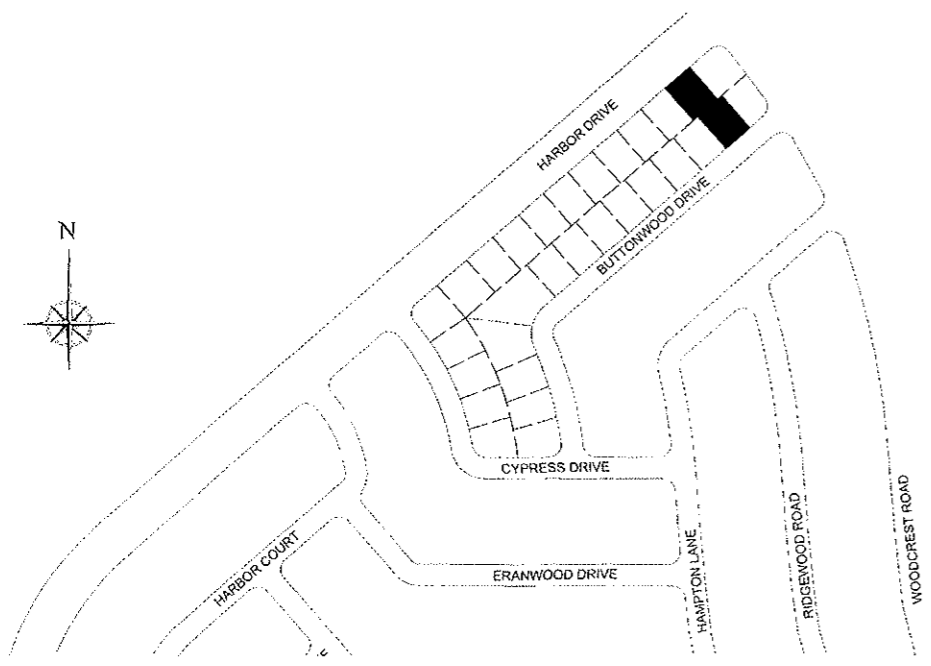
SIGNATURE DATE

COMMENTS

Check here if attachments



1 SITE PLAN
A1.0/A1.0 3/37'-0"



2 LOCATION PLAN
A1.0/A1.0 1'-0"

LEGAL DESCRIPTION:

LOTS 2 AND 29 BLOCK 26 OF: "TROPICAL ISLE HOMES SUBDIVISION FOURTH ADDITION" ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 53 AT PAGE 39 OF THE PUBLIC RECORDS OF MIAMI-DADE COUNTY, FLORIDA.

PROPERTY ADDRESS:

205 BUTTONWOOD DRIVE
KEY BISCAIYNE, FLORIDA 33149

ZONING LEGEND

SETBACKS:	REQUIRED	PROVIDED
FRONT SETBACK:	20'-0"	20'-0"
REAR SETBACK:	20'-0"	20'-0"
SIDES SETBACK:	7'-6" MIN. (18'-9" TOTAL)	18'-6" TOTAL (7'-6" & 11'-3")
HEIGHT OF RESIDENCE: (MAX. 35'-0" ABOVE BASE FLOOD ELEVATION)	35'-0"	35'-0"

LOT AREA: 15,000 S.F.

LOT COVERAGE PERMITTED: (35%): 5,250 S.F.
LOT COVERAGE PROPOSED: (28.7%): 4,305 S.F.

MINIMUM PERVIOUS AREA REQUIRED: (30%): 4,500 S.F.
PERVIOUS AREA PROVIDED: (46.8%): 7,026 S.F.

BASE F.A.R. PERMITTED: (13 X 15,000 S.F.): 1,950 S.F.

BONUS F.A.R. (NUMBER 1): 579.14 S.F. (PORCH PAVING STREET) X .00005 = .029 X 15,000 = 435 S.F.
BONUS F.A.R. (NUMBER 2): 1210.87 S.F. (BALCONIES) X .00005 = .061 X 15,000 = 915 S.F.
MAX. PERMITTED .03 X 15,000 = 450 S.F.
BONUS F.A.R. (NUMBER 3): 25.25 L.F. (20' SETBACK) X .001 = .023 X 15,000 = 345 S.F.
BONUS F.A.R. (NUMBER 4): 22.17 L.F. (20' SETBACK) X .001 = .022 X 15,000 = 330 S.F.
BONUS F.A.R. (NUMBER 5): (2 CAR GARAGE) .03 X 15,000 S.F. = 450 S.F.
BONUS F.A.R. (NUMBER 8): (ENTRANCE TO GARAGE) .02 X 15,000 S.F. = 300 S.F.
BONUS F.A.R. (NUMBER 10): (SIDE YARD SETBACK) .03 X 15,000 S.F. = 450 S.F.
BONUS F.A.R. (NUMBER 11): (LOWER FRONT ROOF) .03 X 15,000 S.F. = 450 S.F.

TOTAL BONUSES EARNED = .214

TOTAL PERMITTED F.A.R. (MAXIMUM) .344 X 15,000 S.F. = 5,160 S.F.

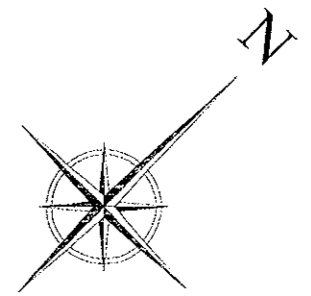
GROUND FLOOR AIR CONDITIONED AREA: 2,397 S.F.
GARAGE AREA (ADJUSTED): 79.4 S.F.
SECOND FLOOR AIR CONDITIONED AREA: 2,684 S.F.
(INCLUDES THE AREA ABOVE GARAGE):

TOTAL PROPOSED F.A.R.: (.344 X 15,000) 5,160 S.F.

AREAS PROPOSED

GROUND FLOOR AIR CONDITIONED AREA: 2,397 S.F.
GARAGE AREA: 79.4 S.F.
SECOND FLOOR AIR CONDITIONED AREA: 2,684 S.F.
FIRST FLOOR COVERED TERRACE AREA: 579 S.F.
SECOND BALCONY AREAS: 1,211 S.F.
TOTAL AIR CONDITIONING AREAS: 5,081 S.F.

FEMA FIRM ZONE: X-AE
BASE FLOOD ELEVATION: 10'-0"



NO.	REVISION	DATE
1	CORRECTED SCALE AND CALCULATIONS ON A1.0	11/20

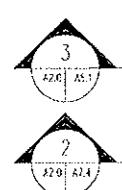
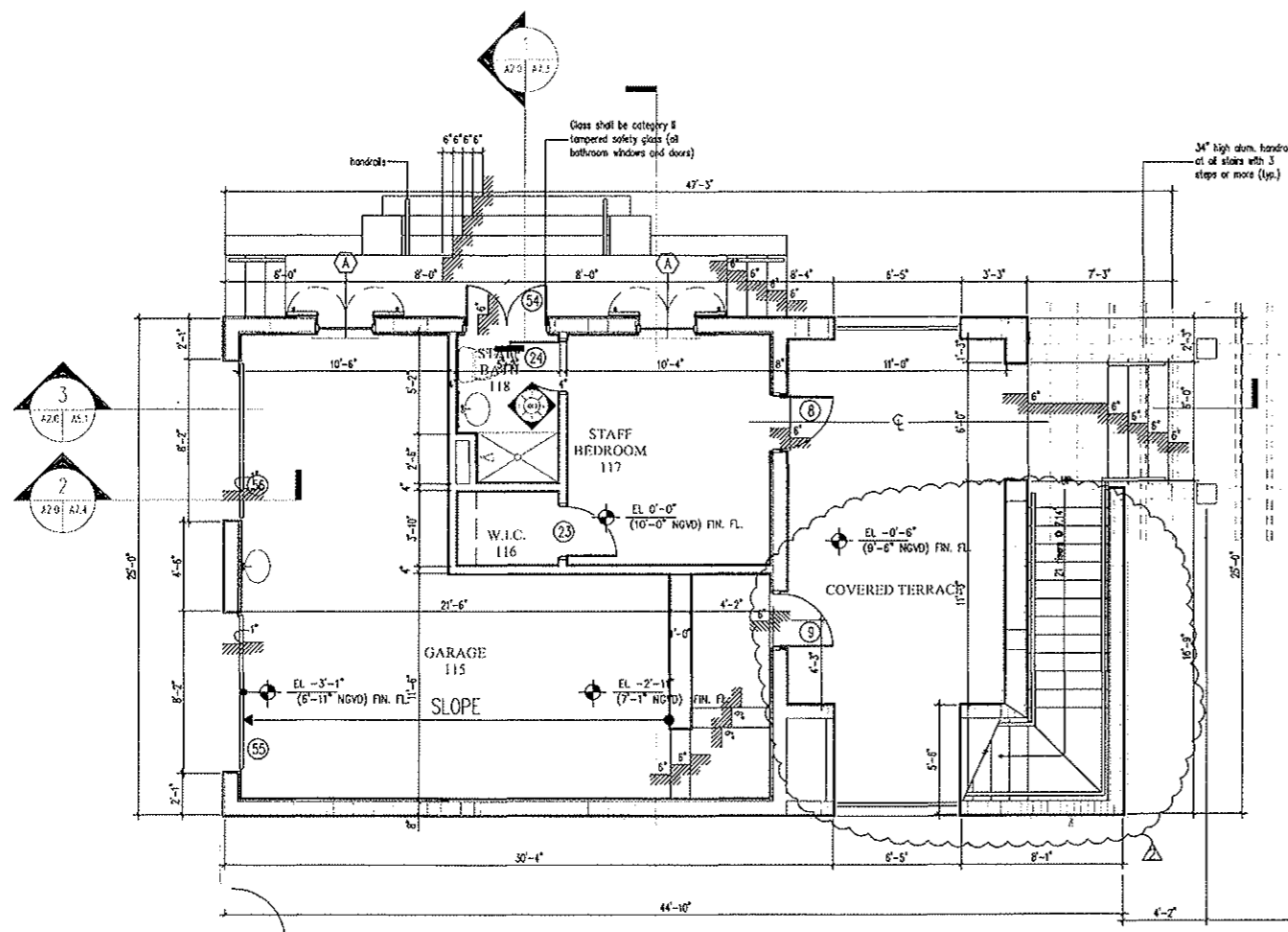
JOB NO.	DATE	CHECKED
0349	11/20	JFN

Molina & Narcisse, Inc.
ARCHITECTURE PLANNING INTERIORS
289 Glades Avenue, Suite 101, Coral Gables, Florida 33134-T. 305.468.4200-F. 305.468.8215

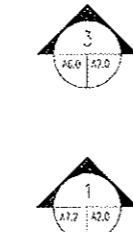
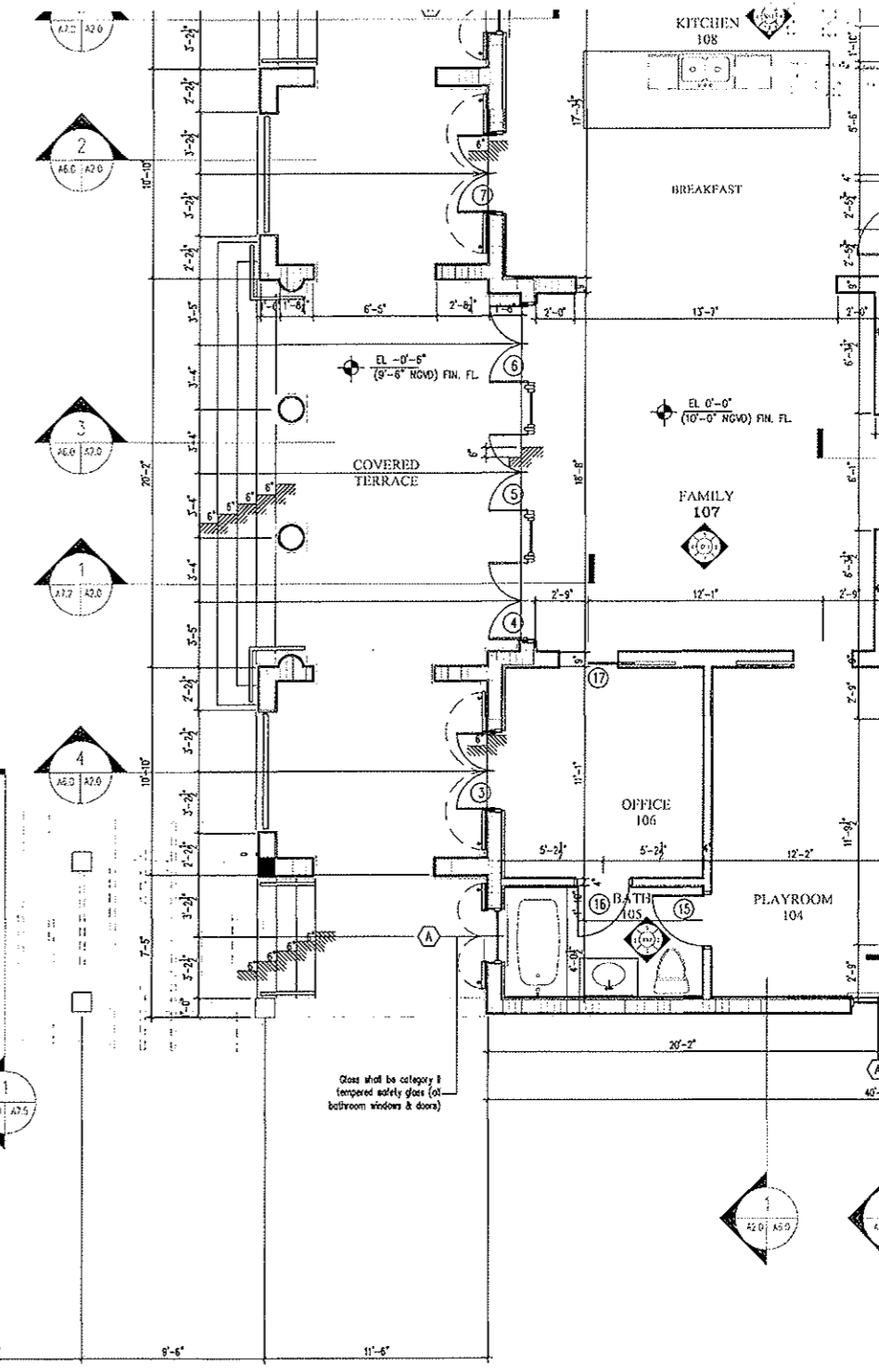
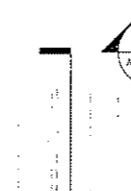
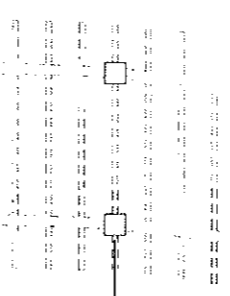
MR & MRS ZAMBRANO RESIDENCE
169 Harbor Drive
Key Biscayne FL 33149
TITLE: SITE PLAN

SEAL: [Signature]
Jodel F. Narcisse
LIC. ARD1740

SHEET NO.:
A1.0



1 FLOOR PLAN
 A2.0/A2.1 1/4"=1'-0"



Molina & Narcisse, Inc. ARCHITECTURE PLANNING INTERIORS <small>237 Atlantic Avenue Suite 103 Coral Gables, Florida 33134 T: 305-444-4200 F: 305-444-4215</small>		JOB NO. 0349 DRAWN BY BCS DATE 11/20 CHECKED JFN	NO. 1 REVISION CORRECTED SCALE AND CALCULATIONS ON A1.0 CORRECTIONS BASED ON COMM. RECEIVED 01/26	DATE 11/20 2/23
MR & MRS ZAMBRIANO RESIDENCE <small>269 Harbor Drive Key Biscayne Fl. 33149</small>		TITLE: FIRST FLOOR PLANS		
		SHEET NO.: A2.1		

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