### U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2022

# **ELEVATION CERTIFICATE**

**Important:** Follow the instructions on pages 1–9.

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

SECTION A – PROPERTY INFORMATION						FOR INSU	RANCE COMPANY USE
A1. Building Owner's Name David M Roth and Isabel Roth  Policy Number:						ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: 1745 Lenox Avenue						IAIC Number:	
City State ZIP Cod Miami Beach Florida 33139							
		nd Block Numbers, Ta 0 PALM VIEW SUB P			•	cc.)	
A4. Building Use (	e.g., Resider	itial, Non-Residential,	Addition	, Accessory, e	etc.) Residenti	al	
A5. Latitude/Longi	tude: Lat. 2	5.792929°	Long8	30.139879°	Horizonta	al Datum: NAD	1927 × NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being u	sed to obtain floo	d insurance.	
A7. Building Diagra	am Number	8					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawl	space or enclosure(s)		1	1377.00 sq ft		
b) Number of	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foo	t above adjacent gr	ade 7
c) Total net ar	ea of flood o	penings in A8.b	1	224.00 sq in	1		
d) Engineered	I flood openir	ngs? Yes 🗓 Y	No				
A9. For a building \	vith an attach	ned garage:					
a) Square foot	a) Square footage of attached garage N/A sq ft						
b) Number of	permanent flo	ood openings in the at	tached g	arage within	1.0 foot above ad	jacent grade N/A	
c) Total net ar	c) Total net area of flood openings in A9.b N/A sq in						
d) Engineered	flood openin	gs? Yes 🗓 Y	No				
-,							
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Community Name & Community Number City of Miami Beach 120651  B2. County Name Miami-Dade  B3. State Florida							
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	Elevation(s) se Base Flood Depth)
12086C0317	L	09-11-2009	09-11-2		AE	8	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:  ☐ FIS Profile 🕱 FIRM ☐ Community Determined ☐ Other/Source:							
B11. Indicate elevation datum used for BFE in Item B9: 🗵 NGVD 1929 🗌 NAVD 1988 📗 Other/Source:							
B12. Is the buildin	B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🕱 No						
Designation	Date:		CBRS	☐ OPA			_

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IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or 1745 Lenox Avenue	Policy Number:				
City State Miami Beach Flori		Code 39	Company NAIC Number		
SECTION C – BUILDING ELE	VATION INFORMAT	TION (SURVEY RE	EQUIRED)		
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)  C1. Building elevations are based on:					
<ul> <li>h) Lowest adjacent grade at lowest elevation of decl structural support</li> </ul>	or stairs, including		4.2 X feet  meters		
SECTION D - SURVEYOR,	ENGINEER, OR ARC	CHITECT CERTIFI	CATION		
This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment und Were latitude and longitude in Section A provided by a lice	veyor, engineer, or arc my best efforts to inter der 18 U.S. Code, Sec	hitect authorized by rpret the data availa tion 1001.	law to certify elevation information.		
Certifier's Name Juan A. Suarez Title	License Number 6220				
Surveyor and Mapper  Company Name Suarez Surveying and Mapping Inc.  Address 13350 SW 131 Street, Suite 103  City Miami	State Florida	ZIP Code 33186	No. 6220  STATE OF  STATE		
Signature	Date 04-04-2022	Telephone (305) 596-1799	Ext.		
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.					
Comments (including type of equipment and location, per C2(e), if applicable) GPS Coordinates obtained using GPS Device *Miami Dade County Records **Miami Dade County Benchmark C2.e) A/C on Concrete Pad located on East side of building Portion of Building Diagram 1B: Top of Bottom Floor Elevation=4.86 Crown of Road Elevation: 4.36					

# **ELEVATION CERTIFICATE**

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IMPORTANT: In these spaces, copy the corresponding information from Section A.					FOR INSURANC	E COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.					Policy Number:	
	15 Lenox Avenue					
City	/ ami Beach	State Florida	ZIP Code 33139	1	Company NAIC I	Number
IVIIA	SECTION E - BUILDING			EV NOT E	PEOLIIDED)	
			NE A (WITHOUT BE		ALQUINED)	
con	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.	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,					
	crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet	meters	above or	below the HAG.
	crawlspace, or enclosure) is		feet	meters	above or	below the LAG.
E2.	For Building Diagrams 6–9 with permanent flo the next higher floor (elevation C2.b in the diagrams) of the building is	od openings provide	d in Section A Items	_		of Instructions),
E3.	Attached garage (top of slab) is		feet	meters		below the HAG.
E4.	Top of platform of machinery and/or equipmer servicing the building is	nt	feet	meters	above or	below the HAG.
E5.	Zone AO only: If no flood depth number is ava floodplain management ordinance?   Yes		ne bottom floor eleva own. The local offic			
	SECTION F - PROPERTY	OWNER (OR OWN	ER'S REPRESENTA	TIVE) CEF	RTIFICATION	
The	e property owner or owner's authorized represer nmunity-issued BFE) or Zone AO must sign her	ntative who complete e. The statements in	es Sections A, B, and Sections A, B, and I	d E for Zon E are corre	e A (without a FE	EMA-issued or my knowledge.
Pro	perty Owner or Owner's Authorized Representa	ative's Name				
Add	dress		City	Stat	e	ZIP Code
Sig	nature		Date	Tele	ephone	
Cor	mments					
					Check he	ere if attachments.

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IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, St 1745 Lenox Avenue	Policy Number:					
City Miami Beach	State Florida	ZIP Code 33139		Company NAIC Number		
SECTIO	N G – COMMUNI	TY INFORMATION (OPT	IONAL)			
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–G10. In Puerto Rico only, enter meters.						
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 Zone AO.	on E for a building	located in Zone A (withou	ut a FEM <i>F</i>	A-issued or community-issued BFE)		
G3. The following information (Items G4-	G10) is provided fo	or community floodplain n	nanageme	ent purposes.		
G4. Permit Number	G5. Date Permit	Issued		Date Certificate of compliance/Occupancy Issued		
G7. This permit has been issued for:	New Construction	n 🗌 Substantial Improve	ment			
G8. Elevation of as-built lowest floor (including of the building:	g basement) -		feet	meters Datum		
G9. BFE or (in Zone AO) depth of flooding at	the building site: _		feet	meters 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	f applicable)				
				Check here if attachments.		

#### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

See Instructions for Item A6.

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Building Street Address (including Apt., 1745 Lenox Avenue	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Miami Beach	Florida	33139	

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 Front View 04/04/2022

Clear Photo One



Photo Two

Photo Two Caption Side View 04/04/2022

Clear Photo Two

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

Continuation Page

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			•
IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt 1745 Lenox Avenue	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Miami Beach	Florida	33139	

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 Three

Photo Three Caption Side View 04/04/2022

Clear Photo Three



Photo Four

Photo Four Caption Rear View 04/04/2022

Clear Photo Four