

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name <u>JOHN J. BABUINI & WIFE MARCELA</u>		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>465 HAMPTON LANE</u>		Company NAIC Number
City <u>MIAMI</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 11, BLOCK 55, OF "TROPICAL ISLE HOME" PB 50-72</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>		
A5. Latitude/Longitude: Lat. <u>25°42'15.58"N</u> Long. <u>80°11'24.42"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>1</u>		
A8. For a building with a crawl space or enclosure(s), provide		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) <u>N/A</u> sq ft	a) Square footage of attached garage <u>N/A</u> sq ft	
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <u>N/A</u>	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <u>N/A</u>	
c) Total net area of flood openings in A8.b <u>N/A</u> sq in	c) Total net area of flood openings in A9.b <u>N/A</u> sq in	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <u>120648 CITY OF KEY BISCAYNE</u>		B2. County Name <u>MIAMI-DADE</u>		B3. State <u>FLORIDA</u>	
B4. Map/Panel Number <u>12025C0284</u>	B5. Suffix <u>J</u>	B6. FIRM Index Date <u>07-17-95</u>	B7. FIRM Panel Effective/Revised Date <u>03-02-94</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. <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-g below according to the building diagram specified in item A7.
Benchmark Utilized DCBM Vertical Datum 1929
Conversion/Comments _____

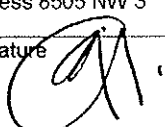
Check the measurement used.

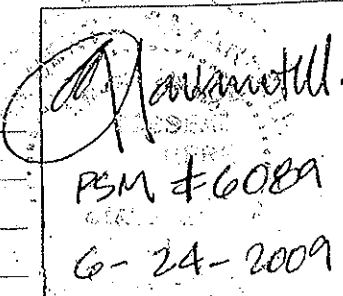
a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<u>10.00</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>N/A</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	_____	<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 in Comments)	<u>N/A</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<u>4.29</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<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.

Certifier's Name <u>GILBERTO GAVARRETE</u>	License Number <u>6089</u>
Title <u>PRESIDENT</u>	Company Name <u>MIAMI ENGINEERING COMPANY</u>
Address <u>8505 NW 3RD LANE # 2</u>	City <u>MIAMI</u> State <u>FL</u> ZIP Code <u>33126</u>
Signature 	Date <u>01-22-2009</u> Telephone <u>786-252-1440</u>



PSM #6089
6-24-2009

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.		Policy Number
City	State	ZIP Code
		Company NAIC Number

OFFICIAL
E-17

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 CROWN OF ROAD = 3.98' FOLIO NUMBER : 24-4232-004-0490

TOP OF TIE BEAM FIRST FLOOR = 22.67' BACKYARD = 6.5' CAR PORT = 5.00'

TOP OF TIE BEAM SECOND FLOOR = 34.17'

Signature Date 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, crawl space, or enclosure) is _____ feet meters above or below the HAG.

b) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the LAG.

E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 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 _____

Local Official's Name	Title
Community Name	Telephone
Signature	Date

Comments _____

Check here if attachments

any Use:
ber

Building Photographs

Continuation Page

IN J. BABUINI & WIFE MARCELA

FOLIO No. 24-4232-004-0490

For insurance Company Use

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

Policy Number

65 HAMPTON LANE

City VILLAGE OF KEY BISCAYNE

State FL

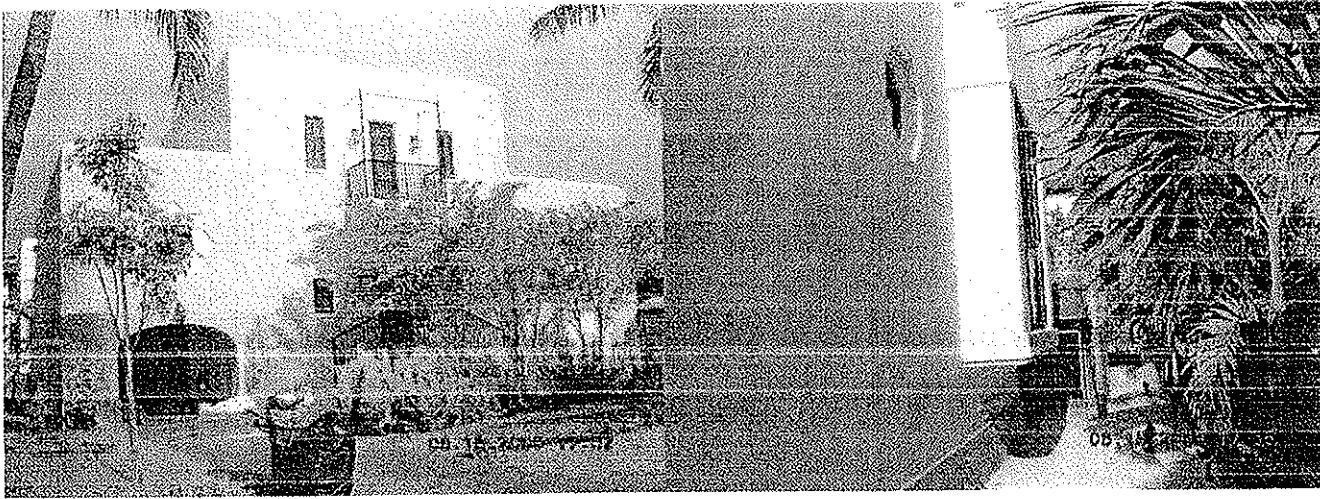
ZIP Code 33149

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."

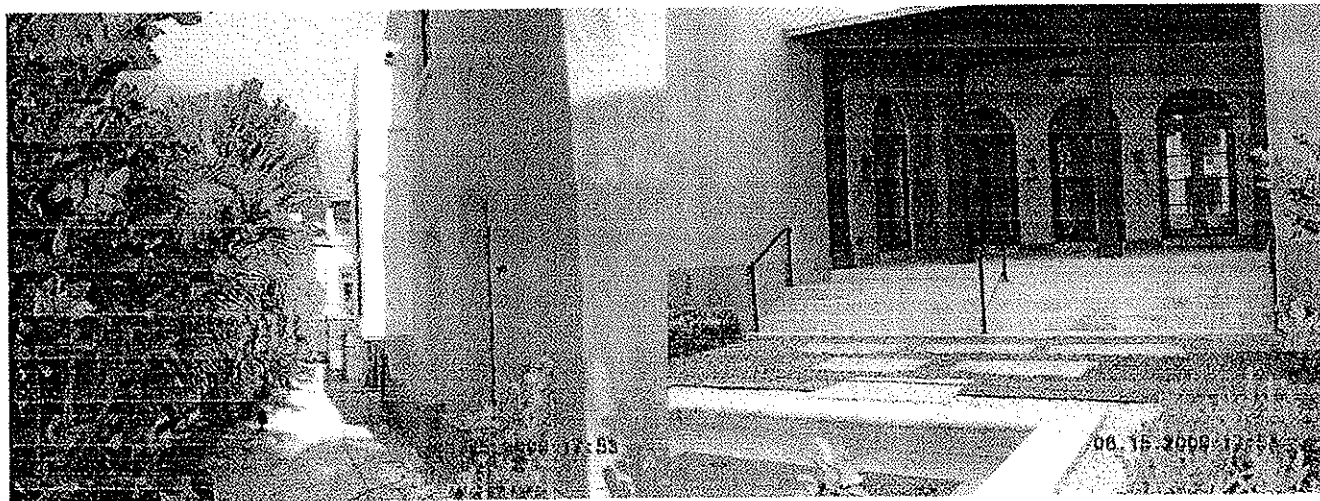
FRONT VIEW WEST SIDE

RIGHT SIDE VIEW SOUTH SIDE



LEFT SIDE VIEW NORTH SIDE

REAR VIEW EAST SIDE



ZONING INFORMATION

ZONING DISTRICT R11 LOTS OF VILLAGE OF KEY BISCAYNE ORDINANCE 14 SUPPLEMENT A DISTRICT RENOVATIONS FOR SINGLE FAMILY DEVELOPMENT

ZONING SETBACKS	REQUIRED	PROVIDED
REARANCE FRONT	15'-0"	23'-0"
REAR	25'-0" (MAIN STRUCTURE) 15'-0" (SMALLER STRUCT)	30'-0"
INT SIDE	7'-6"	10'-5"
BUILDING HEIGHT	35'-0" (SCENE ELEV)	24'-3"
LOT COVERAGE	5120 SQ FT MAX.	2544 SQ FT
FLOOR AREA RATIO	0.47% + 0.01% FOR OPEN STRUCTURES	4090 SQ FT
PERVIOUS AREA	2340 SQ FT	4.513 SQ FT
BUILDING MAX WALL HEIGHT		
FRONT	25'-0" & 23'-4" - 25'-4" FROM PROPERTY LINE MAX. SEE DWG'S.	
REAR	22'-6" MAX.	15'-1"
SIDE	20'-3" MAX. FROM P.L.	27'-3"

NOTE SEE SECTIONS, ELEVATIONS FOR MAX. BUILDING WALL HEIGHT

SITE DATA

LOT AREA	7800 SQ FT
BUILDING AREA	
1ST FL. (ENCLOSED)	1685 SQ FT
1ST FL. VERANDA/PORCH	800 SQ FT
1ST FL. BALCONY	116 SQ FT
2ND FL. ENCLOSED	1607 SQ FT
2ND FL. BALCONY	2385 SQ FT
PAVED TERRACE AREA	1963 SQ FT
POOL SIZE	15x26
POOL SETBACKS	
FRONT	85' (10' REQ)
REAR	65' (6' REQ)
SIDE	65' (6' REQ)

INDEX OF DRAWINGS

A 1	SITE PLAN GENERAL INFORMATION
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A 7	ELEVATIONS
A 8	BUILDING SECTIONS
A 9	SECTIONS DETAILS
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S 4	STAIR DETAILS WALL SECTIONS DETAILS
S 5	BEAM SCHEDULE COLUMN SCHEDULE, DETAILS NOTES
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E 2	FIRST FLOOR ELECTRICAL
E 3	SECOND FLOOR ELECTRICAL
E 4	PANELS NOTES
M 1 P 1	GROUND FLOOR HVAC & PLUMBING PLAN
M 2 P 2	FIRST FLOOR HVAC & PLUMBING PLAN
M 3 P 3	SECOND FLOOR HVAC & PLUMBING PLAN
M 4	A/C SCHEDULE FAN SCHEDULE DETAILS NOTES
P 4	WATER & SANITARY RISER DIAGRAMS, DIAGRAMS, NOTES DETAILS

LEGAL DESCRIPTION

LOT 26 BLOCK 24, FOURTH ADDITION TO TROPICAL ISLE HOMES SUBDIVISION, ACCORDING TO THE PLAT THEREOF, AS RECORDED IN PLAT BOOK 53, AT PAGE 291, OF THE PUBLIC RECORDS OF DADE COUNTY, FLORIDA

ARCHITECT/ENGINEER LISTING

DOUGLAS A. KULIG
ARCHITECT
A R C
2133 PONCE DE LEON BLVD SUITE 1110
CORAL GABLES FL 33134
TEL: 305-446-5865 FAX: 305-446-4980

SALAS ENGINEERING CORP
Consulting Engineers
ARMANDO SALAS
1621 SW 99 PL MIAMI FL 33165
(305) 557-8501

ARC ENGINEERS, CORP.
KATIA L. GONZALEZ, P.E.
8525 L.W. 44 STREET
MIAMI, FLORIDA 33155
(305) 551-1134
FLORIDA REGISTRATION #11037
ELECTRICAL ENGINEERING

MCG ENGINEERING, INC.
MICHAEL C. GONZALEZ, P.E.
MECHANICAL ENGINEER, FL 13325
P.O. BOX 43073
MIAMI, FL 33140-0073
(305) 446-6226/6164

DOUGLAS A. KULIG
ARCHITECT
A R C
2133 PONCE DE LEON BLVD SUITE 1110
CORAL GABLES FL 33134
TEL: 305-446-5865 FAX: 305-446-4980

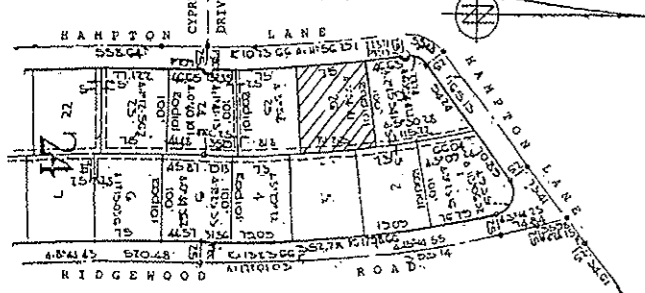
ARC
ARCHITECTURE REAL ESTATE CONSTRUCTION SERVICES
2133 PONCE DE LEON BLVD SUITE 1110 CORAL GABLES FL 33134
TEL: 305-446-5865 FAX: 305-446-4980

ARC RESIDENCE
265 HAMPTON LANE KEY BISCAYNE FLORIDA
SITE PLAN GENERAL INFORMATION

DATE
REVISIONS
SHEET NO.
A-1

LOCATION SKETCH

SCALE 1" = 20'



LEGAL DESCRIPTION

Lot 26, Block 24, FOURTH ADDITION TO TROPICAL ISLE HOMES SUBDIVISION, according to the plat thereof, as recorded in Plat Book 53, at Page 291, of the Public Records of Dade County, Florida.

CERTIFIED TO: ARC GROUP INC

Property address: 265 Hampton Lane, Key Biscayne Fla 33149

The National Flood Insurance Rate Map, published by the Federal Emergency Management Agency, delineates the herein described land to be situated within Zone "AE". This is a Flood Hazard Zone. Base Flood Elevation: 10.0'. Panel No. 0281-H

JUAN R. MARTINEZ & ASSOCIATES, INC.
ENGINEERS - PLANNERS - LAND SURVEYORS
8550 W. Flagler St., Suite 217, Miami, FL 33144
(305) 552-7007 Fax: (305) 552-7016

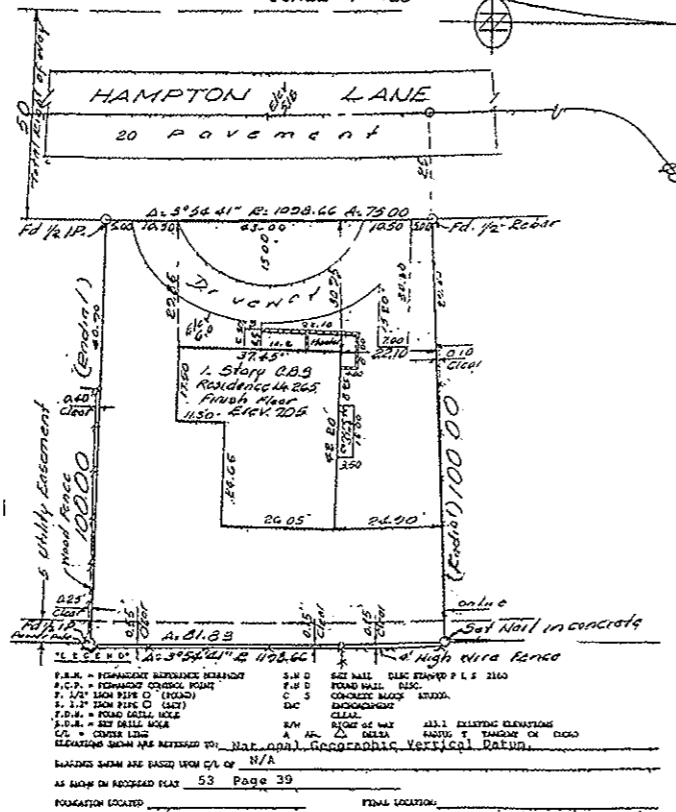
I HEREBY CERTIFY THAT THE BOUNDARY SURVEY REPRESENTS THE ABOVE DESCRIBED PROPERTY AND IS THE COMPLETE AND CORRECT REPRESENTATION OF THE PROPERTY, TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND THAT THE SAME IS ACCORDING TO THE RECORDS OF THE PUBLIC RECORDS OF DADE COUNTY, FLORIDA. I AM A LICENSED PROFESSIONAL LAND SURVEYOR, PURSUANT TO SECTION 471.027, FLORIDA STATUTES, AND CHAPTER 218 OF THE FLORIDA ADMINISTRATIVE CODE.

JOB NUMBER: 30211
FIELD BOOK: 226-23
FIELD WORK DATE: 6-14-94
DRAWN DATE: 6-15-94 BY: JL
DATE: 6-15-94

1. A fraction of ABSTRACT OF TITLE will have to be made to determine recorded encumbrances, if any, affecting this property.
2. Location and identification of utilities, if any, are shown in accordance with recorded plat.
3. Ownership is subject to opinion of title.
4. Type of Survey: BOUNDARY SURVEY.
5. This survey is not valid unless signed and sealed by the Surveyor of Record.
6. All rights of Way shown are public unless otherwise noted.
7. This survey has a traverse closure of no less than 1/100 inch in 7,500 feet.

BOUNDARY SURVEY

SCALE 1" = 20'



NOTE: EXISTING RESIDENCE TO BE COMPLETELY REMOVED. CONSTRUCTION TO SECURE PERMIT FOR DEMOLITION.

GRADE SURVEY TO MAKE EXISTING (15'x26')

PROPERTY MATERIAL CHANNEL

5-16

5-15

5-14

5-13

5-12

5-11

5-10

5-9

5-8

5-7

5-6

5-5

5-4

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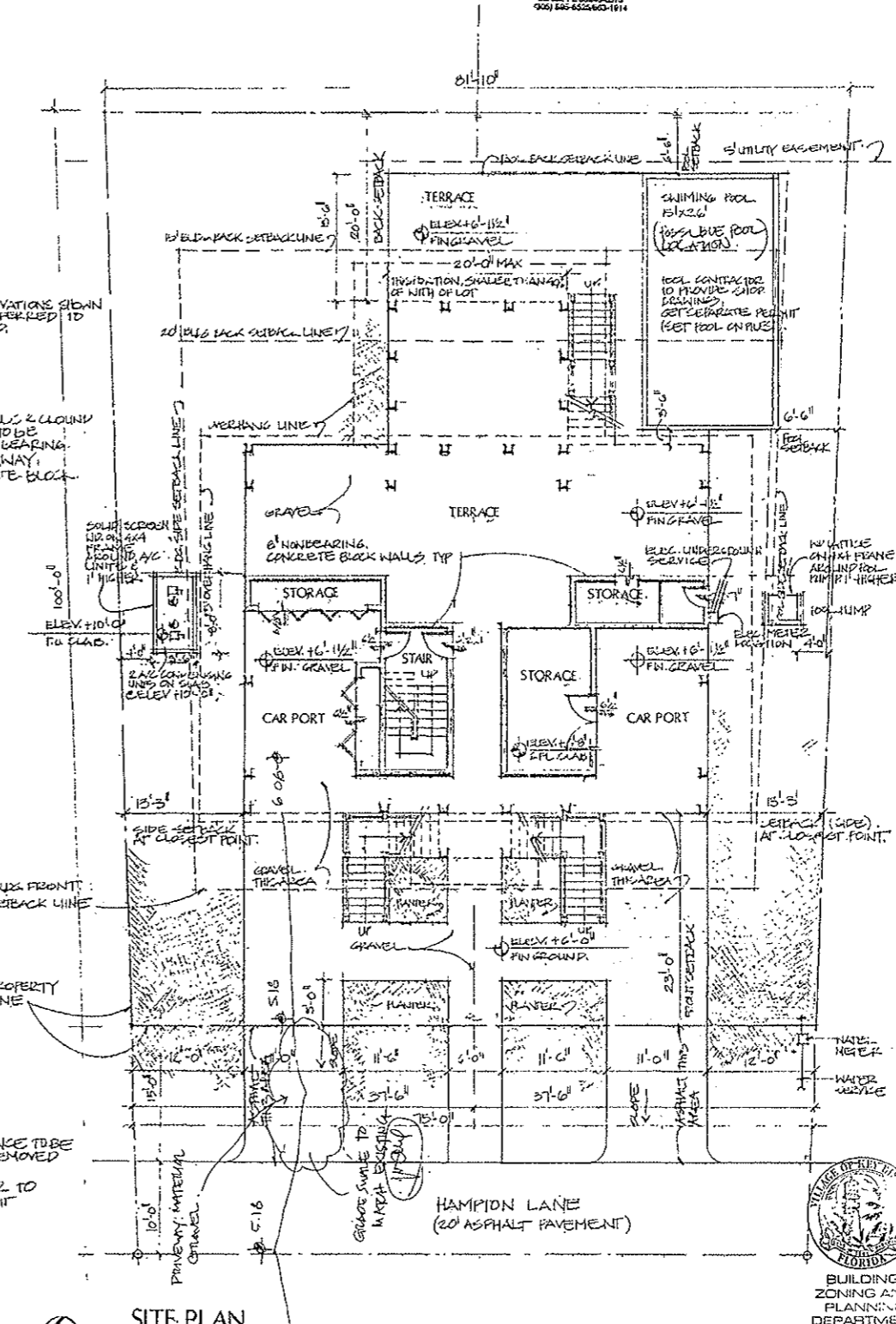
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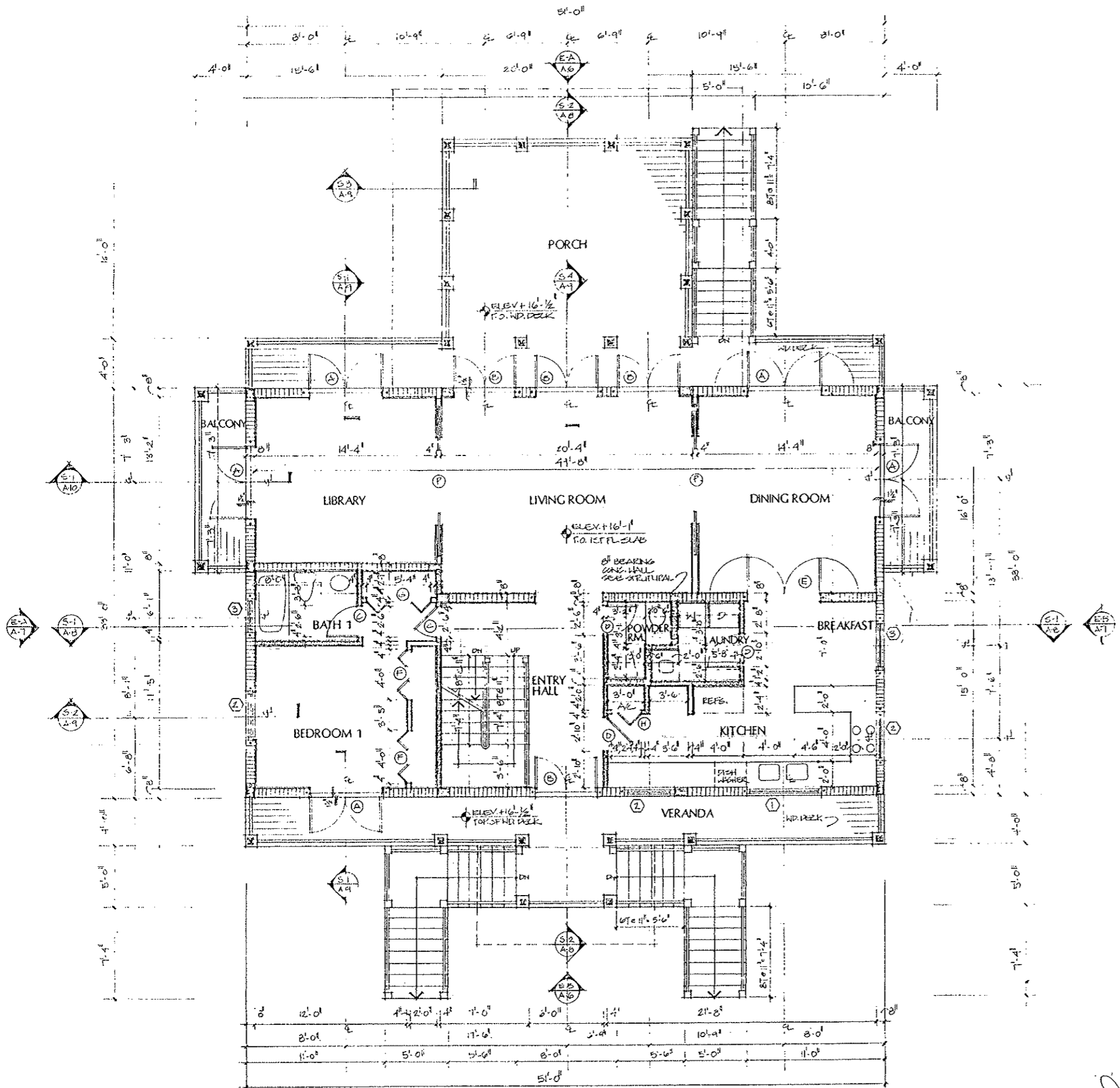
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NOTE: EXISTING RESIDENCE TO BE COMPLETELY REMOVED. CONSTRUCTION TO SECURE PERMIT FOR DEMOLITION.

SITE PLAN
1/8" = 1'-0"





N **FIRST FLOOR PLAN**
1/4"=1'-0"

DOUGLAS A KULIG
ARCHITECT
A.R.# 10807
A R C
2331 PONCE DE LEON BLVD. SUITE 1116, CORAL GABLES, FL 33134
TEL. 305-466-5885 FAX 305-466-4980

A R C
ARCHITECTURE • REAL ESTATE CONSTRUCTION SERVICES
2331 PONCE DE LEON BLVD. SUITE 1116, CORAL GABLES, FL 33134
TEL. 305-466-5885 FAX 305-466-4980

ARC RESIDENCE
265 HAMPTON LANE KEY BISCAYNE FLORIDA
FIRST FLOOR PLAN

DATE 02 94
REVISIONS
SHEET NO
A-3