

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name <u>BISWAYNE BLUE DEVELOPMENT</u>		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>485 RIDGEWOOD ROAD</u>		Company NAIC Number
City <u>KEY BISWAYNE</u> State <u>FL</u> ZIP Code <u>33149</u>		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>LOT 5 BLOCK 6 OF FIRST ADDITION TO TROPICAL ISLE HOMES PLAT BOOK 50 PAGE 72</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>		
A5. Latitude/Longitude: Lat. <u>25°41'31.58"N</u> Long. <u>80°10'01.50"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>6</u>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <u>1913</u> sq ft		a) Square footage of attached garage <u>N/A</u> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>12</u>		b) No. 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 A8.b <u>5968.8</u> sq in		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		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 <u>VILLAGE OF KEY BISWAYNE 120648</u>		B2. County Name <u>MIAMI-DADE</u>		B3. State <u>FLORIDA</u>	
B4. Map/Panel Number <u>12086C0483</u>	B5. Suffix <u>L</u>	B6. FIRM Index Date <u>09/11/2009</u>	B7. FIRM Panel Effective/Revised Date <u>09/11/2009</u>	B8. Flood Zone(s) <u>AE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>+10.0'</u>

- 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 N/A CBRS OPA

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

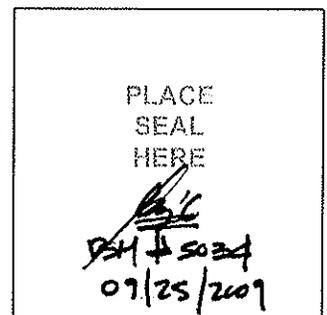
- C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.
- C2. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete items C2.a-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.
 Benchmark Utilized 0020KB-KB7R Vertical Datum N.G.V.D. 1929
 Conversion/Comments N/A
- Check the measurement used.
- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 5.0 feet meters (Puerto Rico only)
- b) Top of the next higher floor 10.10 feet meters (Puerto Rico only)
- c) Bottom of the lowest horizontal structural member (V Zones only) N/A feet meters (Puerto Rico only)
- d) Attached garage (top of slab) N/A feet meters (Puerto Rico only)
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 10.0 feet meters (Puerto Rico only)
- f) Lowest adjacent (finished) grade next to building (LAG) 5.0 feet meters (Puerto Rico only)
- g) Highest adjacent (finished) grade next to building (HAG) 5.57 feet meters (Puerto Rico only)
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support N/A feet 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. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Certifier's Name <u>OSCAR EMILIO BAEZ-CUSIDO, PSM</u>		License Number <u>5034</u>	
Title <u>REGISTERED SURVEYOR AND MAPPER</u>		Company Name <u>360° SURVEYING AND MAPPING</u>	
Address <u>2000 SW 83RD CT.</u>		City <u>MIAMI</u>	State <u>FL</u> ZIP Code <u>33155</u>
Signature 	Date <u>09/25/2009</u>	Telephone <u>305-265-10002</u>	



IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

485 RIDGEWOOD ROAD

City KEY BISCAYNES State FL ZIP Code 33149

For Insurance Company Use:

Policy Number

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 SECTION C., C.2., e, TYPE OF EQUIPMENT = A/C UNIT
CROWN OF ROAD ELEVATION = 4.23'

Signature



Date 09/25/2009

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, 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 8-9 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

- 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 _____
- G10. Community's design flood elevation _____ feet meters (PR) Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments

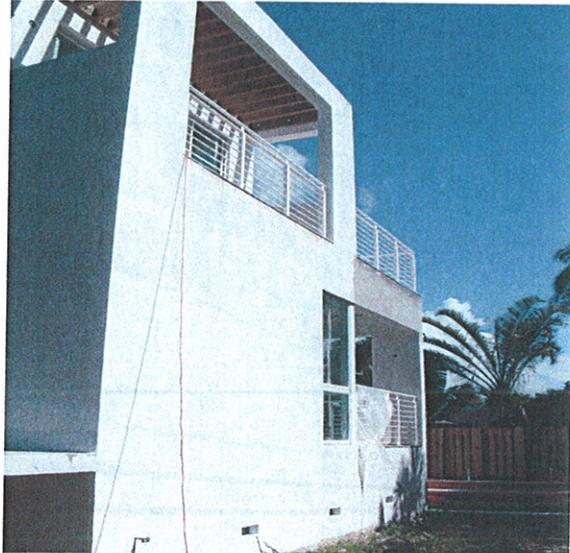
Check here if attachments

Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 485 RIDGEWOOD ROAD	For Insurance Company Use: Policy Number
City KEY BISCAWAYNE 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."	

07/24/2009

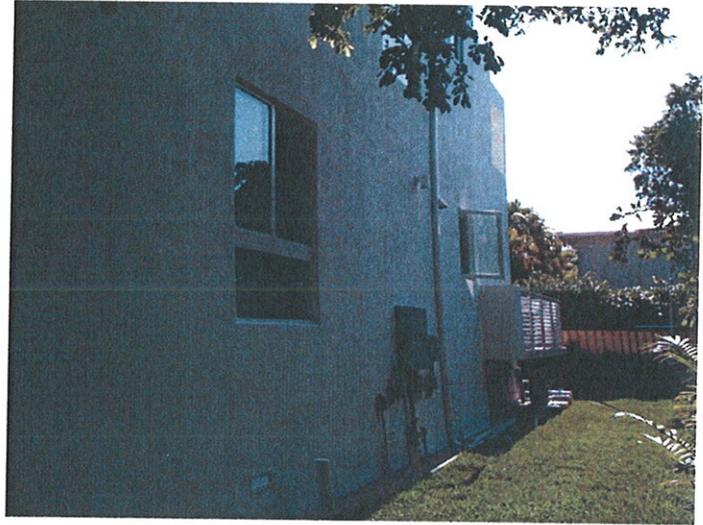


Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 485 RIDGEWOOD 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.	

07/22/2009





Project Name
NEW SINGLE FAMILY RESIDENCE
 455 RIDGEWOOD ROAD
 KEY BISCAYNE, FL 33149

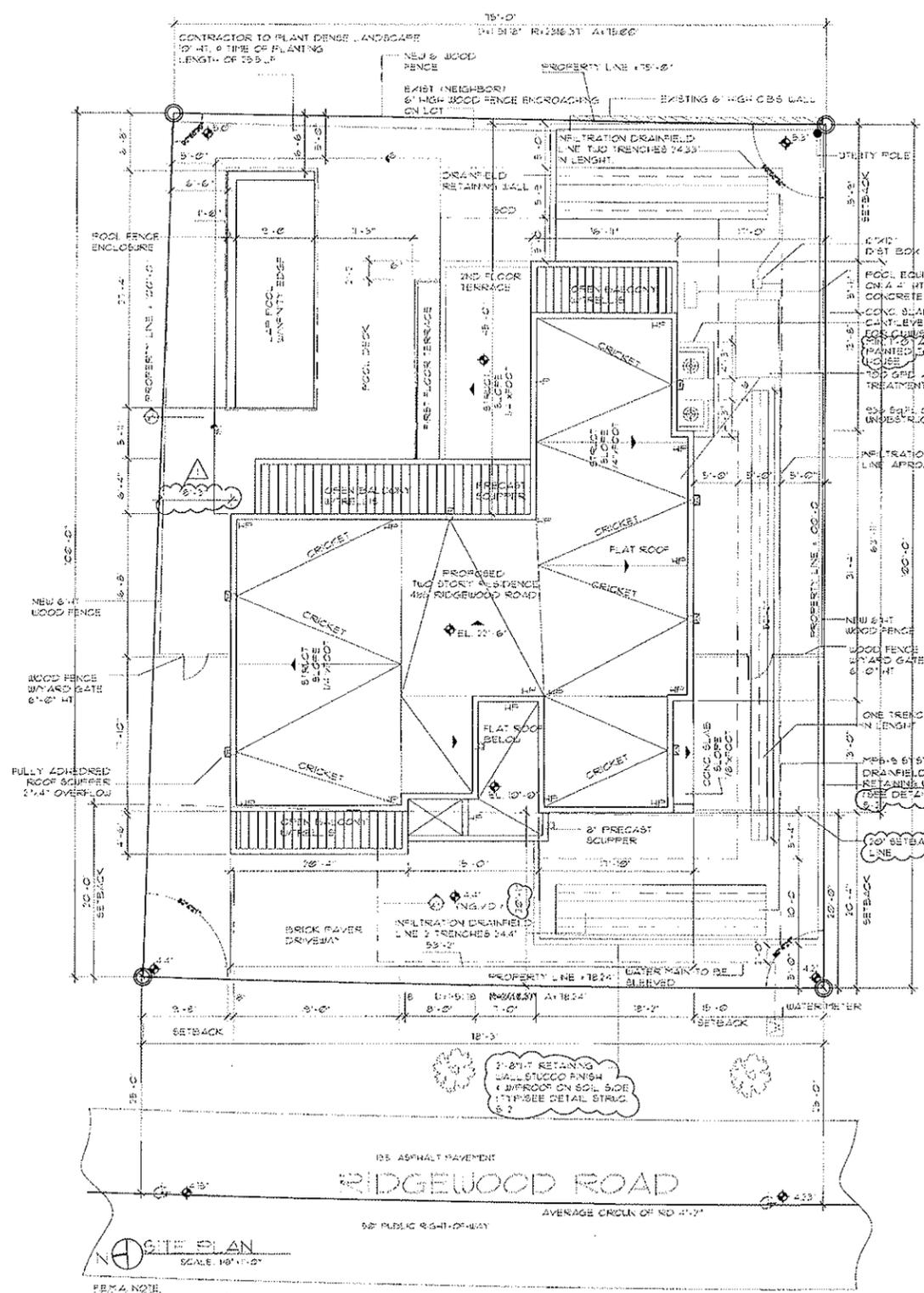
EDUARDO LLANO
A.R.C.H.I.T.E.C.T
 250 Colophon Ave Suite 507
 Coral Gables, FL 33134
 PHONE (305) 446-1121
 PHONE (305) 774-1881
 FAX (305) 774-1881

SITE PLAN
 Drawn by: [Signature]

Comm. No. 0601
 Scale 1/8" = 1'-0"
 Date 11/02/06
 Drawn 001/PM
 Checked MGI
 CAD File 06-01-485

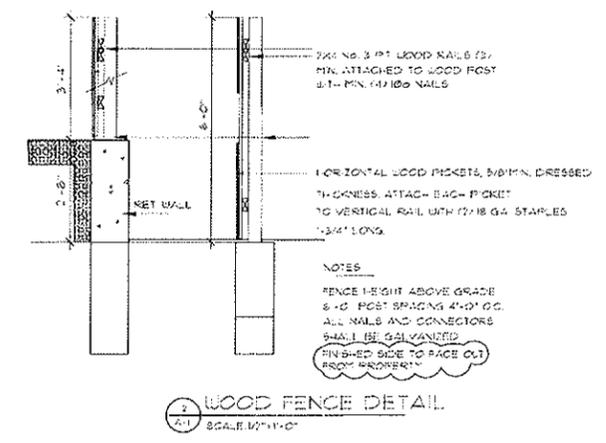
Permits	
1. 4-25-07	ZONING COMM.
2. 4-11-07	ZONING COMM.

Sheet No. **A-1**



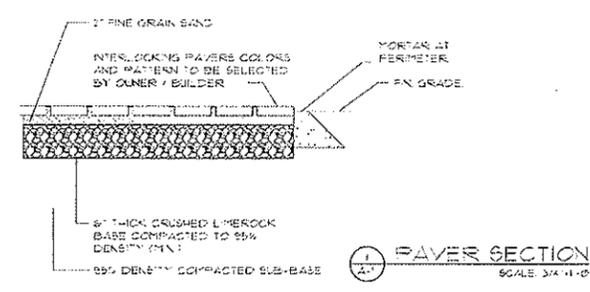
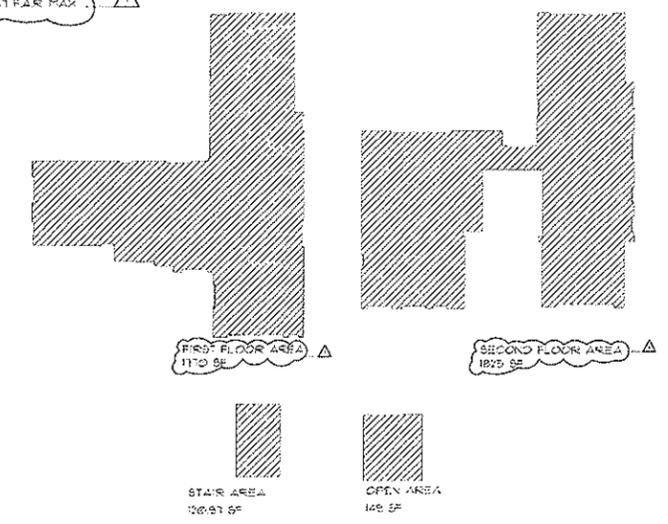
- BONUS CRITERIA**
1. PORCH FACING A STREET
 2. OPEN AND UNENCLOSED BALCONIES LOCATED ABOVE THE FIRST FINISHED FLOOR
 3. BUILDING LOCATED 15-20 FEET FROM FRONT OF PROPERTY LINE
 4. GARAGE OR CARPORT CONTAINING 2 OR MORE VEHICLES PARKED PARALLEL WITH AN EXTERIOR COLUMN SEPARATING EACH OF THE SPACES
 5. N/A
 6. N/A
 7. N/A
 8. N/A
 9. SITE YARD SETBACK WHICH EXCEEDS THE REQUIRED YARD
 10. GARAGE AS A MINIMUM 5' SIDE YARD SETBACK
 11. BUILDING LOCATED WITHIN 25 FT OF THE REAR LOT LINE
 12. 1/4 IR DISTINCT STRUCTURES THAT PROVIDE A FRONT SETBACK OF LESS THAN 15' WHICH HAVE A ROOF AT LEAST 3' LOWER THAN THE ROOF OF THE MAIN STRUCTURE.
 13. REDUCTION OF BUILDING HEIGHT

- F.A.R. BONUS**
- 02225 X 5415 SF + 02071
 - 02205 X 6175 SF + 03
 - 001 X 2033' (F+02022)
 - 03
 - N/A
 - SIDE SETBACK 15'-00" + 03 SOUTH SIDE
 - 02 X 6'-0" LF + 01698
 - 03
 - 15 LF X 006 + 075 03 MAX
 - 018958 + 30 + 048958 + 41 F.A.R. MAX



ZONING INFORMATION

PROVIDED	REQUIRED
LOT AREA: 7661 SF	
SETBACK REQUIREMENTS:	
FRONT SETBACK:	20'
ACTUAL GARPORT (encroachment) 15'-6"	
ACTUAL PORCH (encroachment) 15'-8"	
ACTUAL STRUCTURE (encroachment) 15'-8"	4' + 20'
SIDE SETBACK 15'-00" + 03	
ACTUAL LEFT SIDE SETBACK 15'-0"	
ACTUAL RIGHT SIDE SETBACK 15'-0"	
REAR SETBACK:	20'+25'
ACTUAL REAR SETBACK (encroachment) 15'-8"	
ACTUAL STRUCTURE (encroachment) 15'-8"	
ALL QUALIFYING F.A.R. BONUS 362067 SF	
30 (02022) 41 MAX F.A.R.	
MINIMUM PERVIOUS AREA:	32% OF LOT
ACTUAL PERVIOUS AREA:	36%
MAXIMUM LOT COVERAGE:	7661 X 25% = 1915 SF
ACTUAL LOT COVERAGE:	7661 X 22% = 1705 SF
TOTAL PROPOSED F.A.R.:	
FIRST FLOOR:	1170 SF
SECOND FLOOR:	1825 SF
TOTAL ACTUAL F.A.R.:	3000 SF



SEPTIC TANK CHART

BEDROOMS	5
LIVING AREA	1609 SF
SEWAGE FLOW	500 GAL/DAY
UNOBSTRUCTED AREA REQUIRED	428 SF
UNOBSTRUCTED AREA PROVIDED	428 SF
ATU TREATMENT CAPACITY	100 GAL

SEPTIC NOTE
 THERE ARE NO PERTINENT FEATURES ON THE ADJACENT PROPERTY OR ACROSS THE STREET THAT MAY AFFECT THE SYSTEM INSTALLATION.

FOUNDATION NOTE
 FOUNDATION AREA 1832 SF
 1500N PER FOOTING
 01 GRAIN 89'22E
 9 X 8 2/3 X 12 5/8 IN. 182 SQ IN
 42" DIA. 560 SQ IN
 3/4" REIN REQUIRED
 742 SQ IN PROVIDED

Eduardo Llano
15/5/18

AD 001495/

Project Name
NEW SINGLE FAMILY RESIDENCE
485 PALMWOOD ROAD
ADY BISSONNETTE, FL 33146

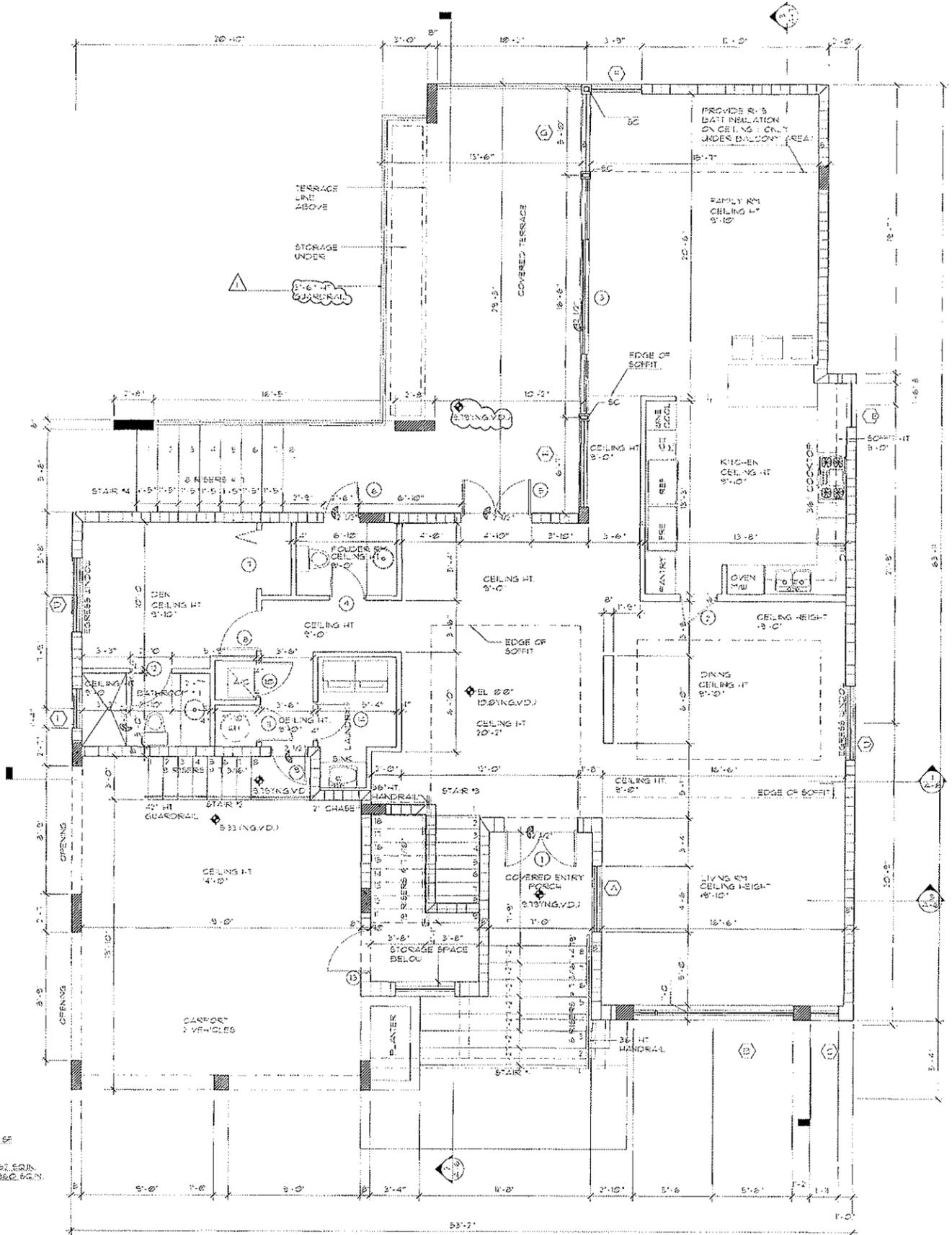
EDUARDO LLANO
A.R.C.H.I.T.E.C.T
250 CALADORA AVE. SUITE 207
CORAL GABLES, FL 33134
PHONE (305) 438-1121
(305) 774-1681
FAX (305) 774-1681

Project Title
FIRST FLOOR PLAN

Contn. No. 001
Scale 1/4" = 1'-0"
Date 11/29/2018
Drawn GR/AM
Checked DR
CADD File 06-01-485

Revisions
1 1-10-17 BALKING COMM

Sheet No
A-2



PERA NOTE:
FOUNDATION AREA 832 SF
1.50 IN. LIES EACH SCENT
OF CRALL SPACE
3.2 X 8 KIRLINS 90 IN. 192 SQ. IN.
40 X 54 IN. 2160 SQ. IN.
1932 SQ. IN. REQUIRED 3862 SQ. IN.
750 SQ. IN. PROVIDED

FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0"