OKALOOSA COUNTY DEPARTMENT OF GROWTH MANAGEMENT



1804 Lewis Turner Blvd., Ste. 200 Ft. Walton Beach, FL 32547 850-651-7180 812 E. James Lee Blvd. Crestview, FL 32539 850-689-5080

V-ZONE CONSTRUCTION ANCHORING CERTIFICATE

A CERTIFICATE OF OCCUPANCY WILL NOT BE ISSUED UNTIL THIS FORM IS COMPLETED

REQUIRED FOR ALL NEW CONSTRUCTION AND SUBSTANTIAL IMPROVEMENTS AND OR SUBSTANTIAL DAMAGE IN A V-ZONE. APPLICABLE TO ALL RESIDENTIAL, COMMERCIAL AND INDUSTRIAL ZONING DISTRICTS. TO BE COMPLETED BY REGISTERED PROFESSIONAL ENGINEERS AND ARCHITECTS.

BUILDIN	G PERMIT NUMBER			
OWNER	NAME:			
OWNER	ADDRESS:			
OWNER PHONE #:		FAX #:		
JOB SITE	ADDRESS:			
CITY:		STATE:	ZIP CODE:	
COUNTY	· \	WITHIN CITY LIMITS?	CITY:	
PROPER	TY TAX I.D. #:			
•••••	••••••	•••••		
		OOD INSURANCE RAT		
Commun	ty Number: Pa	anel Number:	Suffix:	
Date of F	IRM Index:	Date of FIRM Panel:		
FIRM Zor	ne:			
	••••••	•••••		
1. 2. 3. 4. 5. 6. 7.	(NOTE: This certification FIRM Base Flood Elevation (E Community's Design Flood El Elevation of the Bottom of the Elevation of Lowest Adjacent Elevation of Highest Adjacent Depth of Anticipated Scour/Er	ION 2 – ELEVATION INF ate is <u>NOT a substitute</u> f BFE) evation (DFE) Lowest Horizontal Structural M Grade Grade osion used for Foundation Des or Foundation	for an Elevation Certificate) ft. ft. Member ft. ft. ft. ft. ft. ft. ft. ft.	
	Datum used: NGVD29	NAVD88 Other		

SECTION 3 – V-ZONE CERTIFICATION STATEMENT

NOTE: This section must be certified by a registered professional engineer or architect.

I certify that:

- 1. I have developed or reviewed the structural design, plans, and specifications for construction of the above referenced building and
- 2. that the design and methods of construction specified to be used are in accordance with accepted the State of Florida Building Code for meeting the following provisions:
 - a. The bottom of the lowest horizontal structural member of the lowest floor (excluding piles and columns) is elevated a minimum of 1 foot above the BFE: and
 - b. The Pile or column foundation and structure attached thereto is anchored to resist flotation, collapse, and lateral movement due to the effects of the wind and water loads acting simultaneously on all building components. Water loading values used are those associated with the base flood. Wind loading values used are those required by the State of Florida Building Code. The potential for scour and erosion at the foundation has been anticipated for conditions associated with the base flood, including wave action.

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SECTION 4 – BREAKAWAY WALL CERTIFICATION STATEMENT

NOTE: This section must be certified by a registered engineer or architect when breakaway walls are designed to have a resistance of more than 20 psf (0.96kN/m2) determined using allowable stress design)

I certify that:

- 1. I have development and/or reviewed the of structural design, specifications, and plans for construction of breakaway walls to be constructed under the above-referenced building and
- 2. That the design and methods of construction specified to be used are in accordance with the State of Florida Building Code for meeting the following provisions:
 - a. Breakaway collapse shall result from a water load less than that which would occur during the base flood;
 - b. The elevated portion of the building and supporting foundation system shall not be subject to collapse, displacement, or other structural damage due to the effects of wind and water loads acting simultaneously on all building components;

The space below the lowest floor is useable solely for parking of vehicles, building access and storage only.

SECTION 5 – CERTIFICATION AND SEAL

This certification is to be signed and sealed by a registered State by law to certify structural designs.	of Florida professional engineer or architect authorized				
I certify:					
1. The V Zone Design Certification Statement (Section I	II)(Initial)				
2. The Breakaway Wall Design Certification Statement (Section IV) (Initial)				
Certifier's Name:					
Title:	License No:				
Company Name:					
Street Address:					
City:	_ State: Zip Code:				
Telephone No.:	_ Fax No.:				
E-mail:					
Signature	Date				
SEAL					