

# 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 INSURANCE COMPANY USE	
A1. Building Owner's Name <b>Greg Allemond</b>				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>#121 Markham Drive</b>				Company NAIC Number:	
City <b>Gulfport</b>	State <b>MISSISSIPPI</b>	ZIP Code <b>39501</b>			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>1011D-03-034.002</b>					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>					
A5. Latitude/Longitude: Lat. <b>N 30°22'52.2"</b> Long. <b>W 89°02'01.8"</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 <b>6</b>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <b>290</b> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <b>2</b>					
c) Total net area of flood openings in A8.b <b>400</b> sq in					
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <b>0</b> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>0</b>					
c) Total net area of flood openings in A9.b <b>0</b> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Gulfport 285253</b>			B2. County Name <b>HARRISON</b>		B3. State <b>MISSISSIPPI</b>
B4. Map/Panel Number <b>28047C0268</b>	B5. Suffix <b>G</b>	B6. FIRM Index Date <b>06-16-09</b>	B7. FIRM Panel Effective/ Revised Date <b>06-16-09</b>	B8. Flood Zone(s) <b>VE</b>	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) <b>21'</b>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

**ELEVATION CERTIFICATE**

OMB No. 1660-0008  
Expiration Date: November 30, 2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>#121 Markham Drive</b>			Policy Number:
City <b>Gulfport</b>	State <b>MISSISSIPPI</b>	ZIP Code <b>39501</b>	Company NAIC Number

**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. In Puerto Rico only, enter meters.

Benchmark Utilized: GCGC Realtime Network Vertical Datum: NAVD 88 (GEOID12B)

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

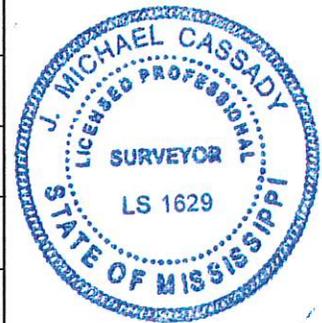
- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 14.1  feet  meters
- b) Top of the next higher floor 26.5  feet  meters
- c) Bottom of the lowest horizontal structural member (V Zones only) 25.1  feet  meters
- d) Attached garage (top of slab) N.A  feet  meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 25.8  feet  meters
- f) Lowest adjacent (finished) grade next to building (LAG) 14.0  feet  meters
- g) Highest adjacent (finished) grade next to building (HAG) 14.1  feet  meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support N.A  feet  meters

**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.

Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  Check here if attachments.

Certifier's Name <b>J, MICHAEL CASSADY</b>	License Number <b>1629</b>
Title <b>PROFESSIONAL LAND SURVEYOR</b>	
Company Name <b>J. MICHAEL CASSADY</b>	
Address <b>1714 22ND AVE.</b>	
City <b>GULFPORT</b>	State <b>MISSISSIPPI</b>
	ZIP Code <b>39501</b>



Signature <i>J. Michael Cassady</i>	Date <b>09/22/2017</b>	Telephone <b>(228) 896-7155</b>	<b>08455-17</b>
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Comments (including type of equipment and location, per C2(e), if applicable)

(1) Lowest elevation of machinery or equipment servicing the building is AC on a platform. Lat./Long. in Section A5 are at the front yard. (2) Confirm B8, B9 and C2a with local code office before any new construction begins. The property description listed on this certificate is for information purposes only. It is not intended to insure that the building is located on a particular's legal parcel. The specific reference is according to municipal address only.

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**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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City <b>Gulfport</b>	State <b>MISSISSIPPI</b>	ZIP Code <b>39501</b>	Company NAIC Number

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**



Photo Two

Photo Two Caption **Rear View**