

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

C.O.R. 5.85ft
11-15-06

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use
BUILDING OWNER'S NAME FEC, LLC		ORDER NO.0611-49	Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 20810 NW 41 ST AVE RD			Company NAIC Number
CITY MIAMI	STATE FL	ZIP CODE 33055	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 6, BLOCK 12, VISTA VERDE CLUSTERS UNIT TWO. SUB. PLAT BOOK 108, PAGE 76			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, 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 type="checkbox"/> Other: _____

02006-360
B2005-886

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER UNINCORPORATED, AREAS 120635		B2. COUNTY NAME MIAMI-DADE		B3. STATE FL	
B4. MAP AND PANEL NUMBER 12025C0 80	B5. SUFFIX J	B6. FIRM INDEX DATE 7-17-95	B7. FIRM PANEL EFFECTIVE/REVISED DATE 3-2-94	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 7.00
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe): _____					
B11. Indicate the elevation datum used for the BFE in 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 _____					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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 Conversion/Comments _____ Elevation reference mark used <u>1145 S</u> Does the elevation reference mark used appear on the FIRM? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
o a) Top of bottom floor (including basement or enclosure)	<u>7.69</u> ft.(m)
o b) Top of next higher floor	<u>N/A.</u> ft.(m)
o c) Bottom of lowest horizontal structural member (V zones only)	<u>N/A.</u> ft.(m)
o d) Attached garage (top of slab)	<u>N/A.</u> ft.(m)
o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area)	<u>7.65</u> ft.(m)
o f) Lowest adjacent (finished) grade (LAG)	<u>7.1</u> ft.(m)
o g) Highest adjacent (finished) grade (HAG)	<u>7.4</u> ft.(m)
o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade <u>N</u>	
o i) Total area of all permanent openings (flood vents) in C3.h <u>N/A</u> sq. in. (sq. cm)	

License Number, Embossed Seal, Signature, and Date

Walter E. Venega
3106
11-15-06

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 WALTER E. VENEGA	LICENSE NUMBER 3106

TITLE PROFESSIONAL LAND SURVEYOR	COMPANY NAME CARIBBEAN LAND SURVEYOR'S		
ADDRESS 11865 SW 26TH STREET BLD 1-13	CITY MIAMI	STATE FL	ZIP CODE 33175
SIGNATURE <i>Walter E. Venega</i>	DATE 11-15-06	TELEPHONE (305): 227-6967	