

FEDERAL EMERGENCY MANAGEMENT AGENCY  
 NATIONAL FLOOD INSURANCE PROGRAM  
**ELEVATION CERTIFICATE**

O.M.B. No. 3067-0077  
 Expires July 31, 2002

C.O.R. = 9.01

Important: Read the instructions on pages 1 - 7

94-0002740

**SECTION A - PROPERTY OWNER INFORMATION**

BUILDING OWNER'S NAME  
 MANOUSHKA GALA FANFAN

BUILDING STREET ADDRESS (Including Apt., Unit, Suite and/or Bldg. Number) OR P.O. ROUTE AND BOX NO.  
 1470 NE 155 TERR

CITY STATE ZIP CODE  
 MIAMI FL 33162

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 26 Block 6 of MYRA DELLS SUBDIVISION according to the plat thereof as recorded in Plat Book 55 at Page 49 of the public records of MIAMI-DADE County, Florida.

BUILDING USE (e.g. Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.)  
**RESIDENTIAL**

LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE:  GPS (Type):  USGS Quad Map  Other: NGVD 1929  
 (## - ## - ##.##" or ##.#####)  NAD 1927  NAD 1983

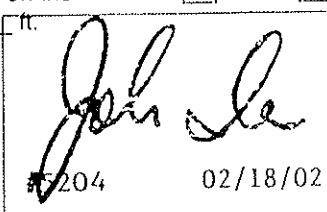
**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER NORTH MIAMI 120656			B2. COUNTY NAME MIAMI-DADE	B3. STATE FL	
B4. MAP AND PANEL NUMBER 12025C00583	B5. SUFFIX J	B6. FIRM INDEX DATE 07/17/1995	B7. FIRM PANEL EFFECTIVE/REVISED DATE 03/02/1994	B8. FLOOD ZONE(S) X	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)

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:

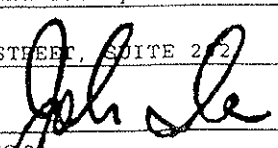
**SECTION C - BUILDING ELEVATION INFORMATION**

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, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO  
 Complete items C3a-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 C, as appropriate, to document the datum conversion.  
 Datum \_\_\_\_\_ Conversion/Comments \_\_\_\_\_  
 Elevation reference mark used 105 Does the elevation reference mark used appear on the FIRM?  Yes  No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>10.45</u> ft.	 License Number: Embossed Seal. 5204 Signature, and Date 02/18/02
<input type="checkbox"/> b) Top of next higher floor	<u>10.60</u> ft.	
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>N/A</u> ft.	
<input type="checkbox"/> d) Attached garage (top of slab)	<u>N/A</u> ft.	
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>N/A</u> ft.	
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>9.06</u> ft.	
<input type="checkbox"/> g) Highest adjacent grade (HAG)	<u>9.66</u> ft.	
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>N/A</u>	
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	<u>N/A</u> sq. ft.	

**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: John Ibarra  
 LICENSE NUMBER: 5204  
 TITLE: Professional Land Surveyor  
 COMPANY NAME: NOVA SURVEYORS, INC.  
 ADDRESS: 5582 N.W. 7TH STREET, SUITE 202  
 CITY: MIAMI STATE: FL ZIP CODE: 33126  
 SIGNATURE:  DATE: 02/18/02 TELEPHONE: (305) 264-2660

**IMPORTANT:** In these spaces, copy the corresponding information from Section A

BUILDING STREET ADDRESS (Including Apt., Unit, Suite and/or Bldg. Number) OR P.O. ROUTE AND BOX NO.  
1470 NE 155 TERR

CITY STATE ZIP CODE  
MIAMI FL 33162

**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 NOTE: ALL ADDITIONS WERE CONSIDERED TO DETERMINE LOWEST FLOOR ELEVATIONS

HIGHEST CROWN OF ROAD ELEVATIONS= 9.01 FEET

LOWEST CROWN OF ROAD ELEVATIONS= 8.98 FEET

Check here if attached

**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. \_\_\_\_\_ in. \_\_\_\_\_ above or \_\_\_\_\_ below (check one) the highest adjacent grade.
- 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. \_\_\_\_\_ in. above the highest adjacent grade.
- 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, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

MANOUSHKA GALA FANFAN

ADDRESS

1470 NE 155 TERR

SIGNATURE

CITY

MIAMI

DATE

STATE

FL

TELEPHONE

ZIP CODE

33162

COMMENTS

Check here if attached

**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 OR 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 is: \_\_\_\_\_ ft. Datum: \_\_\_\_\_

G9. BFE or (in ZONE AO) depth of flooding at the building site is: \_\_\_\_\_ ft. Datum: \_\_\_\_\_

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY NAME

TELEPHONE

SIGNATURE

DATE

COMMENTS

Check here if attached