

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

1303-02739

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name <b>CHRISTIAN LOVERA PINA</b>	10-510	Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>265 W. HEATHER DRIVE</b>		Company NAIC Number
City <b>KEY BISCAYNE</b>	State <b>FLORIDA</b>	ZIP Code <b>33149</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>LOT 20, BLOCK 29, 4TH ADDITION TO TROPICAL ISLE HOMES, P.B. 53, PAGE 39.</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>RESIDENTIAL</b>		
A5. Latitude/Longitude: Lat. <b>N25°41'38.70"</b> Long. <b>W80°10'08.03"</b> 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 <b>1A</b>		
A8. For a building with a crawlspace or enclosure(s):		
a) Square footage of crawlspace or enclosure(s)	<u>N/A</u> sq ft	A9. For a building with an attached garage:
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	<u>N/A</u>	a) Square footage of attached garage
c) Total net area of flood openings in A8.b	<u>N/A</u> sq in	b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		c) Total net area of flood openings in A9.b
		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 <b>VILLAGE OF KEY BISCAYNE 120648</b>		B2. County Name <b>MIAMI-DADE</b>		B3. State <b>FLORIDA</b>	
B4. Map/Panel Number <b>12086C0483</b>	B5. Suffix <b>L</b>	B6. FIRM Index Date <b>9/11/09</b>	B7. FIRM Panel Effective/Revised Date <b>9/11/09</b>	B8. Flood Zone(s) <b>AE</b>	B9. Base Flood Elevation(s) (Zone AE, use base flood depth) <b>10.00'</b>

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)?  
 Designation Date N/A  CBRS  OPA  Yes  No

## 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 KB-7-R Vertical Datum NGVD 1929  
 Conversion/Comments N/A

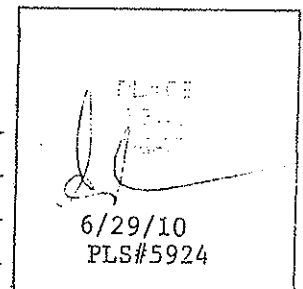
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>10 98</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>N/A</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>6 90</u> <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 and location in Comments)	<u>10 15</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG)	<u>5 70</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG)	<u>10 40</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>N/A</u> <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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No

Certifier's Name <b>ADIS N. NUNEZ</b>		License Number <b>5924</b>	
Title <b>REGISTERED LAND SURVEYOR</b>	Company Name <b>BLANCO SURVEYORS, INC.</b>		
Address <b>555 NORTH SHORE DRIVE</b>	City <b>MIAMI BEACH</b>	State <b>FLORIDA</b>	ZIP Code <b>33141</b>
Signature 	Date <b>6/29/10</b>	Telephone <b>305 865-1200</b>	



**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. 265 W. HEATHER DR.	For Insurance Company Use: Policy Number
City KEY BISCAAYNE	State FLORIDA
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  
 LATITUDE AND LONGITUDE OBTAINED BY GOOGLE. C2.e) A/C SLAB ELEVATION.  
 CROWN OF THE ROAD ELEVATION: 4.98' ON CENTERLINE ON CENTER OF THE ROAD.  
 BM# KB-7-R LOCATOR: 0028 KB ELEV: 4.56'  
 Signature \_\_\_\_\_ Date 6/28/10

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 _____
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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 \_\_\_\_\_

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

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

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

C.O.R: 4.00

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:
BUILDING OWNER'S NAME			Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 265 W. Heather Dr.			Company NAIC Number
CITY Key Biscayne	STATE FL	ZIP CODE 33149	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 20, Block 29, 4 <sup>th</sup> Addition to tropical Isle Homes Subdivision, P.B. 53, Pg. 39, Miami-Dade County, Fl.			
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"/> Oth	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Key Biscayne, Village of & 120648		B2. COUNTY NAME Miami-Dade		B3. STATE Florida	
B4. MAP AND PANEL NUMBER 12025C & D281	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) 10.00

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 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, ARIA, ARIAE, ARIA1-A30, ARIAH, ARIA0  
 Complete Items C3.-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 N.G.V.D.(1929) Conversion/Comments City of Miami BM KB-7-R, EL 4.56, Locator: 0020 KB  
 Elevation reference mark used      Does the elevation reference mark used appear on the FIRM?  Yes  No

o a) Top of bottom floor (including basement or enclosure)	<u>10.00</u> ft.(m)
o b) Top of next higher floor	<u>21.34</u> ft.(m)
o c) Bottom of lowest horizontal structural member (V zones only)	<u>N/A</u> ft.(m)
o d) Attached garage (top of slab)	<u>5.00</u> ft.(m)
o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area)	<u>11.45</u> ft.(m)
o f) Lowest adjacent (finished) grade (LAG)	<u>4.90</u> ft.(m)
o g) Highest adjacent (finished) grade (HAG)	<u>5.95</u> ft.(m)
o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>N/A</u>
o i) Total area of all permanent openings (flood vents) in C3.h	<u>N/A</u> sq. in. (sq. cm) <u>N/A</u>

License Number, Embossed Seal, Signature, and Date

*[Signature]*

P.S.M. No. 4146  
Date: 05-25-04

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 <u>Manuel Felipe</u>		LICENSE NUMBER <u>4146</u>	
TITLE <u>Professional Surveyor and Mapper</u>		COMPANY NAME <u>Manuel Felipe</u>	
ADDRESS <u>8500 SW 8<sup>th</sup> Street, Suite 220</u>	CITY <u>Miami</u>	STATE <u>FL</u>	ZIP CODE <u>33144</u>
SIGNATURE <i>[Signature]</i>	DATE <u>05-25-04</u>	TELEPHONE <u>(305) 265-8308</u>	

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			For Insurance Company Use:
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.			Policy Number
CITY	STATE	ZIP CODE	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 HAS BEEN PREPARED ACCORDING TO MIAMI-DADE COUNTY DERM ELEVATION CERTIFICATE GUIDELINES.

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. 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

# SURVEY MAP

SCALE: 1"=20'

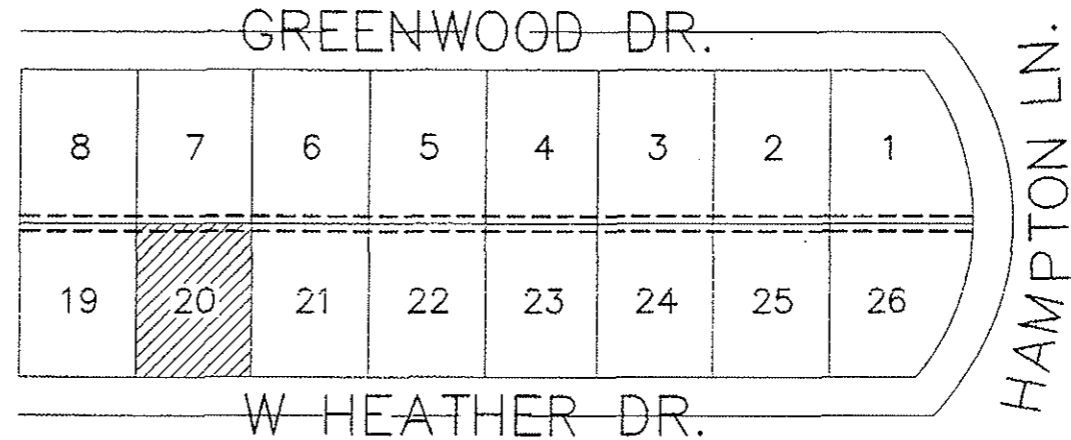
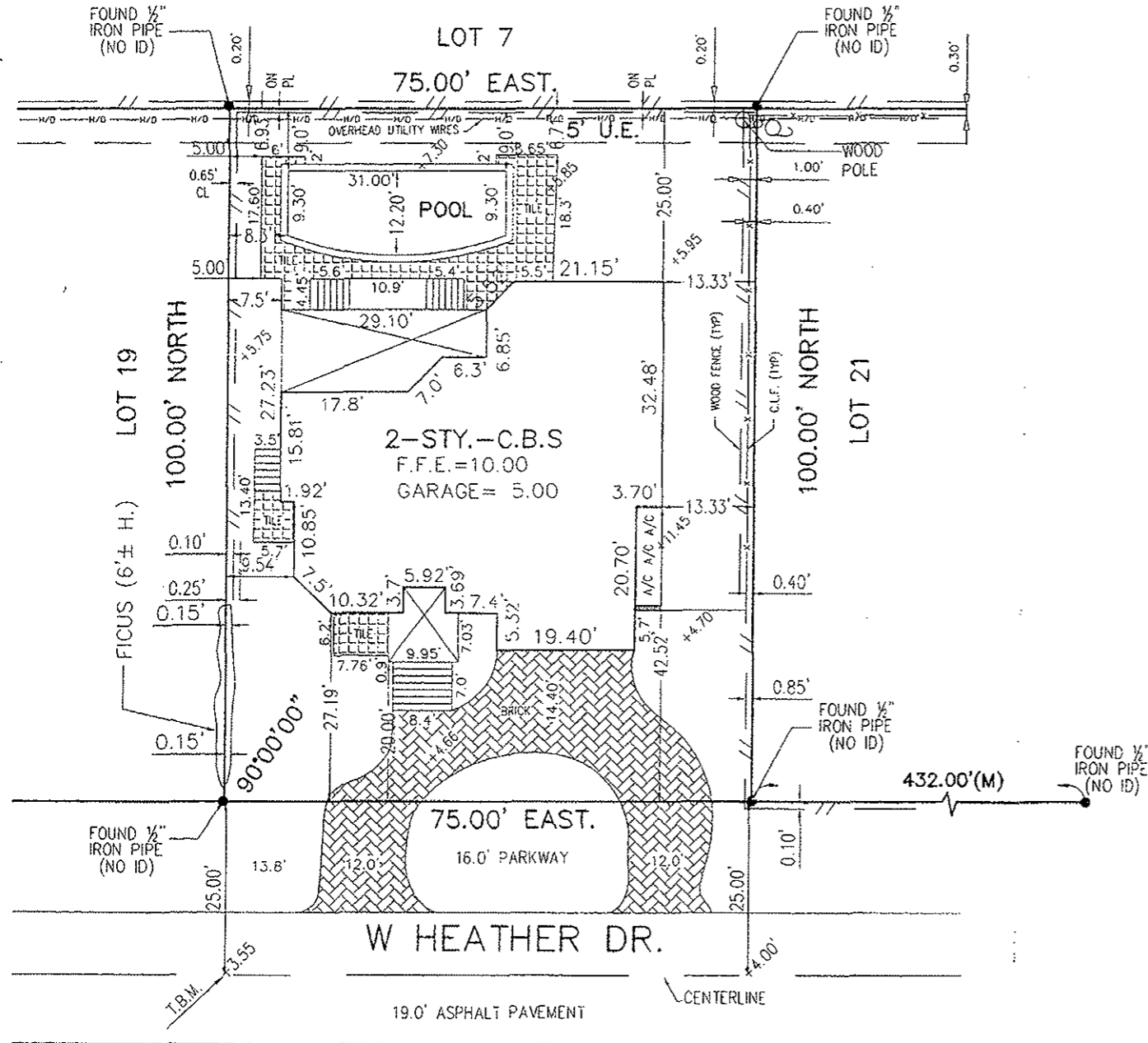
PROPERTY ADDRESS: 265 W. HEATHER DR., KEY BISCAIYNE, FLA.

LEGAL DESCRIPTION:

LOT 20, BLOCK 29, SUBDIVISION FOURTH ADDITION TO TROPICAL ISLE HOMES SUBDIVISION ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 53 AT PAGE 39 OF THE PUBLIC RECORDS OF MIAMI-DADE COUNTY, FLORIDA.

ACCORDING TO THE N.F.I.P. THIS PROPERTY LIES WITHIN FLOOD ZONE AE EL: 10.00 COMMUNITY N: 120648 PANEL N: 281 SUFFIX J DATED 07/17/95

Elevation are referred to N.G.V.D. 1929. BM.NAME: KB-7-R, EL: 4.56, Locotor: 0020 KB



LOCATION SKETCH

N.T.S.

"LEGEND"			
P.R.M.	PERMANENT REFERENCE MONUMENT	U.E.	UTILITY EASEMENT
P.C.P.	PERMANENT CONTROL POINT	W.F.	WOOD FENCE
F.I.B.	FOUND IRON BAR	M	MEASURE
S.I.B.	SET IRON BAR 1/2" STAMPED	R	RECORD
F.I.P.	FOUND IRON PIPE 1/2" STAMPED	S.N.D.	SET NAIL & DISC TAMPED P.L.S.
F.D.H.	FOUND DRILL HOLE	F.N.D.	FOUND NAIL & DISC
S.D.H.	SET DRILL HOLE	C.B.S.	CONCRETE BLOCK STRUCTURE
C/L	CENTER LINE	ENC.	ENCROACHMENT
RES.	RESIDENCE	CL	CLEAR
L.F.E.	LOWEST FLOOR ELEVATION	R/W	RIGHT OF WAY
F.F.E.	FINISH FLOOR ELEVATION	C.L.F.	CHAIN LINK FENCE
F.H.	FIRE HYDRANT	F.H.	FIRE HYDRANT
C.B.	CATCH BASIN		

PREPARED FOR:

GARAVITO ASSOCIATES  
CONSTRUCTION, LLC.

**SURVEYOR'S NOTES:**

- THIS IS A BOUNDARY SURVEY.
- Examination of ABSTRACT OF TITLE will have to be made to determine recorded instruments any affecting this property and is subject to dedications, limitations, restrictions, and/or easements of records.
- Unless otherwise noted, this survey has not attempted to locate any footing and/or underground utilities on and/or adjacent to the property.
- If shown, bearing are referred to an assumed meridian
- This survey has been prepared for the exclusive use of the entities named hereon.

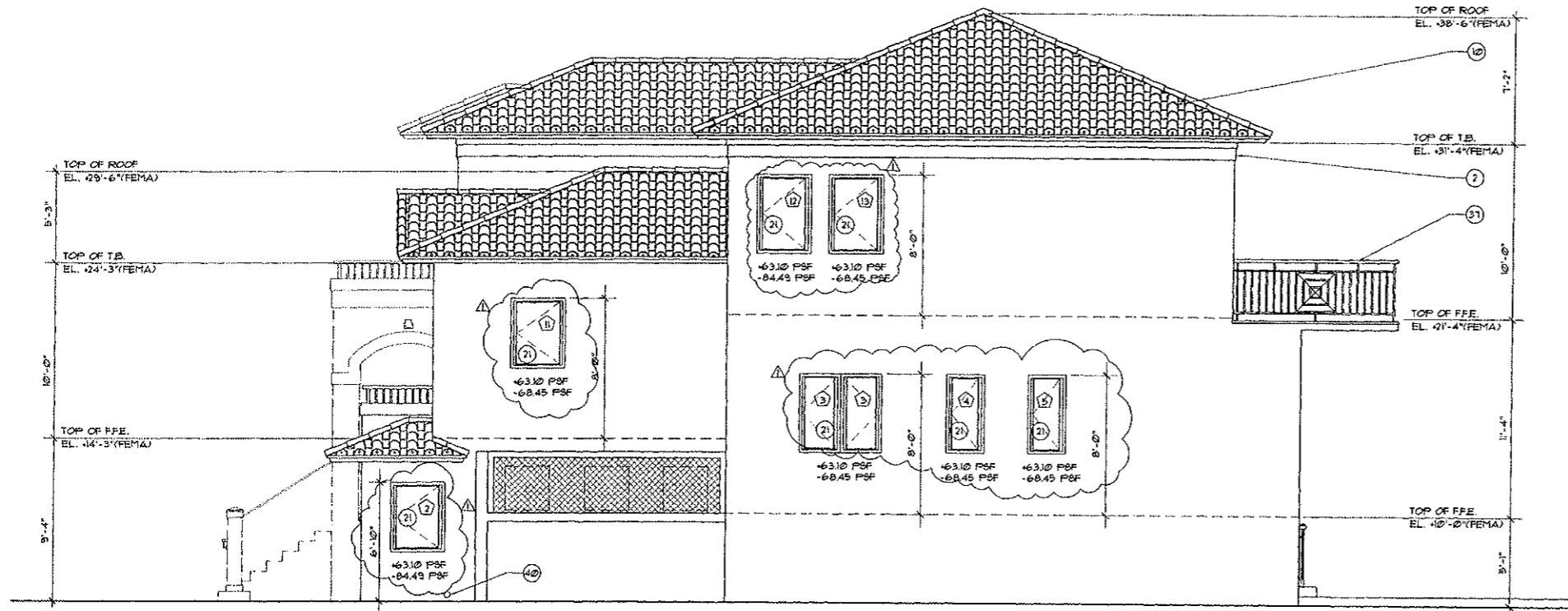
**MANUEL FELIPE**  
PROFESSIONAL SURVEYOR AND MAPPER  
8500 SW 8th ST. SUITE#220  
MIAMI FL. 33144  
PH: (305)265-8308 FAX(305)265-9082

I HEREBY CERTIFY, THAT THE ATTACHED SKETCH OF SURVEY OF THE HEREIN DESCRIBED PROPERTY WAS RECENTLY SURVEYED UNDER MY DIRECTION THAT THIS SURVEY MEETS THE M.T.S. SET FORTH BY THE F.B.P.S.M., PURSUANT TO CHAPTER 472.027 AND 61G17-6 F.A.C.  
NOT VALID UNLESS SEALED WITH AN EMBOSSED SURVEYOR SEAL

CERTIFICATE N: 4146  
STATE OF FLORIDA

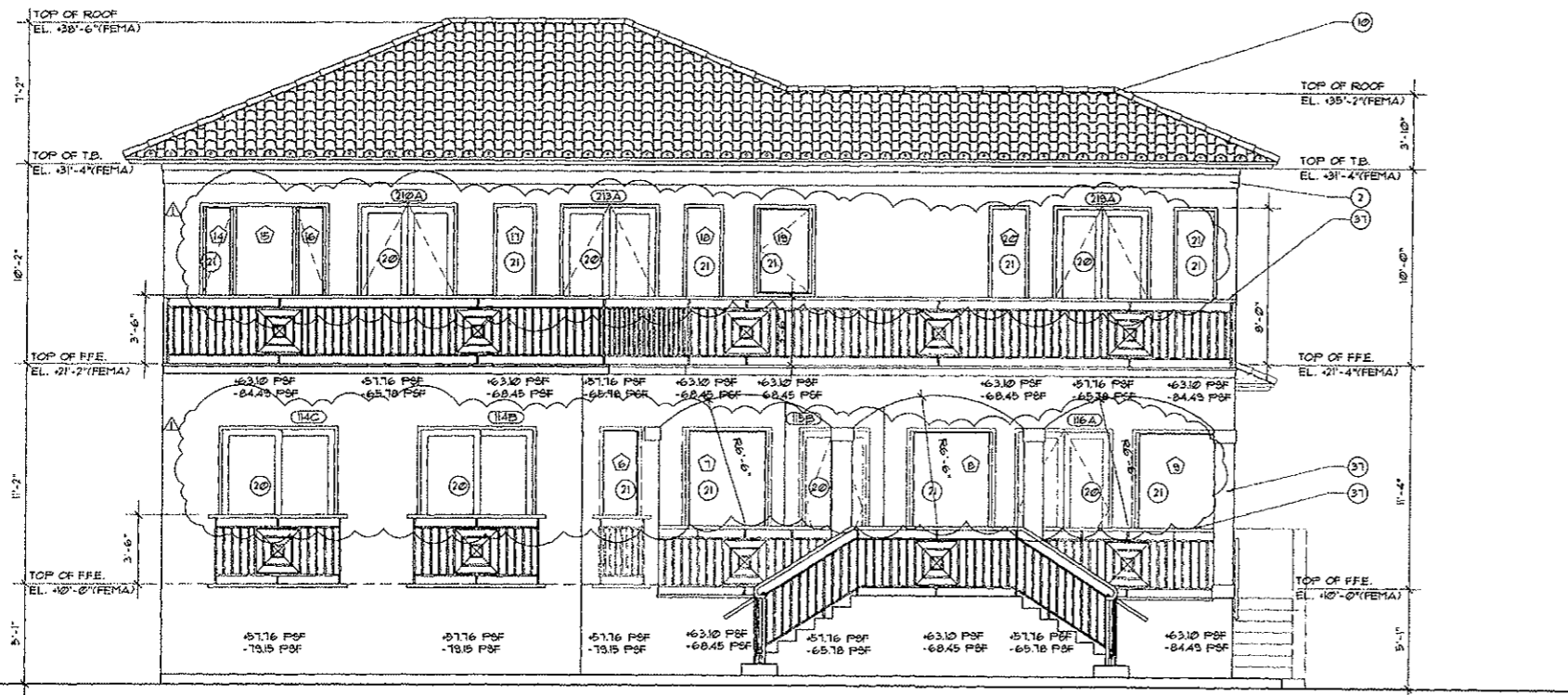
*Manuel Felipe*  
MANUEL FELIPE P.L.S.  
(FOR THE FIRM.)

REVISIONS	DATE
LAYOUT(2397)	02/04/03
Set back foundation (2600, 121/55)	03/31/03
FOUNDATION(2744, FILE)	05/04/03
POOL SET BACK (3249, FILE)	
FINAL SURVEY	05/25/04
WORK ORDER 3439	FB/PG. FILE



**EAST ELEVATION**

SCALE: 1/4" = 1'-0"



**NORTH ELEVATION**

SCALE: 1/4" = 1'-0"

**KEY NOTES:**

- 1 3/4" STUCCO PAINT FINISH.
- 2 3/4" STUCCO PAINTED DECORATIVE BAND.
- 3 5/8" GYP. BD. OVER 1/8" FURRING STRIP ON C.M.W. - INT. FIN.
- 4 5/8" DRYWALL CEILING ON 1x3" FURRING AT 24" O.C. ATTACHED TO MTL. CHANNEL AT PERIMETER WALL AND UNDERSIDE OF STRUCTURE
- 5 BATT INSULATION R-30.
- 6 8" CPN BLOCK SEE STRUCTURAL DUGS.
- 7 CONC. TIE BEAM SEE STRUCTURAL DUGS.
- 8 CONC. OVER VAPOR BARRIER, ON WELL COMPACTED FILL. FINISH TO BE SELECTED BY OWNER
- 9 5/8" DRYWALL CEILING ATTACHED TO MTL. CHANNEL.
- 10 TILE ROOF. INSTALL ON 3/8" FELT TIN CAPPED TO 5/8" EXT. GRADE PLYWOOD SHEATHING NAILED TO WOOD TRUSSES. ROOF TILE SYSTEM TO HAVE DADE COUNTY PRODUCT APPROVAL AND TO BE INSTALLED IN ACCORDANCE WITH PROTOCOLS.
- 11 PRIMED AND PAINTED GAL. METAL DRIP EDGE.
- 12 1x2 P.T. NAILER
- 13 2x8 P.T. WOOD FASCIA BOARD.
- 14 PREFABRICATED WOOD TRUSSES 24" O.C. SUBMIT SIGNED AND SEALED SHOP DRAWINGS FOR APPROVAL
- 15 RIGID INSULATION (MIN. R = 42)
- 16 DECORATIVE TRIMS SELECTED BY OWNER
- 17 LIGHT FIXTURE SELECTED BY OWNER
- 18 1/2" PREMOULDED EXPANSION JOINT MATERIAL
- 19 3/4" DEPRESSION AT ALL EXTERIOR WALLS AND BEAMS SUPPORTING EXTERIOR WALLS / STRUCTURE
- 20 EXTERIOR ALUM. AND GLASS FRENCH DOOR SEE DOOR SCHEDULE SELECTED BY OWNER
- 21 ALUM. AND GLASS WINDOW SEE WINDOW SCHEDULE. SELECTED BY OWNER
- 22 GRADE BEAMS - SEE STRUCT DUGS.
- 23 FLOOR TILE SELECTED BY OWNER
- 24 LAVATORY SELECTED BY OWNER
- 25 TOILET FIXTURE SELECTED BY OWNER
- 26 SHOWER AND SHOWER PAN FINISHED WITH CERAMIC TILE, GLASS FIXED PANEL AND SHOWER DOOR, SHOWER HARDWARE AND VALVES - SELECTED BY OWNER
- 27 MARBLE (SELECTED BY OWNER) ON 5/8" MOISTURE RESISTANT BOARD ON 1" x 2" NOM. P.T. LD. FURRING 24" O.C.
- 28 KITCHEN CABINETS SELECTED BY OWNER
- 29 CEILING FAN SELECTED BY OWNER
- 30 3/4" SMOOTH STUCCO OVER MTL. LATH ON BLDG. PAPER OVER 3/4" EXTERIOR GRADE CDX PLYWOOD ATTACHED TO UNDERSIDE OF WOOD TRUSS OR FRAMING - PAINT FINISH SELECTED BY OWNER
- 31 POOL AND POOL DECK BY OTHERS.
- 32 CONTINUOUS TRENCH DRAIN SELECTED BY OWNER
- 33 BRICK PAVERS SELECTED BY OWNER - EDGE PAVERS SET IN CONCRETE W/ ONE CONT. #5 REBAR. FIELD PAVERS SET OVER 4" CRUSHED LIMEROCK AND 1" BED OF SAND - SLOPE TO LANDSCAPE (SEE DETAIL 2, SHEET A11)
- 34 3/4" PLYWOOD NAILED TO TRUSS AND FRAME.
- 35 1x3 PT FIRE STOP.
- 36 CONTINUES VENT.
- 37 PRIMED AND PAINTED ALUMINUM RAILING CONTRACTOR TO SUBMIT SIGNED AND SEALED SHOPDUGS FOR REVIEW PRIOR TO FABRICATION.
- 38 CLAY ROOF DECK PIPE SCUPPER (SELECTED BY ARCHITECT).
- 39 EXTERIOR PAVES SELECTED BY OWNER SET IN FULL BED OF THIN SET. FILL ALL GROUT JOINT FLUSH PRIOR TO PAVES INSTALLATION. INSTALL A FLUID APPLIED WATERPROOFING MEMBRANE. CONTRACTOR TO CONFIRM COMPATIBILITY OF ALL MATERIALS (72 HR. FLOOD TEST PRIOR TO FINISH IS APPLIED).
- 40 4" DRAIN PIPE WITH SPLASH BOX

PROJECT:

CORTINEZ/CALVO RESIDENCE

OWNER:

M. CORTINEZ & M. CALVO  
265 WEST HEATHER DRIVE  
VILLAGE OF KEY BISCAYNE  
FLORIDA 33149

AR0014882

R.A.

Eduardo H. Muñia  
Principal

EDUARDO H. MUÑIA  
Architect

6317 S.W. 10th Street  
Miami, FL 33144  
Tel: 305-282-9978 Fax: 305-282-6088



SCALE: 1/4" = 1'-0"	ISS NO: 6021
DATE: 11-27-02	
DRAWN BY: P.K.R.G.	
CHECKED BY: E.H.M.	

REVISIONS:	AS BUILT REV	12-05-03
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DESCRIPTION:

EXTERIOR ELEVATIONS

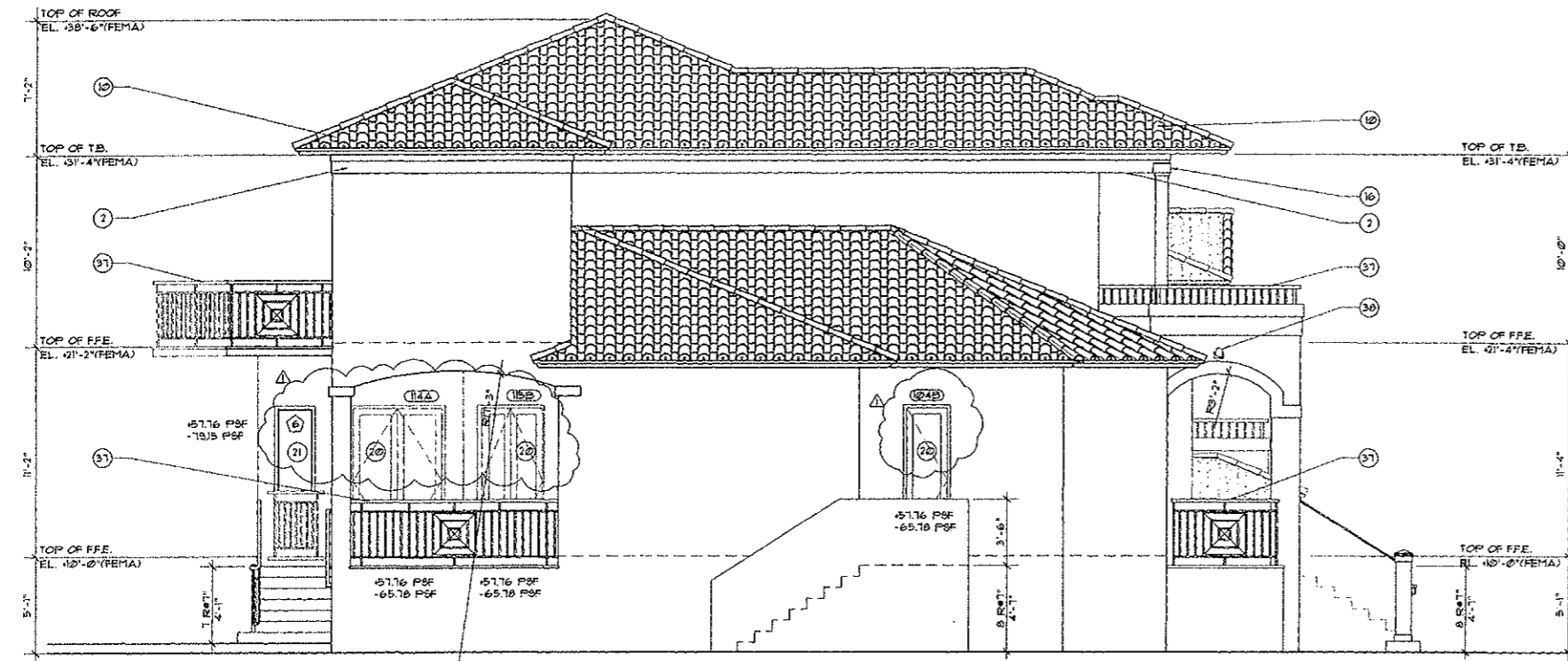
**A-5.0**

AS BUILT SET



**SOUTH ELEVATION**

SCALE: 1/4" = 1'-0"



**WEST ELEVATION**

SCALE: 1/4" = 1'-0"

**KEY NOTES:**

- 1 3/4" STUCCO PAINT FINISH.
- 2 3/4" STUCCO PAINTED DECORATIVE BAND.
- 3 5/8" GYP. BD. OVER 1/8" FURRING STRIP ON CML. - PNT. FIN.
- 4 5/8" DRYWALL CEILING ON 1x3" FURRING AT 24" O.C. ATTACHED TO MTL. CHANNEL AT PERIMETER WALL AND UNDERSIDE OF STRUCTURE
- 5 BATT INSULATION R-30.
- 6 8" CMU BLOCK. SEE STRUCTURAL DUGS.
- 7 CONC. TIE BEAM. SEE STRUCTURAL DUGS.
- 8 CONC. OVER VAPOR BARRIER, ON WELL COMPACTED FILL. FINISH TO BE SELECTED BY OWNER.
- 9 5/8" DRYWALL CEILING ATTACHED TO MTL. CHANNEL.
- 10 TILE ROOF. INSTALL ON 3/4" FELT TIN CAPPED TO 5/8" EXT. GRADE PLYWOOD SHEATHING NAILED TO WOOD TRUSSES. ROOF TILE SYSTEM TO HAVE DADE COUNTY PRODUCT APPROVAL AND TO BE INSTALLED IN ACCORDANCE WITH PROTOCOLS.
- 11 PRIMED AND PAINTED GAL. METAL DRIP EDGE.
- 12 1x2 P.T. NAILER.
- 13 2x8 P.T. WOOD FASCIA BOARD.
- 14 PREFABRICATED WOOD TRUSSES 24" O.C. SUBMIT SIGNED AND SEALED SHOP DRAWINGS FOR APPROVAL.
- 15 RIGID INSULATION (MIN. R = 42)
- 16 DECORATIVE TRIMS SELECTED BY OWNER.
- 17 LIGHT FIXTURE SELECTED BY OWNER.
- 18 1/2" PREMOULDED EXPANSION JOINT MATERIAL.
- 19 3/4" DEPRESSION AT ALL EXTERIOR WALLS AND BEAMS SUPPORTING EXTERIOR WALLS / STRUCTURE
- 20 EXTERIOR ALUM. AND GLASS FRENCH DOOR SEE DOOR SCHEDULE SELECTED BY OWNER
- 21 ALUM. AND GLASS WINDOW SEE WINDOW SCHEDULE. SELECTED BY OWNER.
- 22 GRADE BEAMS - SEE STRUCT DUGS.
- 23 FLOOR TILE SELECTED BY OWNER
- 24 LAVATORY SELECTED BY OWNER
- 25 TOILET FIXTURE SELECTED BY OWNER
- 26 SHOWER AND SHOWER PAN FINISHED WITH CERAMIC TILE, GLASS FIXED PANEL AND SHOWER DOOR. SHOWER HARDWARE AND VALVES - SELECTED BY OWNER
- 27 MARBLE (SELECTED BY OWNER) ON 5/8" MOISTURE RESISTANT BOARD ON 1" x 2" NOM. P.T. UD. FURRING 24" O.C.
- 28 KITCHEN CABINETS SELECTED BY OWNER
- 29 CEILING FAN SELECTED BY OWNER
- 30 3/4" SMOOTH STUCCO OVER MTL. LATH ON BLDG. PAPER OVER 3/4" EXTERIOR GRADE CDX PLYWOOD ATTACHED TO UNDERSIDE OF WOOD TRUSSES OR FRAMING - PAINT FINISH SELECTED BY OWNER
- 31 POOL AND POOL DECK BY OTHERS.
- 32 CONTINUOUS TRENCH DRAIN SELECTED BY OWNER
- 33 BRICK PAVERS SELECTED BY OWNER - EDGE PAVERS SET IN CONCRETE W/ ONE CONT. #5 REBAR. FIELD PAVERS SET OVER 4" CRUSHED LITE ROCK AND 1" BED OF SAND - SLOPE TO LANDSCAPE (SEE DETAIL 2, SHEET A11)
- 34 3/4" PLYWOOD NAILED TO TRUSS AND FRAME.
- 35 1x3 FT FIRE STOP.
- 36 CONTINUES VENT.
- 37 PRIMED AND PAINTED ALUMINUM RAILING CONTRACTOR TO SUBMIT SIGNED AND SEALED SHOPDUGS FOR REVIEW PRIOR TO FABRICATION.
- 38 CLAY ROOF DECK PIPE SCUPPER (SELECTED BY ARCHITECT).
- 39 EXTERIOR PAYER SELECTED BY OWNER SET IN FULL BED OF THIN SET. FILL ALL GROUT JOINTS FLUSH. PRIOR TO PAYER INSTALLATION. INSTALL A FLUID APPLIED WATERPROOFING MEMBRANE. CONTRACTOR TO CONFIRM COMPATIBILITY OF ALL MATERIALS (12 HR FLOOD TEST PRIOR TO FINISH IS APPLIED).
- 40 4" D. DRAIN PIPE WITH SPLASH BOX

**PROJECT:**

CORTINEZ/CALVO RESIDENCE

OWNER:  
Mr. CORTINEZ & Mrs. CALVO  
265 WEST HEATHER DRIVE  
VILLAGE OF KEY BISCAYNE  
FLORIDA, 33149

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SCALE: 1/4" = 1'-0"	DATE: 11-22-02
DESIGNED BY: E.H.M.	CHECKED BY: E.H.M.

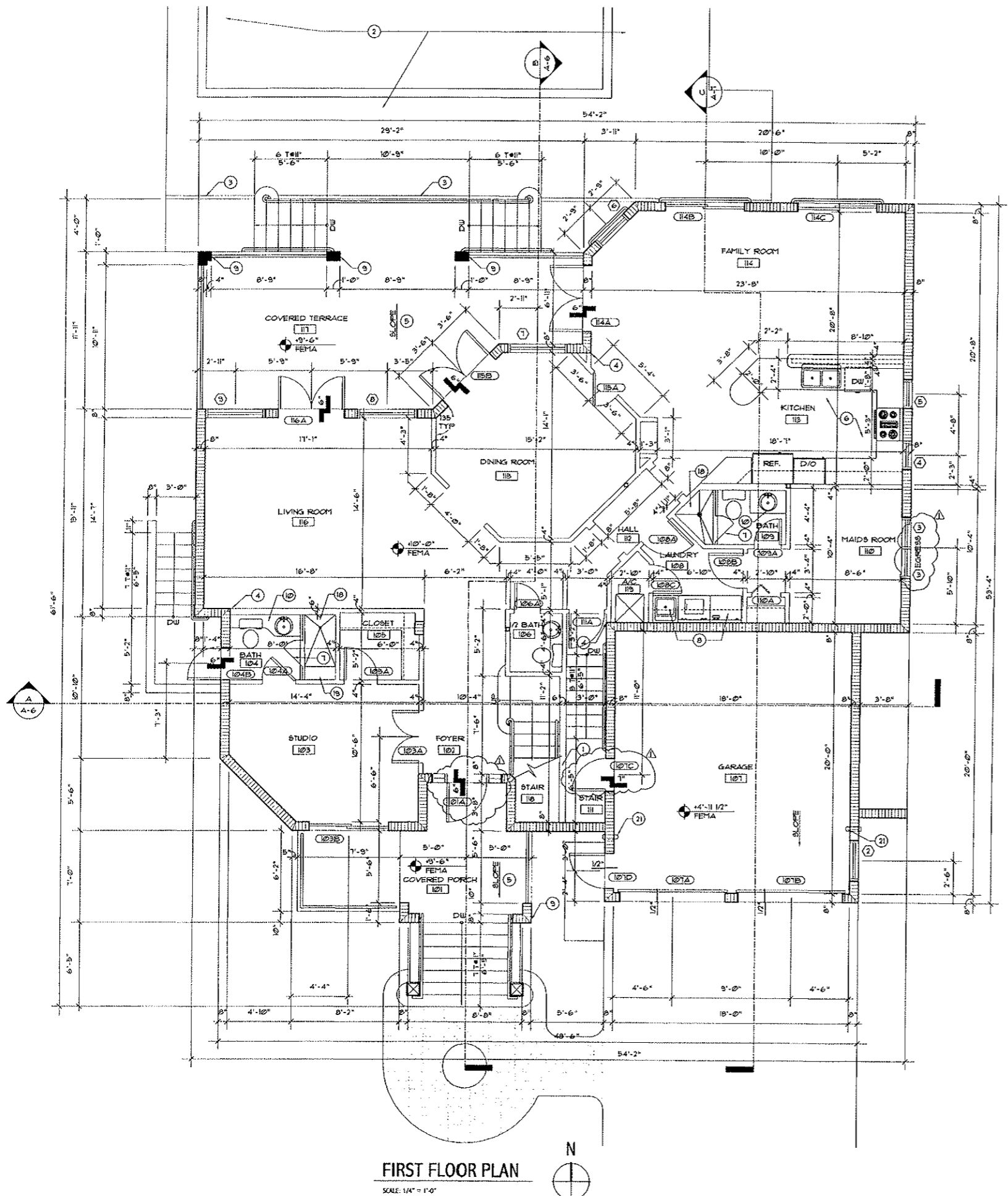
REVISIONS	AS NOTED	12.05.03
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**DESCRIPTION:**

EXTERIOR ELEVATIONS

AS BUILT SET

**A-4.0**



FIRST FLOOR PLAN

SCALE: 1/4" = 1'-0"

NOTES:

- 1 PROVIDE BLOCKING AS REQUIRED FOR ALL WALL MOUNTED EQUIPMENT AND FURNITURE - LOCATIONS TO BE COORDINATED WITH OWNER
- 2 POOL AND POOL DECK - BY OTHERS
- 3 DRAIN TRENCH SELECTED BY OWNER
- 4 FINISHES TO ALIGN
- 5 EXTERIOR CONCRETE SLAB - SLOPE AWAY FROM STRUCTURE 1/8" / FT. (TYP.) FINISH SELECTED BY OWNER SEE STRUCT. DUGS. FOR REINFORCING
- 6 KITCHEN DESIGN SELECTED BY OWNER SUBMIT SHOP DUGS FOR APPROVAL
- 7 TEMPERED SAFETY GLASS ENCLOSURE
- 8 LAUNDRY SINK WITH BASE AND UPPER CABINETS SELECTED BY OWNER
- 9 CONC. COLUMNS, SEE STRUCTURAL DUGS. ADD DECORATIVE CAB BASE AND APPLY TEXTURE STUCCO SELECTED BY OWNER
- 10 BASE CABINET AND MIRROR AS SELECTED BY OWNER
- 11 TILE ROOF - ROOF SYSTEM TO HAVE DADE COUNTY PRODUCT APPROVAL AND TO BE INSTALLED IN ACCORDANCE WITH PROTOCOLS SELECTED BY OWNER
- 12 8" REINFORCED CMU WALL WITH 3/4" STUCCO, SEE STRUCTURAL DUGS.
- 13 DECORATIVE CAP AND HOLDINGS SELECTED BY OWNER
- 14 LIGHT FIXTURES SELECTED BY OWNER, SEE ELECTRICAL DUGS.
- 15 DECORATIVE PAINTED METAL PICKET FENCE SELECTED BY OWNER SUBMIT SHOP DUGS FOR REVIEW
- 16 DECORATIVE STUCCO BAND
- 17 3/4" PAINTED STUCCO ON 8" CMU
- 18 INSTALL SHOWER PAN
- 19 18" HT. SHOWER BENCH, INSTALL SHOWER PAN PRIOR TO FINISH BY ABOVE BENCH, SLOPE BENCH TO SHOWER A/C COMPRESSOR, SEE MECHANICAL DUGS.
- 20 4" DRAIN PIPE WITH SPLASH BOX

PROJECT:  
CORTINEZ/CALVO RESIDENT

OWNER:  
Mr. CORTINEZ & Ms. CALVO  
265 WEST HEATHER DRIVE  
VILLAGE OF KEY BISCAYNE  
FLORIDA, 33149

AR0014862

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SCALE: 1/4" = 1'-0"	JOB NO: 01021
	DATE: 11-22-02
	DRAWN BY: P.M.R.O.
	CHECKED BY: E.H.M.

REVISIONS:	AS BUILT REV.	12-05-03

DESCRIPTION:

FIRST FLOOR PLAN

A-2.0

AS BUILT SET

ARCHITECT NOTE: To the best of my knowledge, subject drawing complies with FRC Dade County requires a Final Letter of Compliance from Architect. Any deviation of approved drawing is subject to revision by Architect's Engineer, Contractor or sub-contractor shall notify Architect prior to any changes to be done on approved drawings. Drawings are the property of the Architect and are given as license to the owner of the property to complete construction of the work disclosed on this design and drawings. Copying, reproducing or altering in any means without the written authorization of the Architect, is a violation of Copyright laws of the United States of America.




revisions:


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 E-Mail: sol\_ve@prodigy.net

**DESIGN - INSPECTION - INVESTIGATION - REPORTS**



job name: **Mr. Cortinez and Calvo residence.**  
**265 WEST HEATHER DRIVE.**  
**KEY BISCAIYNE, FL 33149.**

title: **RAILING SHOPDRAWINGS.**

date 01/14/04  
 issued \_\_\_\_\_  
 drawn BC  
 checked D.K.S.  
 project no. \_\_\_\_\_

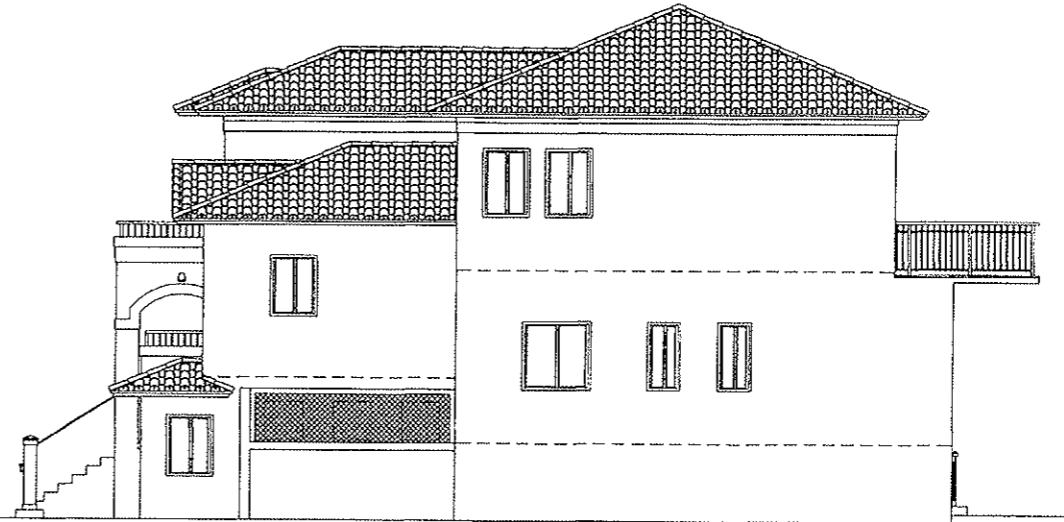
sheet no.

**S-1**

1 of 5



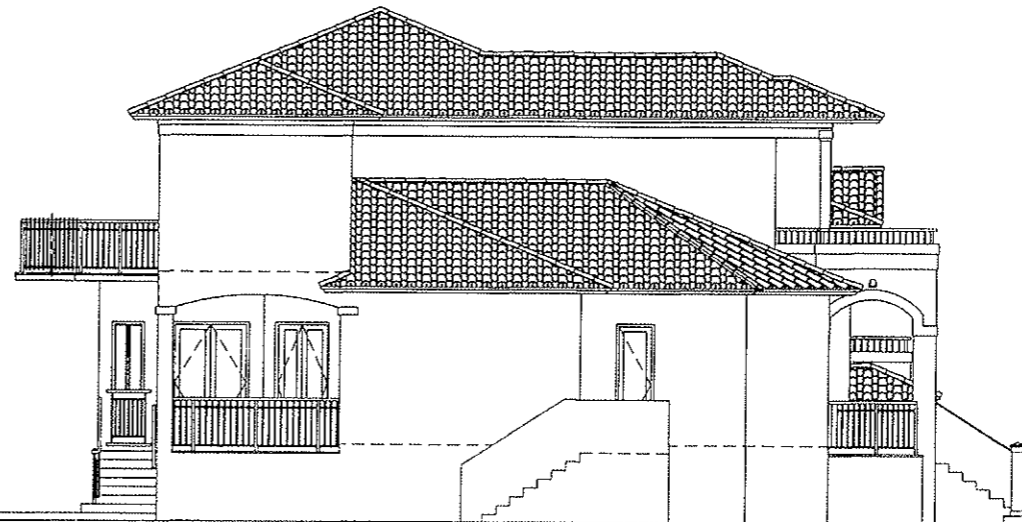
**SOUTH ELEVATION**  
 SCALE: N.T.S.



**WEST ELEVATION**  
 SCALE: N.T.S.



**NORTH ELEVATION**  
 SCALE: N.T.S.



**EAST ELEVATION**  
 SCALE: N.T.S.

*D.K.S.*  
 01/06/04

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*D.K.S.*