

PROCESS No.
FOLIO No.

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

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

C.O.R. 4.00

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

Amended by MDC-DERM Oct., 1999

SECTION A - PROPERTY OWNER INFORMATION

For Insurance Company Use:

BUILDING OWNER'S NAME
COASTAL HOME BUILDERS.

Policy Number

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.
592 FERNWOOD ROAD

Company NAIC Number

CITY
KEY BISCAYNE

STATE
FL

ZIP CODE
33149

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
LOT 3 BLK 1 SUB TROPICAL ISLE HOMES PB 50 PG 64

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)
RESIDENTIAL

LATITUDE/LONGITUDE (OPTIONAL)
(##° - ##' - ###" or ##.#####)

HORIZONTAL DATUM:
 NAD 1927 NAD 1983

SOURCE: GPS (Type):
 USGS Quad Map Other: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER
120635 UNINCORPORATED AREAS

B2. COUNTY NAME
MIAMI DADE

B3. STATE
FL

B4. MAP AND PANEL NUMBER
12025C00381

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)
9.00

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.

FIS Profile X FIRM Community Determined Other (Describe): _____

B11. Indicate the elevation datum used for the BFE in B9: X 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 1 (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-i 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 Conversion/Comments _____

Elevation reference mark used KB-7-R the elevation reference mark used appear on the FIRM? Yes No

- o a) Top of bottom floor (including basement or enclosure) 9.20 ft.(m)
- o b) Top of next higher floor N/A ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) N/A ft.(m)
- o d) Attached garage (top of slab) N/A ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) AC PAD N/A ft.(m)
- o f) Lowest adjacent (finished) grade (LAG) 5.1 ft.(m)
- o g) Highest adjacent (finished) grade (HAG) 5.3 ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade N/A
- o i) Total area of all permanent openings (flood vents) in C3.h N/A sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

Alberto K. Vara
#3105
Jan 5, 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 ALBERTO VARA

LICENSE NUMBER #3105

TITLE

VICE-PRESIDENT

COMPANY NAME AMERICAN SERVICES OF MIAMI

ADDRESS

2450 S.W. 137th AVE., SUITE 217

CITY
MIAMI

STATE
FL

ZIP CODE
33175

SIGNATURE

Alberto K. Vara

DATE
1-5-06

TELEPHONE
(305)554-6963

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-8
Federal Emergency Management Agency
National Flood Insurance Program

OMB No. 1660-0008
Expires February 28, 2009

JOB # 08-17270 <u>BOL-05922</u> SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name Coastal Home Builders at Key Biscayne II, LLC		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 290-292 Fernwood Road		Company NAIC Number
City Key Biscayne		State FL ZIP Code 33149
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 6, Block 21, PB 53, Pg 39, Miami-Dade County Records		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat 25°41'46"N Long 80°09'52"W <input type="checkbox"/> 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>1</u>		
A8. For a building with a crawl space or enclosure(s), provide:		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) <u>N/A</u> sq ft		a) Square footage of attached garage <u>N/A</u> sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <u>N/A</u>		b) No. of permanent flood openings in the attached garage walls 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		c) Total net area of flood openings in A9.b <u>N/A</u> sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number City of Key Biscayne 120648		B2. County Name Miami-Dade		B3. State FL	
B4. Map/Panel Number 12025C 0281	B5. Suffix J	B6. FIRM Index Date 07/17/95	B7. FIRM Panel Effective/Revised Date 03/02/94	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 10.0' N.G.V.D.

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 (Describe) _____

B11. Indicate elevation datum used for BFE in Item 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 _____ CBRS OPA

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-g below according to the building diagram specified in Item A7.
 Benchmark Utilized V-313 (4.94') Date _____ Vertical Datum N.G.V.D.29
 Conversion/Comments _____

Check the measurement used.

- | | | | |
|---|-------|--|--|
| a) Top of bottom floor (including basement, crawl space, or enclosure floor) | 10.76 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters (Puerto Rico only) |
| b) Top of the next higher floor | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters (Puerto Rico only) |
| c) Bottom of the lowest horizontal structural member (V Zones only) | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters (Puerto Rico only) |
| d) Attached garage (top of slab) | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters (Puerto Rico only) |
| e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters (Puerto Rico only) |
| f) Lowest adjacent (finished) grade (LAG) | 5.9 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters (Puerto Rico only) |
| g) Highest adjacent (finished) grade (HAG) | 6.8 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters (Puerto Rico only) |

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.

Check here if comments are provided on back of form.

Certifier's Name RENE AIGUESVIVES		License Number 4327	
Title: PROFESSIONAL LAND SURVEYOR & MAPPER		Company Name: ALVAREZ, AIGUESVIVES & ASSOCIATES, INC	
Address 5701 SW 107th AVENUE, SUITE 206	City MIAMI	State FL	ZIP Code 33173
Signature 	Date 07/03/08	Telephone (305)385-0385	

PSN #4327

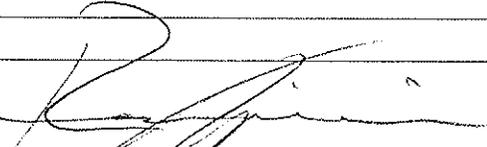
Rene Aiguesvives
P.L.S.M.F.L Lic. # 4327
Date: 07/03/08

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. 290 Fernwood Road			Policy Number
City Key Biscayne	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
CROWN OF ROAD ELEVATION=4.91 FT

Signature 

Date
07/03/08

Check here if attachments

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, crawl space, or enclosure) is _____ feet meters above or below the HAG.
 - b) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the LAG.
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 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'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. Check the measurement used in Items G8. and G9.

- 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.-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: _____ feet meters (PR) Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____

Local Official's Name	Title
Community Name	Telephone
Signature	Date
Comments	

Check here if attachments

Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 290 Fernwood Road			For Insurance Company Use. Policy Number
City Key Biscayne	State FL	ZIP Code 33149	Company NAIC Number

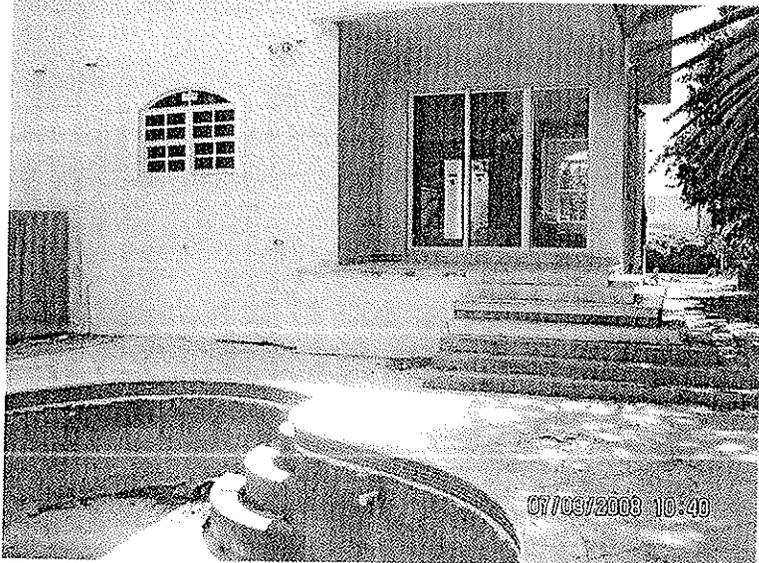
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.

Front View 07/03/08



PA

Rear View 07/03/08



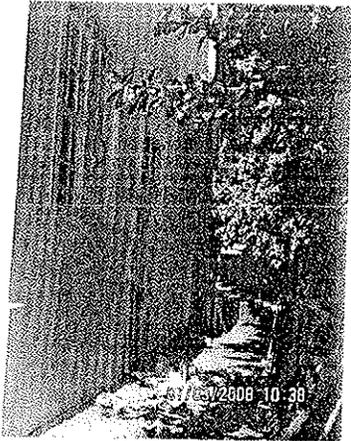
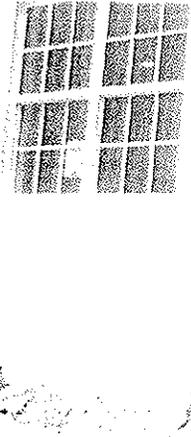
PA

Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 290 Fernwood Road			For Insurance Company Use: Policy Number
City Key Biscayne	State FL	ZIP Code 33149	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."



Handwritten initials or mark.

Side View

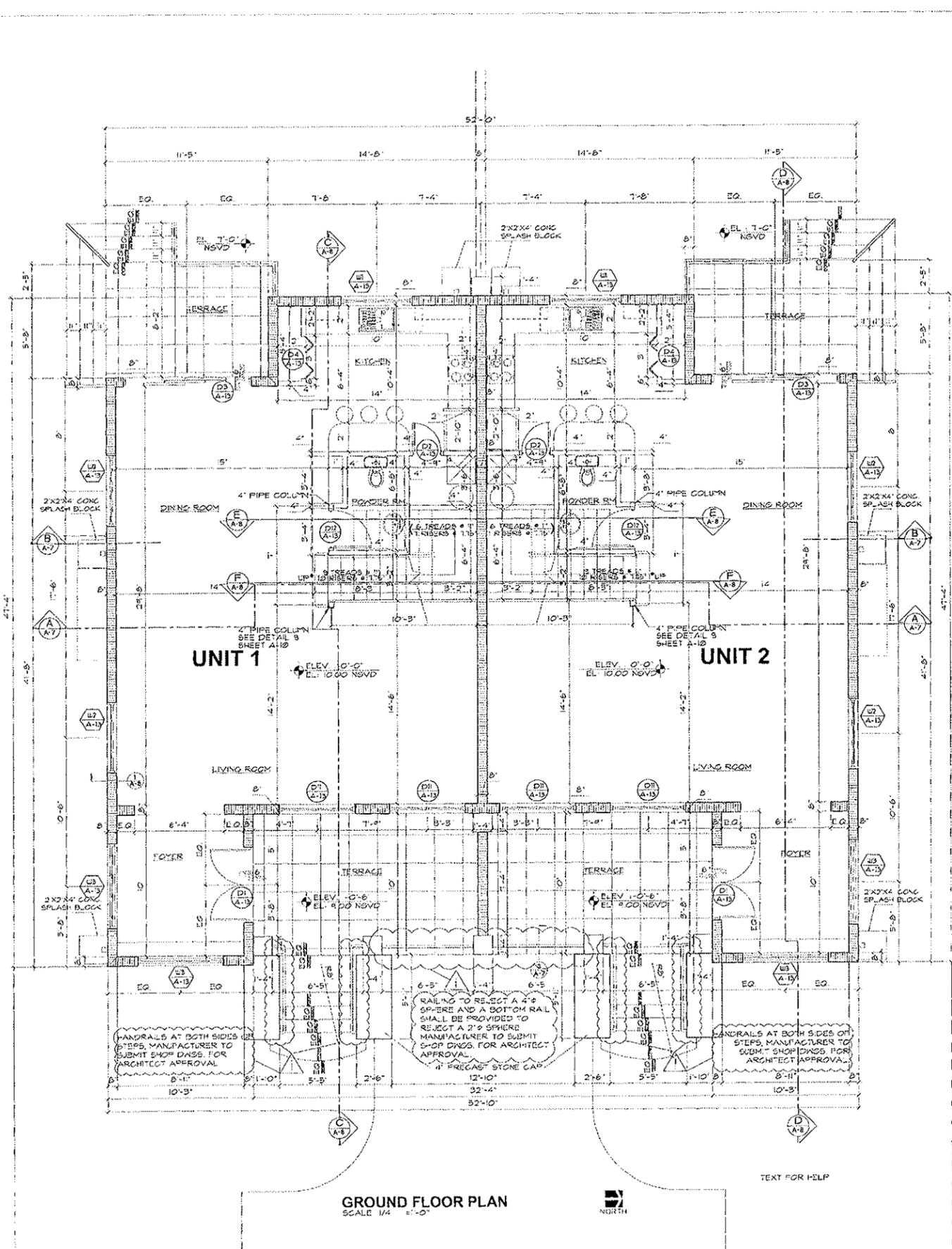


Handwritten initials or mark.

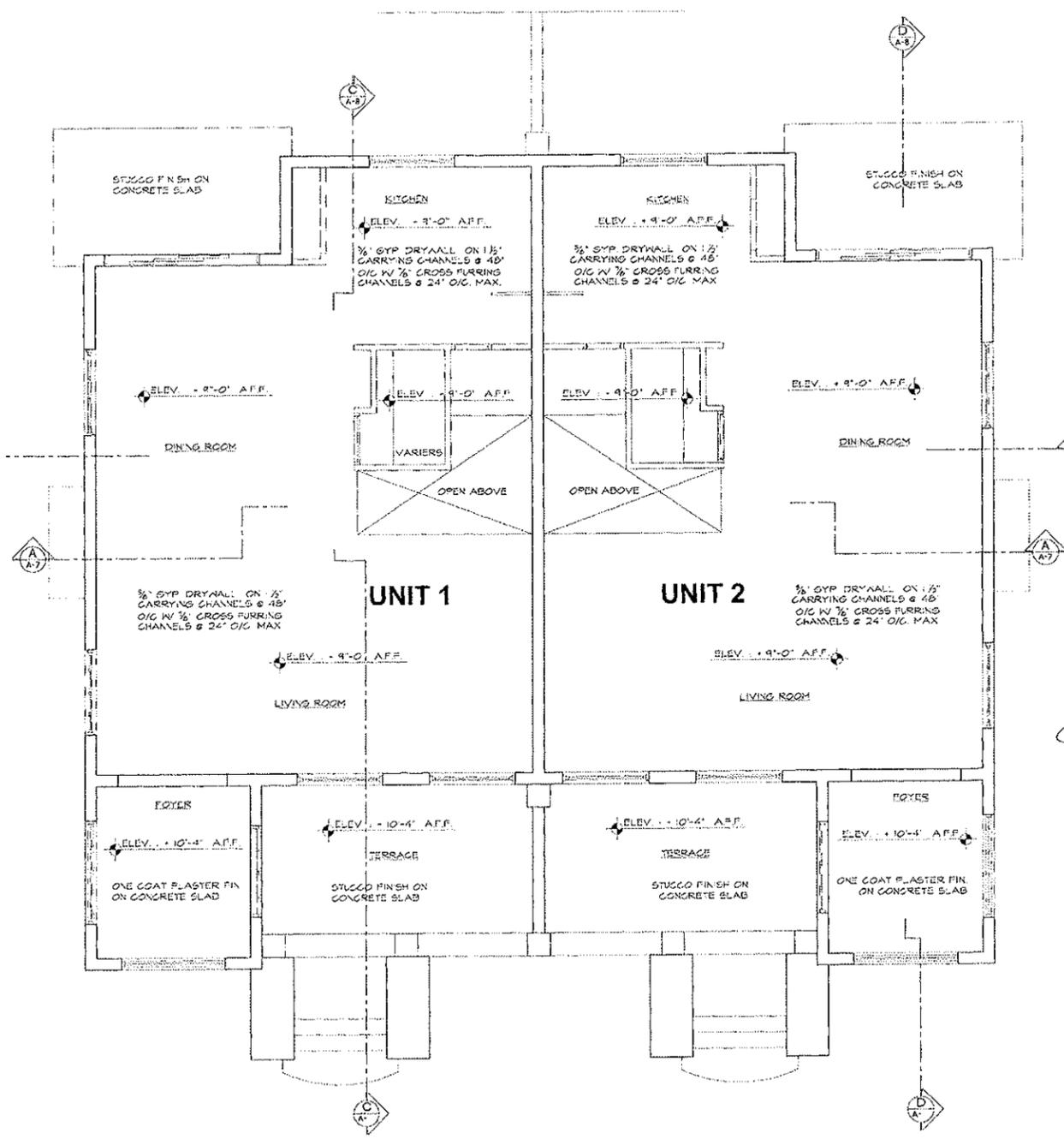
Add. Rear View



Handwritten initials or mark.



GROUND FLOOR PLAN
SCALE 1/4" = 1'-0"



GROUND FLOOR REFLECTED CEILING PLAN
SCALE 1/4" = 1'-0"

<p>PROPOSED FERNWOOD RESIDENCE</p> <p>290 FERNWOOD RD. KEY BISCAYNE - FLORIDA. PH: 305 599 4947</p> <p>10/16/06</p> <p>ARCHITECTURE / PLANNING / INTERIORS GUSTAVO J. RANOS 13325 NW 15th St # 113, MIAMI, FL PHONE: 305 599 4847</p>	<p>G</p> <p>DATE: 02/06/06 SCALE: AS NOTED DRAWN: RGA-DAY FRAMED: F</p> <p>A-2</p> <p>SHEET 31</p>
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