

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

## SECTION A - PROPERTY INFORMATION

Building Owner's Name Mr. and Mrs. Don J. Gautreaux		For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2209 Longfellow Road		Policy Number
City Bay St. Louis State MS ZIP Code 39520		Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lots 5-8 Inclusive, and the North 66 Feet of Lots 41-44, Inclusive, Square 122, Bay St. Louis Land & Improvement Company Subdi		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983
A5. Latitude/Longitude: Lat. <u>30 18 41.72</u> Long. <u>89 22 28.60</u>		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>1</u>		
A8. For a building with a crawl space or enclosure(s), provide		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) <u>N/A</u> sq ft		a) Square footage of attached garage <u>N/A</u> sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <u>N/A</u>		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <u>N/A</u>
c) Total net area of flood openings in A8.b <u>N/A</u> sq in		c) Total net area of flood openings in A9.b <u>N/A</u> sq in

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number City of Bay St. Louis 285251		B2. County Name Hancock		B3. State Mississippi	
B4. Map/Panel Number 285254 0145	B5. Suffix C	B6. FIRM Index Date 9/18/92	B7. FIRM Panel Effective/Revised Date 9/18/87	B8. Flood Zone(s) A8	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 10

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 (Describe) \_\_\_\_\_

B11. Indicate elevation datum used for BFE in item B9:  NGVD 1929  NAVD 1988  Other (Describe) \_\_\_\_\_

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

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction  
 \*A new Elevation Certificate will be required when construction of the building is complete.

C2. 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 C2.a-g below according to the building diagram specified in item A7.  
 Benchmark Utilized P 190 Vertical Datum NGVD 29  
 Conversion/Comments N/A

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor) 15.9  feet  meters (Puerto Rico only)

b) Top of the next higher floor N/A  feet  meters (Puerto Rico only)

c) Bottom of the lowest horizontal structural member (V Zones only) N/A  feet  meters (Puerto Rico only)

d) Attached garage (top of slab) N/A  feet  meters (Puerto Rico only)

e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) 15.9  feet  meters (Puerto Rico only)

f) Lowest adjacent (finished) grade (LAG) 8.7  feet  meters (Puerto Rico only)

g) Highest adjacent (finished) grade (HAG) 9.9  feet  meters (Puerto Rico only)

## 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 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.

Check here if comments are provided on back of form.

Certifier's Name Stuart Williamson, P.E.	License Number 13199
Title	Company Name
Address 807 Third Street	City Bay St. Louis State MS ZIP Code 39520
Signature <i>Stuart Williamson</i>	Date 1/19/08 Telephone (228) 493-9988

