

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 PRESTIGE PROPERTIES					Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 9561 NORTH BAYOU BEND DRIVE					Company NAIC Number:	
City GULFPORT		State Mississippi		ZIP Code 39503		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 2, BAYOU BEND SUBDIVISION						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL						
A5. Latitude/Longitude: Lat. 30 25'28.5" Long. -089 02'19.7" 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 1B						
A8. For a building with a crawlspace or enclosure(s):						
a) Square footage of crawlspace or enclosure(s) 0 sq ft						
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 0						
c) Total net area of flood openings in A8.b 0 sq in						
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
A9. For a building with an attached garage:						
a) Square footage of attached garage 667 sq ft						
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 4						
c) Total net area of flood openings in A9.b 820 sq in						
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number CITY OF GULFPORT, 285253				B2. County Name HARRISON		B3. State Mississippi
B4. Map/Panel Number 28047C266	B5. Suffix G	B6. FIRM Index Date 12/21/2017	B7. FIRM Panel Effective/ Revised Date 06/16/2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 15	
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

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. 9561 NORTH BAYOU BEND DRIVE			Policy Number:
City GULFPORT	State Mississippi	ZIP Code 39503	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: GPS RTK NETWORK Vertical Datum: NAVD88, GEOID 2009

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) 16.3 feet meters
- b) Top of the next higher floor N/A feet meters
- c) Bottom of the lowest horizontal structural member (V Zones only) N/A feet meters
- d) Attached garage (top of slab) 12.1 feet meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 16.0 feet meters
- f) Lowest adjacent (finished) grade next to building (LAG) 11.0 feet meters
- g) Highest adjacent (finished) grade next to building (HAG) 12.5 feet meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 12.5 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 CLIFFORD A. CROSBY, P.L.S.		License Number MS 2539
Title OWNER		Place Seal Here
Company Name CROSBY SURVEYING		
Address 716 LIVE OAK DRIVE		
City BILOXI	State Mississippi	
Signature	Date 08/12/2018	Telephone (228) 234-1649

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Comments (including type of equipment and location, per C2(e), if applicable)
LOWEST MACHINERY IS THE BOTTOM OF THE AIR CONDITIONING UNIT ON RAISED PLATFORM.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
9561 NORTH BAYOU BEND DRIVE

FOR INSURANCE COMPANY USE

Policy Number:

City

GULFPORT

State

Mississippi

ZIP Code

39503

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 8/12/2018



Photo Two

Photo Two Caption REAR VIEW 8/12/2018

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BUILDING PHOTOGRAPHS

Continuation Page

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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. 9581 NORTH BAYOU BEND DRIVE			Policy Number:
City GULFPORT	State Mississippi	ZIP Code 39503	Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. 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.

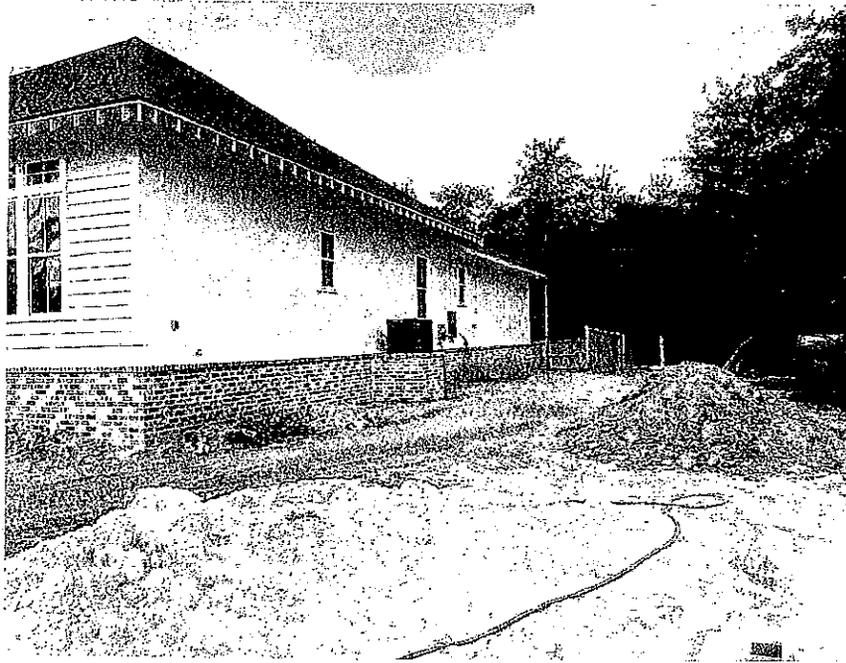


Photo One

Photo One Caption RIGHT SIDE VIEW 8/12/2018



Photo Two

Photo Two Caption LEFT SIDE VIEW 8/12/2018