ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

C		- 1 + 1		Cartificate	المام ا	بمنعم معرجا ممنيا م	fan / A		(afficial	(0) :		and (C	بم بمعالمات ما (د	
CODV	all pages		Elevation	Certificate a	nu ai	allachments	101 (1) community	y onicial,	(Z) Insuran	ce agent/company	, and (S	o priibilioa (c	wher.

SECTION A – PROPERTY INFORMATION FOR INSURANCE COMPANY USE								
A1. Building Owner's Name	FOR INSURANCE COMPANY USE							
A1. Building Owner's Name Policy Number: MARC ROVNER MICHAL ROVNER 17-1159709 YE								
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: Box No.								
4541 N ADAMS AVE								
City State ZIP Code								
MIAMI BEACH		Florida		33140				
A3. Property Description (Lot and Block NAUTILUS EX 5TH PB 44-13 LOT 7 BL								
A4. Building Use (e.g., Residential, Non-I	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL							
A5. Latitude/Longitude: Lat. N25°49'11.	14" Long. <u>V</u>	V80°07'55.33"	Horizontal Datur	n: 🗌 NAD 1	927 🕱 NAD 1983			
A6. Attach at least 2 photographs of the l	ouilding if the Certific	ate is being used to	obtain flood insur	ance.				
A7. Building Diagram Number 1A								
A8. For a building with a crawlspace or e	nclosure(s):							
a) Square footage of crawlspace or e	enclosure(s)	N/A sq ft						
b) Number of permanent flood openi	ngs in the crawlspac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gra	ade N/A			
c) Total net area of flood openings in	A8.b N/A s	sq in						
d) Engineered flood openings?	Yes 🗙 No							
A9. For a building with an attached garag	e:							
a) Square footage of attached garag	e N/A	sq ft						
b) Number of permanent flood openi	ngs in the attached g	garage within 1.0 for	ot above adjacent	grade	N/A			
c) Total net area of flood openings in	A9.b N/A	sq in			i			
d) Engineered flood openings?	Yes 🛛 No	-						
SECTION B	- FLOOD INSURA	NCE RATE MAP	(FIRM) INFORMA	TION	1			
B1. NFIP Community Name & Community	/ Number	B2. County Name			B3. State			
MIAMI BEACH 120651		MIAMI-DADE			Florida			
B4. Map/Panel B5. Suffix B6. FIF Number Da	te E	IRM Panel ffective/ evised Date	B8. Flood Zone(s	(Zoi	se Flood Elevation(s) ne AO, use Base od Depth)			
12086C 0309 L 09/11/2	2009 09/1	1/2009	AE		IGVD 1929)			
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:								
B11. Indicate elevation datum used for BFE in Item B9: X NGVD 1929 NAVD 1988 Other/Source:								
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🕱 No								
Designation Date: N/A CBRS OPA								

						OMB No. 1660-0008 Expiration Date: November 30, 2018		
IMPORTANT: In these spaces, copy the correspon	FOR INSURANCE COMPANY USE							
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.F4541 N ADAMS AVEF						Policy Number:		
City	State	ZIP C	Code		Company NAIC	Number		
MIAMI BEACH	Florida	3314	0					
SECTION C – BUILDING	ELEVATION IN	FORMATI	ON (SURVE	EY RE	QUIRED)			
 C1. Building elevations are based on: Constraints *A new Elevation Certificate will be required wh C2. Elevations – Zones A1–A30, AE, AH, A (with B Complete Items C2.a–h below according to the Benchmark Utilized: D-132-R & D-157-R Indicate elevation datum used for the elevations 	FE), VE, V1–V30, building diagram s Vertica	the buildin V (with BF specified in al Datum:	E), AR, AR/A 1 Item A7. In NGVD 1929	e. A, AR/A	L, AR/A1–A30,			
🖂 NGVD 1929 🗌 NAVD 1988 🗌 Ot								
Datum used for building elevations must be the	same as that used	d for the BF	FE.		Check the m	easurement used.		
a) Top of bottom floor (including basement, cra	awlspace, or enclos	sure floor)	<u> </u>	70	× feet	meters		
b) Top of the next higher floor			N/.	А		 meters		
c) Bottom of the lowest horizontal structural me	ember (\/ Zones or	nly)	N/	А		meters		
d) Attached garage (top of slab)		iiy)		A		meters		
 e) Lowest elevation of machinery or equipmen (Describe type of equipment and location in 	t servicing the build Comments)	ding		74	× feet	meters		
f) Lowest adjacent (finished) grade next to bui	ilding (LAG)		<u> </u>	21	× feet	meters		
g) Highest adjacent (finished) grade next to bu	• • •		5	38	× feet	 meters		
 h) Lowest adjacent grade at lowest elevation c structural support 		cluding		А		meters		
SECTION D – SURVEY	OR, ENGINEER,	OR ARC	HITECT CE	RTIFIC	CATION			
This certification is to be signed and sealed by a lan I certify that the information on this Certificate repre- statement may be punishable by fine or imprisonme	sents my best effor	rts to interp	oret the data	ed by availat	law to certify ele	vation information. that any false		
Were latitude and longitude in Section A provided by	y a licensed land s	urveyor?	🛛 Yes 🗌	No	Check he	re if attachments.		
Certifier's Name FRANCISCO A. AGUIRRE	License Nui 3354	mber				11111111111111111111111111111111111111		
Title P.L.S.					III PROS	CO A AGUR *		
Company Name D'AVILA & ASSOCIATES SERVICES, INC					* ENGINEER *	#1111 m		
Address 14750 NW 77 CT, STE 204					1. 1. 1. 1	OF & SI		
City MIAMI LAKES	State Florida		ZIP Code 33016		111354	57*SURVENIN		
Signature Mandylei	Date 11/27/2017	,	Telephone (305)953-26	600	L			
Copy all pages of this Elevation Certificate and all atta	chments for (1) com	nmunity offi	cial, (2) insur	ance a	gent/company, a	nd (3) building owner.		
Comments (including type of equipment and location	n, per C2(e), if app	licable)						
C.2.E REFERS TO AIR CONDITIONER MACHINERY SERVICING BUILDING LOCATED AT REAR THESE ELEVATIONS WERE MEASURED USING SURVEY-GRADE GLOBAL POSITION SYSTEM EQUIPMENT, THAT UTILIZES THE F.D.O.T. PERMANENT REFERENCE NETWORK AS ITS HIGH ACCURACY REFERENCE NETWORK (H.A.R.N) (NGVD 1929) L.C.O.R = 4.37'; H.C.O.R = 4.54' LATITUDE & LONGITUDE OBTAINED BY GPS								

OMB No.	1660-0008
Expiratior	Date: November 30, 2018

ELEVATION CERTIFICATE			Expiration Date: November 30, 2018			
IMPORTANT: In these spaces, copy the correspo	nding informatio	n from Section A.	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, 4541 N ADAMS AVE	and/or Bldg. No.) o	or P.O. Route and Box No.	Policy Number:			
City MIAMI BEACH	State Florida	ZIP Code 33140	Company NAIC Number			
SECTION E – BUILDING FOR ZC		ORMATION (SURVEY NO NE A (WITHOUT BFE)	DT REQUIRED)			
For Zones AO and A (without BFE), complete Items complete Sections A, B,and C. For Items E1–E4, us enter meters.	E1–E5. If the Cert e natural grade, if	tificate is intended to suppor available. Check the measu	rt a LOMA or LOMR-F request, irement used. In Puerto Rico only,			
 E1. Provide elevation information for the following a the highest adjacent grade (HAG) and the lowe a) Top of bottom floor (including basement, 			her the elevation is above or below			
crawlspace, or enclosure) is		X feet me	ters above or below the HAG.			
b) Top of bottom floor (including basement, crawlspace, or enclosure) is	· -	feet me	ters above or below the LAG.			
E2. For Building Diagrams 6–9 with permanent floo the next higher floor (elevation C2.b in	d openings provide	ed in Section A Items 8 and	/or 9 (see pages 1–2 of Instructions),			
the diagrams) of the building is	·	feet me	ters above or below the HAG.			
E3. Attached garage (top of slab) is	·	feet me	ters above or below the HAG.			
E4. Top of platform of machinery and/or equipment servicing the building is		feet 🗌 me	ters above or below the HAG.			
E5. Zone AO only: If no flood depth number is avail floodplain management ordinance? Yes			accordance with the community's st certify this information in Section G.			
SECTION F – PROPERTY C	WNER (OR OWN	ER'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 or Owner's Authorized Representat	ive's Name					
Address		City	State ZIP Code			
Signature		Date	Telephone			
Comments						
			Check here if attachments.			

OMB No.	1660-0008	
Expiration	Date: November 30, 2	2018

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY L							
Building Street Address (including Apt., Unit, St	o. Policy Number:						
4541 N ADAMS AVE							
City	Company NAIC Number						
MIAMI BEACH	Florida	33140					
SECTIO	N G – COMMUNITY IN	FORMATION (OPTION	IAL)				
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete th						
	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation						
G2. A community official completed Secti or Zone AO.	on E for a building locat	ed in Zone A (without a	FEMA-issued or community-issued BFE)				
G3. The following information (Items G4-	G10) is provided for cor	nmunity floodplain man	agement purposes.				
G4. Permit Number	G5. Date Permit Issue	ed	G6. Date Certificate of Compliance/Occupancy Issued				
G7. This permit has been issued for:] New Construction 🗌	Substantial Improveme	nt				
G8. Elevation of as-built lowest floor (including of the building:	g basement)		feet meters				
G9. BFE or (in Zone AO) depth of flooding at t	he building site:		feet inters Datum				
G10. Community's design flood elevation:] feet [] meters Datum				
Local Official's Name		Title					
Community Name		Telephone					
Signature		Date					
Comments (including type of equipment and loc	cation, per C2(e), if appl	icable)					
			Check here if attachments.				

ELEVATION CERTIFICATE

FEMA Form 086-0-33 (7/15)

BUILDING PHOTOGRAPHS

OMB No. 1660-0008 Expiration Date: November 30. 2018

ELEVATION CERTIFICATE	See Instructior	ns for Item A6.	Expiration Date: November 30, 2018
IMPORTANT: In these spaces, copy the co	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, 4541 ADAMS AVE	Policy Number:		
City MIAMI BEACH	State FL	ZIP Code 33140	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.



Photo One

Photo One Caption



Photo Two Caption

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE	Continuat	tion Page	Expiration Date: November 30, 2018	
IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Su 4541 ADAMS AVE	Policy Number:			
City MIAMI BEACH	State FL	ZIP Code 33140	Company NAIC Number	

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. 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.



Photo One

Photo One Caption



Photo Two Caption

