

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.

BUILDING PERMIT NUMBER _____

OWNER NAME: _____

OWNER ADDRESS: _____

OWNER PHONE #: _____ FAX #: _____

JOB SITE ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

COUNTY: _____ WITHIN CITY LIMITS? _____ CITY: _____

PROPERTY TAX I.D. #: _____

SECTION 1 – FLOOD INSURANCE RATE MAP INFORMATION

Community Number: _____ Panel Number: _____ Suffix: _____

Date of FIRM Index: _____ Date of FIRM Panel: _____

FIRM Zone: _____

SECTION 2 – ELEVATION INFORMATION

(NOTE: This certificate is NOT a substitute for an Elevation Certificate)

1. FIRM Base Flood Elevation (BFE)..... _____ ft.
2. Community's Design Flood Elevation (DFE)..... _____ ft.
3. Elevation of the Bottom of the Lowest Horizontal Structural Member..... _____ ft.
4. Elevation of Lowest Adjacent Grade _____ ft.
5. Elevation of Highest Adjacent Grade _____ ft.
6. Depth of Anticipated Scour/Erosion used for Foundation Design..... _____ ft.
7. Elevation of Bottom of Pilings or Foundation _____ 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 of Florida professional engineer or architect authorized by law to certify structural designs.

I certify:

1. The V Zone Design Certification Statement (Section III) _____ (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

