

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>BISCAYNE 18 DEV LLC</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>15801 BISCAYNE BOULEVARD</b>		Company NAIC Number:
City <b>NORTH MIAMI BEACH</b>	State <b>FL</b>	ZIP Code <b>33160</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>PORTION OF TRACT A, "GROVPAC SUBDIVISION", P.B. 115, PG. 90, M/D.C.R.</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>COMMERCIAL</b>		
A5. Latitude/Longitude: Lat. <b>25.9214</b> Long. <b>-80.1545</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>1B</b>		
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) <b>0</b> sq ft		a) Square footage of attached garage <b>0</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <b>0</b>		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>0</b>
c) Total net area of flood openings in A8.b <b>0</b> sq in		c) Total net area of flood openings in A9.b <b>0</b> 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 <b>CITY OF NORTH MIAMI BEACH 120656</b>			B2. County Name <b>MIAMI/DADE</b>		B3. State <b>FL</b>
B4. Map/Panel Number <b>12086C 0142</b>	B5. Suffix <b>L</b>	B6. FIRM Index Date <b>09/11/2009</b>	B7. FIRM Panel Effective/ Revised Date <b>09/11/2009</b>	B8. Flood Zone(s) <b>AE</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>8</b>
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					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input checked="" type="checkbox"/> Building Under Construction* <input type="checkbox"/> 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. In Puerto Rico only, enter meters. Benchmark Utilized: <b>M/D.C.B.M. - N-464-R ELEV=6.21'</b> Vertical Datum: <b>NGVD 1929</b>	
Indicate elevation datum used for the elevations in items a) through h) below. <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <b>9.0</b>	Check the measurement used: <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor <b>N/A</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only) <b>N/A</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab) <b>N/A</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <b>N/A</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG) <b>7.5</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG) <b>8.5</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support <b>N/A</b>	<input type="checkbox"/> feet <input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Check here if attachments.			
Certifier's Name <b>RICHARD E COUSINS</b>		License Number <b>4188</b>	
Title <b>LAND SURVEYOR &amp; MAPPER</b>		Company Name <b>COUSINS SURVEYORS &amp; ASSOCIATES, INC</b>	
Address <b>3921 SW 47TH AVENUE, SUITE 1011</b>		City <b>DAVIE</b>	State <b>FL</b>
Signature <i>Richard E. Cousins</i>		ZIP Code <b>33314</b>	Telephone <b>(954) 689-7766</b>
Date <b>03/11/2013</b>			

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 2013 MAR 29 PM 2:00  
 BUILDING DIVISION  
 NORTH MIAMI BEACH