

INVOICE

NOVA SURVEYORS, INC.

5582 N.W. 7TH STREET, SUITE 202, MIAMI, FL 33126
Telephone: (305) 264-2660 Fax: (305) 264-0229



NOVA

SURVEYORS INC.

BILL TO	ACCOUNT#	MZ11221
MZ DESIGNS, INC 104 CRANDON BLVD # 401 KEY BISCAVYNE, FL 33149 ATTN: MIRIAM ROJAS		

REFERENCE#	DATE	INVOICE#
	02/05/2010	5-0005996-8

Order Status: DONE/COMPLETED

DUPLICATE

Ordered By: #MZ11221 MZ DESIGNS, INC

Sent Via: MAIL

Fax#: (305) 361-1204

Completed By: KR

DESCRIPTION					
For: M.Z. DESIGNS, INC. 320 ATLANTIC RD KEY BISCAVYNE, FL 33149					
County: MIAMI-DADE	Lot: 3	Block: 4	Plat Book: 50	Page: 87	
Section:	Building:	Unit:	OR Book: 12204	Page: 1796	
Township:	Range:	<input type="checkbox"/> Metes & Bounds			
Subdivision: HOLIDAY COLONY					

Services:	Date	Description	Amount
	02/03/2010	FINAL SUR W/ CONSTRUCTION ELEV	295.00
Payment History:			Total: 295.00
	02/19/2010	4868 \$295.00	Less Amount Paid: 295.00
			Balance Due: <u>\$0.00</u>

MAIL TO ATTN: ALICIA M. VERA-FERIA
TETRA TECH
150 WEST FLAGLER STREET, SUITE 1625
MIAMI, FLORIDA 33130

MAILED

E-MAILED
415 V.P.

Please return this portion with your payment to: NOVA SURVEYORS, INC., 5582 N.W. 7TH STREET, SUITE 202, MIAMI, FL 33126

Invoice#: 5-0005996-8
Order Status: DONE/COMPLETED

Date: 02/05/2010

Reference#:
Completed By: KR

Bill To: #MZ11221 MZ DESIGNS, INC

Ordered By: #MZ11221 MZ DESIGNS, INC
MIRIAM ROJAS

For: M.Z. DESIGNS, INC.
320 ATLANTIC RD
KEY BISCAVYNE, FL 33149

Total:	295.00
Less Amount Paid:	295.00
Balance Due:	<u>\$0.00</u>



2 1

MAILED

REMAINED

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name M.Z. DESIGNS, INC.		For Insurance Company Use:
		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 320 ATLANTIC RD		Company NAIC Number
City KEY BISCAVNE State FL ZIP Code 33149		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 3, Block 4, of HOLIDAY COLONY, according to the Plat Book 50, Page 87, FOLIO# 2442320030380		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>		
A5. Latitude/Longitude: Lat. 25° 51' 04.41" Long. 80° 14' 54.71"		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>8</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>2074.00</u> sq ft		a) Square footage of attached garage <u>320.0</u> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>24</u>		b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>4</u>
c) Total net area of flood openings in A8.b <u>2074.00</u> sq in		c) Total net area of flood openings in A9.b <u>320.00</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 KEY BISCAVNE 128648		B2. County Name MIAMI-DADE		B3. State FL	
B4. Map/Panel Number 12086C0483	B5. Suffix L	B6. FIRM Index Date 09/11/2009	B7. FIRM Panel Effective/Revised Date 09/11/2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 9 FT
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date <u>N/A</u> <input type="checkbox"/> CBRS <input type="checkbox"/> 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 MDC B.M# MI-12 Vertical Datum NGVD 1929
Conversion/Comments N/A

Check the measurement used.

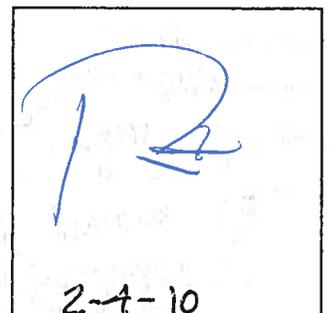
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <u>6.37</u> _____	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor <u>9.42</u> _____	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> 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>5.06</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>9.35</u> _____	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG) <u>4.35</u> _____	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG) <u>5.50</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>4.35</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 ROBERT IBARRA6437	License Number 6437
Title PROFESSIONAL LAND SURVEYOR	Company Name NOVA SURVEYORS, INC.
Address 5582 N.W. 7TH STREET, SUITE 202	City MIAMI State FL
Signature	Date 02/04/2010 Telephone (305) 264-2660

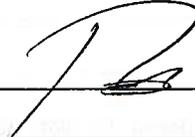


IMPORTANT: In these spaces, copy the corresponding information from Section A.	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 320 ATLANTIC RD	Policy Number
City KEY BISCAYNES State FL ZIP Code 33149	Company NAIC Number

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 Section C 2(e) Lowest Elev Machinery is A/C pad. Lat.& long. Provided By Google Earth
 Crown of Road Elevation = 4.10 FT Flood Vent Elevation=6.37 ft Finish Floor Elev=9.42 ft

Signature  Date 02/04/2010 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 HAG.
- 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
M.Z. DESIGNS, INC.

Address 320 ATLANTIC RD City KEY BISCAYNES State FL ZIP Code 33149

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