

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
Building Owner's Name CRAIG FLANAGAN		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 844 PRIMROSE DR		Company NAIC Number

City **Bay St. Louis** State **MS** ZIP Code **39520**

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
LOT 19, SQUARE 24, UNIT 7, SHORELINE ESTATES, PARCEL # 137D-0-42-129.000

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **Residential**

A5. Latitude/Longitude: Lat. **N.30-19-54** Long. **W.89-20-35**

Horizontal Datum: NAD 1927 NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number **5**

A8. For a building with a crawspace or enclosure(s):

A9. For a building with an attached garage:

- a) Square footage of crawspace or enclosure(s) **255** sq ft
- b) No. of permanent flood openings in the crawspace or enclosure(s) within 1.0 foot above adjacent grade **6**
- c) Total net area of flood openings in A8.b **504** sq in
- d) Engineered flood openings? Yes No

- a) Square footage of attached garage **NA** sq ft
- b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade **NA**
- c) Total net area of flood openings in A9.b **NA** sq in
- d) Engineered flood openings? Yes No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number BAY ST LOUIS 285251		B2. County Name Hancock		B3. State MS	
B4. Map/Panel Number 285254-0145	B5. Suffix C	B6. FIRM Index Date 8-18-92	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) 11

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) _____

Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) _____

E Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
Designation Date **NA** 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-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.
Benchmark Utilized Local Vertical Datum NGVD 1929
Conversion/Comments NA

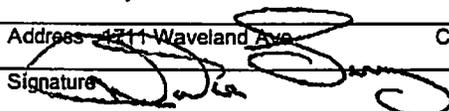
Check the measurement used.

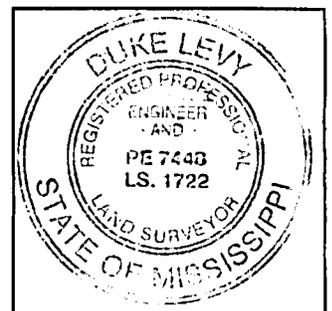
- a) Top of bottom floor (including basement, crawspace, or enclosure floor) **5.8** feet meters (Puerto Rico only)
- b) Top of the next higher floor **17.6** feet meters (Puerto Rico only)
- c) Bottom of the lowest horizontal structural member (V Zones only) **NA** feet meters (Puerto Rico only)
- d) Attached garage (top of slab) **NA** feet meters (Puerto Rico only)
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) **14.5** feet meters (Puerto Rico only)
- f) Lowest adjacent (finished) grade next to building (LAG) **3.2** feet meters (Puerto Rico only)
- g) Highest adjacent (finished) grade next to building (HAG) **4.2** feet meters (Puerto Rico only)
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support **5.8** 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. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Surveyor's Name Duke Levy		License Number 01722	
Title Surveyor	Company Name Duke Levy and Associates, P.A.		
Address 4711 Waveland Ave	City Waveland	State MS	ZIP Code 39576
Signature 	Date 10/26/09	Telephone 228-467-5212	



IMPORTANT: In these spaces, copy the corresponding information from Section A.	For Insurance Company Use:
Building Street Address (Including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 844 PRIMROSE DR	Policy Number
City Bay St. Louis State MS ZIP Code 39520	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

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

Comments WO# 08-0593-B
TBM FH BOLT BETWEEN FIRE MAIN & HYDRANT @ 'N' END OF PRIMROSE @ ELEVATION = 6.27'
LOWEST ELEVATION OF MACHINERY IS AN A/C UNIT @ EL = 14.5'

Signature 

Date 10/26/09

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

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. 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 _____ feet meters above or below the HAG.
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below the LAG.
- E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.
- E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'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's or Owner's Authorized Representative's Name

Address _____ City _____ State _____ ZIP Code _____

Signature _____ Date _____ Telephone _____

Comments

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

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 and G9.

- 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 E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. Permit Number <u>08-16248</u>	G5. Date Permit Issued <u>8-8-08</u>	G6. Date Certificate Of Compliance/Occupancy Issued <u>1/4/10</u>
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- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters (PR) Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____
- G10. Community's design flood elevation _____ feet meters (PR) Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments

Check here if attachments