

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

C.O.R.: 11.08 FT

94-0002908		SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:	
BUILDING OWNER'S NAME LEONARD ETIENNE				Policy Number	
BUILDING STREET ADDRESS (including Apt., Unit, Suite and/or Bldg. Number) OR P.O. ROUTE AND BOX NO. 960 NE 159 ST				Company NAIC Number	
CITY NO. MIAMI BEACH		STATE FL		ZIP CODE 33162	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 4 Block 1 of BELFORD-CARR SUBDIVISION according to the plat thereof as recorded in Plat Book 52 at Page 20 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) (## - ##' - ##.###" or ##.#####)		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983		SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Other: NGVD 1929	

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 12025C0083	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) N/A

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 (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. 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 C3.a-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 G, as appropriate, to document the datum conversion.
 Datum NGVD 1929 Conversion/Comments N/A

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)	11.50 ft.(m)
<input type="checkbox"/> b) Top of next higher floor	12.40 ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	N/A ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	N/A ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.)	N/A ft.(m)
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	10.60 ft.(m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	11.04 ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	N/A
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h	N/A sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

#5204 03/17/2005

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 Ichn Ibarra		LICENSE NUMBER 5204	
TITLE Professional Land Surveyor		COMPANY NAME NOVA SURVEYORS, INC.	
ADDRESS 5582 N.W. 7TH STREET, SUITE 202		CITY STATE ZIP CODE MIAMI FL 33126	
SIGNATURE		DATE TELEPHONE 03/17/2005 (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. 960 NE 159 ST	5 0002908	For Insurance Company Use: Policy Number
CITY NO. MIAMI BEACH	STATE FL	ZIP CODE 33162
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)		Company NAIC Number

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

COMMENTS

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) Check here if attachments

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.(m) in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available.)

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.(m) in.(cm) above the highest adjacent grade. Complete Items C3.h and C3.i on front of form.

E4. The top of the platform of machinery and/or equipment servicing the building is ft.(m) in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available.)

E5. 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

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), 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, C, and E are correct to the best of my knowledge.

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

ADDRESS 960 NE 159 ST	CITY NO. MIAMI BEACH	STATE FL	ZIP CODE 33162
SIGNATURE	DATE	TELEPHONE	

COMMENTS

SECTION G - COMMUNITY INFORMATION (OPTIONAL) Check here if attachments

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.

1. 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.)

2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

3. 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
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This permit has been issued for: New Construction Substantial Improvement

Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m) Datum: _____

BFE or (in ZONE AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____

LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
JRE	DATE

COMMENTS