

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION

SECTION A - PROPERTY INFORMATION			For Insurance Company Use:
A1. Building Owner's Name: CENTURY PARK CONDO NO 2 ASSOC , INC			Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 9020 W FLAGLER ST			Company NAIC Number
City MIAMI	State FLORIDA	ZIP Code 33174-3969	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) CENTURY PARK CONDO NO 2 UNIT BLDG 19 UNDIV 1/373 INT IN COMMON ELEMENTS OFF REC 20512-1061 OR 20699-2384 0802 1			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential			
A5. Latitude/Longitude: Lat. 25°46'09.76"N Long. 80°20'29.37" W 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 1A			
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)	N/A sq ft	a) Square footage of attached garage	N/A sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade	N/A	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade	N/A
c) Total net area of flood openings in A8.b	N/A sq in	c) Total net area of flood openings in A9.b	N/A 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 CITY OF MIAMI DADE CO 120635		B2. County Name MIAMI-DADE		B3. State FL	
B4. Map/Panel Number 12086C 0289	B5. Suffix L	B6. FIRM Index Date 09/11/2009	B7. FIRM Panel Effective/Revised Date 09/11/2009	B8. Flood Zone(s) AH	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 8
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 (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 N/A <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-h below according to the building diagram specified in Item A7.

Benchmark Utilized **DCBM** Vertical Datum **NGVD 1929**

Indicate elevation datum used for elevations in items a)through h)below NGVD 1929 NAVD 1988 Other/Source : _____

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<u>9.85</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	<u>19.85</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>N/A</u>	<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)	<u>8.78</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>7.8</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>8.3</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck stairs, including structural support	<u>N/A</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters

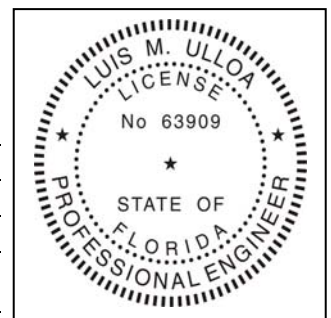
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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.

Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Check here if attachments.

Certifier's Name Luis M. Ulloa	License Number 63909/CA28413
Title Engineer	Company Name APC Engineering Enterprises Inc
Address 2150 West 10th Avenue	City Hialeah State FL ZIP Code 33010
Signature	Date 06/14/2014 Telephone (305) 885-5371



ELEVATION CERTIFICATE , page 2			For Insurance Company Use:
IMPORTANT: In these spaces, copy the corresponding information from Section A.			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 9020 W FLAGLER ST			Policy Number
City MIAMI	State FLORIDA	Zip Code 33174-3969	Company NAIC Number

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 =7.23** **C2E is an A/C Pad** **GPS COORDINATES OBTAINED THRU GOOGLE EARTH**

Signature _____ Date **06/14/2014** 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 8-9 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 _____
- G10. Community's design flood elevation: _____. feet meters (PR) Datum _____

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____
Comments _____	

Check here if attachments

Building Photographs

See Instructions for Item A6.

For Insurance Company Use:

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 9020 W FLAGLER ST			Policy Number
City MIAMI	State FLORIDA	ZIP Code 33174-3969	Company NAIC Number

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.



Left Side View 06/14/2014



Front View 06/14/2014

Building Photographs

See Instructions for Item A6.

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Right Side View 06/14/2014



Rear View 06/14/2014