

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: <input type="checkbox"/> NAD 1927 <input checked="" 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 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. 137 th AVE., SUITE 217	CITY MIAMI
SIGNATURE <i>Alberto K. Vara</i>	STATE FL
	ZIP CODE 33175
	DATE 1-5-06
	TELEPHONE (305)554-6963

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. 592 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

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

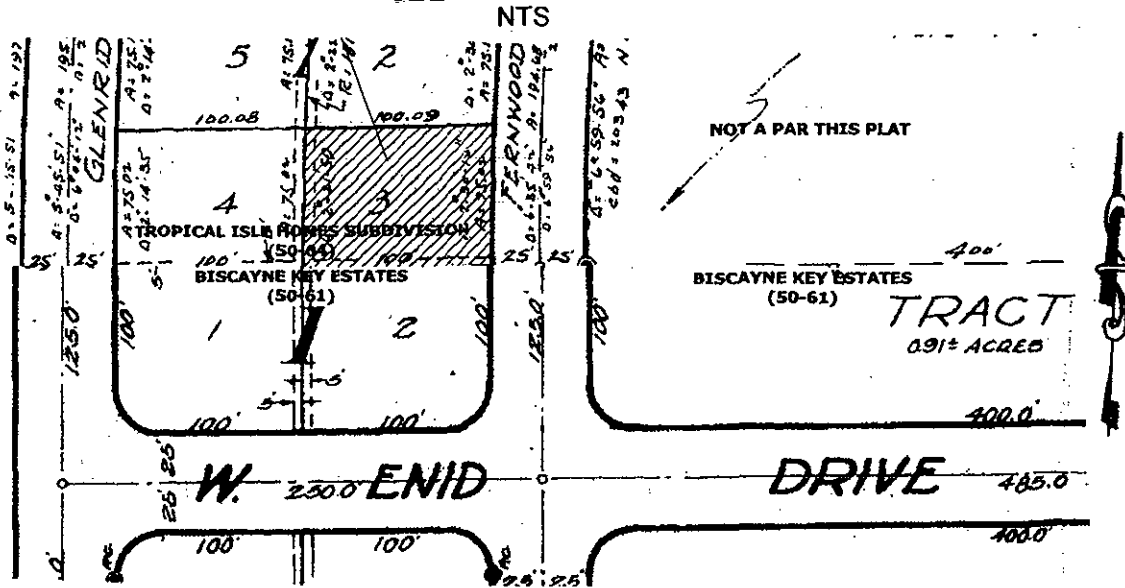
COMMENTS

Check here if attachments

LEGAL DESCRIPTION:

LOT 3, BLK 1 OF TROPICAL ISLE HOMES SUBDIVISION ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 50 AT PAGE 64 OF THE PUBLIC RECORDS OF MIAMI DADE COUNTY, FLORIDA.

LOCATION MAP



CERTIFIED TO: **COASTAL HOME BUILDERS.**

WE HEREBY CERTIFY THAT THE ATTACHED SKETCH OF BOUNDARY SURVEY OF THE ABOVE DESCRIBED PROPERTY IS A TRUE AND CORRECT REPRESENTATION OF A FIELD SURVEY MADE UNDER MY SUPERVISION AND MEETS THE MINIMUM TECHNICAL STANDARDS, AS SET BY THE FLORIDA BOARD OF PROFESSIONAL LAND SURVEYORS AND MAPPERS, IN CHAPTER 61G 17-6 OF THE FLORIDA ADMINISTRATIVE CODE, PURSUANT TO SECTION 472.027, FLORIDA STATUTES.

ADDRESS: **592 FERNWOOD RD. KEY BISCAYNE, FL 33149.**

JOB NUMBER: **04-631**

DATE OF FIELD SURVEY: **NOV 10, 2004 (FORM CHECK)**

REVISION DATE: **JANUARY 2, 2006 (FINAL)**

REVISION DATE: _____

American Services Of Miami, Corp.
 Engineers – Planners – Surveyors
LB # 6683
 2450 S.W. 137th Ave., Suite 217, Miami, Florida 33175
 Phone: (305) 554-6963 Fax: (305) 554-7516
 Email: JENNY@ASOMIAMI.COM

SURVEYOR'S NOTES:

- EXAMINATION OF THE ABSTRACT OF TITLE WILL HAVE TO BE MADE TO DETERMINE ANY RECORDED INSTRUMENTS, OTHER THAN THE ONES SHOWN ON THE RECORDED PLAT, ARE AFFECTING THE SURVEYED PROPERTY
- SHOWN ELEVATIONS ARE BASED ON N.G.V.D. (NATIONAL VERTICAL DATUM OF 1929)
- LEGAL DESCRIPTION WAS PROVIDED BY THE CLIENT (ANY ADDITIONAL DEDICATIONS OTHER THAN THE ONES DESCRIBED ON THE RECORDED DEED ARE NOT SHOWN ON THIS SURVEY)
- NO UNDERGROUND UTILITIES OR IMPROVEMENTS HAVE BEEN LOCATED, EXCEPT AS NOTED.
- THERE ARE NO VISIBLE ENCROACHMENTS OTHER THAN THOSE SHOWN.

ABBREVIATIONS (IF ANY)		
C/L= CENTER LINE	REC.(R)=RECORDED	RAD=RADIAL
F.D.H.=FOUND DRILL HOLE	P.O.C.=POINT OF CURVATURE	U.E.=UTIL. EASMENT
A/C=AIR CONDITIONING UNIT	CL= CLEAR	M=MONUMENT LINE
P/L=PROPERTY LINE	ENC.=ENCROACHMENT	P.C.=POINT OF CURVATURE
R/W=RIGHT OF WAY	C.B.S.=CONCRETE BLOCK STRUCT.	F.H.=FIRE HYDRANT
C.L.F.=CHAIN LINK FENCE	CONC.=CONCRETE	EASMT=EASMENT
W.F.=WOODEN FENCE	Ø=DIAMETER	S.D.H.=SET DRILL HOLE
RES.=RESIDENCE	D.M.E.=DRAINAGE MAINT. EASTMT.	CALC.(C)=CALCULATED
F.I.P.=FOUND IRON PIPE	S.I.P.=SET IRON PIPE	
MEAS.(M)=MEASURED	P.O.B.=POINT OF BEGINNING	

Alberto R. Varas

ALBERTO R. VARAS
 PROFESSIONAL LAND SURVEYOR
 AND MAPPER, No. 3105
 STATE OF FLORIDA
 DATE: **JANUARY 6, 2006**

NOT VALID UNLESS SEALED WITH AN ENBOSSSED SURVEYOR SEAL