

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name 785 harbor Drive LLC				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 785 Harbor Drive				Company NAIC Number:	
City Village of Key Biscayne	State Florida	ZIP Code 33149			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 13, Block 11 of BISCAYNE KEY ESTATES, as recorded in PB. 50, PG 61, Miami-Dade county Records --- Folio: 24-5205-00-1670					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>					
A5. Latitude/Longitude: Lat. <u>25°41' 11.68" N</u> Long. <u>80°10' 15.74" 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>8</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>1,441</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>8</u>					
c) Total net area of flood openings in A8.b <u>2,517</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>0</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>					
c) Total net area of flood openings in A9.b <u>0</u> sq in					
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 12086C0491			B2. County Name Miami-Dade		B3. State Florida
B4. Map/Panel Number 0491	B5. Suffix L	B6. FIRM Index Date 09/11/2009	B7. FIRM Panel Effective/ Revised Date 09/11/2009	B8. Flood Zone(s) A E	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 10
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/Source: _____					
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/Source: _____					
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: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

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OMB No. 1660-0008
Expiration Date: November 30, 2018

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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 1–2 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 or Owner's Authorized Representative's Name

Address City State ZIP Code

Signature Date Telephone

Comments

Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption Front 1



Photo Two

Photo Two Caption Front (pool)

BUILDING PHOTOGRAPHS

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Continuation Page

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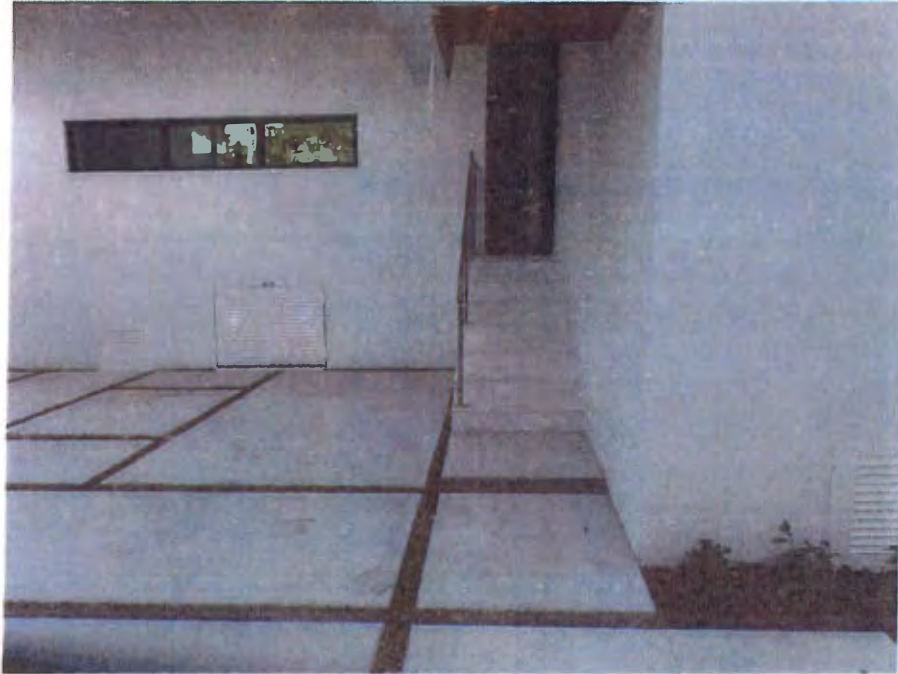


Photo One

Photo One Caption



Photo Two

Photo Two Caption

BUILDING PHOTOGRAPHS

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Photo One

Photo One Caption FLOOD VENTS



Photo Two

Photo Two Caption FLOOD VENTS

Isabel Dominguez

Porcapi

From: Verea-Feria, Alicia <Alicia.Verea-Feria@tetrattech.com>
Sent: Monday, December 12, 2016 6:30 PM
To: Isabel Dominguez
Subject: RE: 785 HARBOR DRIVE FINAL ELEV. CERTIFICATE AND SURVEY
Attachments: 785 HARBOR DR ELEV CERTIFICATE 121216 -REVISED.pdf

Hello Ms. Isa.

Hope you had a great weekend.

As promised, I followed up with the surveyor.

He incorporated the revisions and resubmitted the attached pdf containing the finalized EC, for your records.

The originals are being forwarded via mail to the contractor for delivery to you.

Upon receipt of the originals, I am pleased to report that the elevation certificate for the subject property at 785 Harbor Drive, as reviewed this date, 12/12/2016, can be approved. It is considered complete, correct and meeting the minimum requirements per NFIP & CRS, per my understanding and interpretation in coordination with the surveyor.

Please do not hesitate to contact me should you need additional details or documentations.

Thank you for your assistance.

Alicia M. Verea-Feria, EI, CFM

Direct: 305-908-1430 | Fax: 305-264-1805 | Cell: 305-632-8321

alicia.verea-feria@tetrattech.com

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Think about the environment before you print.



From: Isabel Dominguez [<mailto:idominguez@keybiscayne.fl.gov>]

Sent: Thursday, December 08, 2016 9:35 AM



CFN 2016RD696512

PK 30332 Pg 2577 (1Pgs)
RECORDED 12/06/2016 10:11:34
HARVEY RUVIN, CLERK OF COURT
DADE COUNTY, FLORIDA

NON-CONVERSION AGREEMENT

This DECLARATION made this 6 day of DECEMBER, 2016 by ROBERTS PORCARI Owner, having an address at 785 HARBOR DR, KEY BISCAYNE, FL, 33149

WITNESSETH:

WHEREAS, the Owner is the record owner of all that real property located at 785 HARBOR DR, in the Village of Key Biscayne in the County of Miami Dade, designated in the tax records as Folio # 2452050011670.

WHEREAS, the Owner has applied for a permit or variance to place a structure on that property that either (1) does not conform, or (2) may be noncompliant by later conversion, to the strict elevation requirements of DIVISION 3. FLOOD HAZARD REDUCTION, Section 10-61 of Chapter 10 (FLOODS) of the Village of Key Biscayne, Florida Code of Ordinances and under Permit Number 1514-12068 ("Permit")

WHEREAS, the Owner agrees to record this DECLARATION and certifies and declares that the following covenants, conditions and restrictions are placed on the affected property as a condition of granting the Permit, and affects rights and obligations of the Owner and shall be binding on the Owner, his heirs, personal representatives, successors and assigns.

UPON THE TERMS AND SUBJECT TO THE CONDITIONS, as follows:

1. The structure or part thereof to which these conditions apply is: 10 FT ABOVE SEA LEVEL
2. At this site, the Base Flood Elevation is 10 FT feet above mean sea level, National Geodetic Vertical Datum.
3. Enclosed areas below the Base Flood Elevation shall be used solely for parking of vehicles, limited storage, or access to the building. All interior walls, ceilings and floors below the Base Flood Elevation shall be unfinished or constructed of flood resistant materials. Minimal flood proofed electrical equipment is allowed and no mechanical, or plumbing devices shall be installed below the Base Flood Elevation.
4. The walls of the enclosed areas below the Base Flood Elevation shall be equipped and remain equipped with Flood vents as shown on the Permit.
5. Any alterations or changes from these conditions constitute a violation of the Permit and may render the structure uninsurable or increase the cost of flood insurance. The Village of Key Biscayne, as the jurisdiction issuing the Permit and enforcing the Ordinance, may take any appropriate legal action to correct any violation.

6. Other conditions: _____

In witness whereof the undersigned set their hands and seals this 6 day of DECEMBER, 2016.

ROBERTS PORCARI
Owner's Name (Printed)

[Signature]
Signature of Owner

Witness' Name (Printed)

Signature of Witness

Sworn to and Subscribed before me this 6 day of DECEMBER, 2016

[Signature]
Signature Notary Public - State of Florida



(SEAL):

Personally known OR, Produced Identification _____ Type of ID Produced _____

(DOCUMENT MUST BE RECORDED AND PROOF OF RECORDING PROVIDED)

STATE OF FLORIDA, COUNTY OF DADE
I HEREBY CERTIFY that this is a true copy of the original filed in this office on DEC 06 2016 day of DEC 06 2016, A.D. 2016
WITNESS my hand and Official Seal.
HARVEY RUVIN, CLERK of Circuit and County Courts
By [Signature] D.C.
NICOLE DAVIS #79943

