U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

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

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.

	SE	CTION A - PROPER	TY INFO	DRMATION	indication (a) indication of		any, and (3) building owne URANCE COMPANY USI
MIKE ANDERS	A1. Building Owner's Name					Policy Nu	The state of the s
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Con							
11589 EASY STREET					Company	NAIC Number:	
City				State		ZIP Code	
GULFPORT Mississippi A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PARCEL NUMBER GOOD 04 043 000							
PARCEL NUME	BER 0909P-01	and Block Numbers, 7 -013.000	ax Par	cel Number, Legal [Description, etc.)	· · · · · · · · · · · · · · · · · · ·	2111
A4. Building Us	e (e.g., Reside	ential, Non-Residential	, Additio	on, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Lo	ngitude: Lat.	30 24 58.6"	Long.	-089 02'13,3"		· [] NAD	Ann Fall
A6. Attach at le	ast 2 photogra	phs of the building if th	ne Certi	Firste is boing upod		ı 📋 NAD	1927 🗵 NAD 1983
A7. Building Dia	gram Number	6		means is being ased	to optain 11000 insura	ence.	
		space or enclosure(s):	,				
		/Ispace or enclosure(s		120 sa ft			
							•
c) Total net	area of flood o	lood openings in the copenings in A8,b	~~	_	within 1.0 foot above	adjacent g	rade 2
				sq in			
		ngs? ⊠Yes ☐ i	No.				
A9. For a buildin	y with an attac	hed garage:					
a) Square fo	otage of attac	hed garage0		sq ft			
		ood openings in the at			و و داد ما ما الما الما الما الما الما الما	_	
c) Total net a	rea of flood or	nomina - 7. AA.	^		ot above adjacent gr	ade	0
		ngs? Yes 🛛 N		_ sq in			
	SE	CTION B - FLOOD I	NSUR/	NCE RATE MAP	(FIRM) INFORMAT	'ON	
B1. NFIP Commu	nity Name & C	ommunity Number		B2. County Name		ION	DO OUT
CITY OF GULPO	RT, 285253		1	HARRISON			B3. State Mississippi
Number	B5. Suffix	B6. FIRM Index Date		IRM Panel ffective/	B8. Flood Zone(s)	B9, Bas	e Flood Elevation(s)
28047C0266	G	12/21/2017	R	evised Date		Floc	ne AO, use Base ` ′ od Depth)
		13011	00/10	/2009	AE	15	, ,
B10. Indicate the	source of the E	Base Flood Elevation (BEE) de	to or been flood d	AT.		
☐ FIS Profil	∍⊠ FIRM [Community Determ	ined [ara or base 11000 de ∃ Other/Source:	pur entered in Item B	19:	
							
		ed for BFE in Item B9				r/Source:_	
B12. Is the building	located in a	Coastal Barrier Resour	ces Sy	stem (CBRS) area o	or Otherwise Protect	ed Area 🗥	PAI? TVoc DINA
Designation I	Date:			П ОРА	- ,		[1 tes [X] MO
		-					
MA Form 086-0-33	(7/15)						
MA Form 086-0-33	(7/15)	Par	lana, a	d provious aditions			

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/o 11589 EASY STREET	Policy Number:					
OU FRONT	- Contrade	P Code 9503	Company NAIC Number			
SECTION C - BUILDING E	LEVATION INFORMA	ATION (SURVEY R	EQUIRED)			
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when of the C2. Elevations – Zones A1–A30, AE, AH, A (with BFE) Complete Items C2.a–h below according to the build Benchmark Utilized: GPS RTK NETWORK Indicate elevation datum used for the elevations in NGVD 1929 NAVD 1988 Other/Datum used for building elevations must be the same a) Top of bottom floor (including basement, crawls b) Top of the next higher floor c) Bottom of the lowest horizontal structural members d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment ser (Describe type of equipment and location in Conf) Lowest adjacent (finished) grade next to building g) Highest adjacent (finished) grade next to building	ion Drawings* Boconstruction of the built, VE, V1–V30, V (with Iding diagram specified Vertical Daturitems a) through h) be Source: ne as that used for the pace, or enclosure floorer (V Zones only) vicing the building nments) g (LAG) g (HAG)	uilding Under Constructing is complete. BFE), AR, AR/A, AR/A, AR/A in Item A7. In Puerlant NAVD88, GEOID 2 low. BFE. 7. 9 19. 4 N/A. N/A. 20. 4 7. 6 7. 8	Check the measurement used.			
 h) Lowest adjacent grade at lowest elevation of dec structural support 	ck or stairs, including	<u>7</u> . <u>7</u>	x feet meters			
SECTION D – SURVEYOR,	ENGINEER, OR AR	CHITECT CERTIFI	CATION			
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?						
Certifier's Name CLIFFORD A. CROSBY, P.L.S.	License Number					
Title OWNER Company Name CROSBY SURVEYING Address 716 LIVE OAK DRIVE City BILOXI	MS 2539 State Mississippi	ZIP Code 39532	Séal Hesasso			
Signature // /	Date					
1/1/1	10/09/2019	Telephone (228) 234-1649				
Copy all pages of this Elevation Certificate and all attachment Comments (including type of equipment and location, per LOWEST MACHINERY IS THE BOTTOM OF THE AIR C	C2(e), if applicable)					

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresp	oonding Informati	on from Section A.		FOR INSUR	ANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 11589 EASY STREET					er:
City	State	710.0			
GULFPORT	Mississippi	ZIP Code 39503		Company NA	JC Number
SECTION E – BUILDING FOR 2	ELEVATION INI	ORMATION (SUR ONE A (WITHOUT E	VEY NOT	REQUIRED)	
For Zones AO and A (without REE), complete team	10 E4 E5 1611 - 6	440		1014 101	25° 1°
enter meters.	ise natural grade, ii	avallable. Check the	measuren	nent used. In I	Puerto Rico only,
 Provide elevation information for the following the highest adjacent grade (HAG) and the low a) Top of bottom floor (including basement, 	and check the app est adjacent grade	ropriate boxes to sho (LAG)	w whether	the elevation	is above or below
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet	☐ meters	above o	or Delow the HAG.
crawlspace, or enclosure) is	***************************************	feet	☐ meters	above	or Delow the IAG
E2. For Building Diagrams 6–9 with permanent floo the next higher floor (elevation C2.b in	od openings provid	ed in Section A Items	8 and/or 9) (see pages 1	-2 of Instructions
the diagrams) of the building is	·		meters		r Delow the HAG.
E3. Attached garage (top of slab) is			meters		r □ below the HAG.
E4. Top of platform of machinery and/or equipmen servicing the building is	t		meters		
55. Zone AO only: If no flood depth number is avail floodplain management ordinance? Yes	lable, is the top of t	he bottom floor eleve	ated in acco	ordonan with th	r below the HAG.
had 199		IOMIT THE ROCAL OUR	al must ce	entify this inton	nation in Section G.
SECTION F – PROPERTY Of the property owner or owner's authorized represent community-issued BFE) or Zone AO must sign here	WNER (OR OWN	ER'S REPRESENTA	TIVE) CER	TIFICATION	
ommunity-issued BFE) or Zone AO must sign here roperty Owner or Owner's Authorized Representat	ive's Name		L 410 00110	or to the pest	ormy knowleage.
ddress	A Company of the Comp	City	State	9	ZIP Code
ignature		Date	Telej	phone	
omments				· · · · · · · · · · · · · · · · · · ·	
•					•
·					
				☐ Check h	ere if attachments,

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the correspo	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, 11589 EASY STREET	ox No. Policy Number:	
City _GULFPORT	State ZIP Code Mississippi 39503	Company NAIC Number
SECTION G	- COMMUNITY INFORMATION (OP	IONAL)
The local official who is authorized by law or ordinar Sections A, B, C (or E), and G of this Elevation Cert used in Items G8–G10. In Puerto Rico only, enter m	thCate Complete the applicable item/s	iplain management ordinance can complete and sign below. Check the measurement
G1. The information in Section C was taken from engineer, or architect who is authorized by data in the Comments area below.)	om other documentation that has been law to certify elevation information. (In	signed and sealed by a licensed surveyor, indicate the source and date of the elevation
G2. A community official completed Section E or Zone AO.	for a building located in Zone A (witho	ut a FEMA-issued or community-issued BFE)
G3. The following information (Items G4–G10)	is provided for community floodplain r	nanagement purposes.
G4. Permit Number G5.	Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
	v Construction ☐ Substantial Improve	ment
G8. Elevation of as-built lowest floor (including base of the building:	ement)	feet meters Datum
G9. BFE or (in Zone AO) depth of flooding at the bu	ilding site:	feet meters Datum
G10. Community's design flood elevation:	***************************************	feet meters Datum
Local Official's Name	Title	
Community Name	Telephone	
Signature	Date	
Comments (including type of equipment and location,	per C2(e), if applicable)	
		,
		·
	,	
		Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, cop Building Street Address (including Ap 11589 EASY STREET	FOR INSURANCE COMPANY USE Policy Number:		
City	State	ZIP Code	Company NAIC Number
GULFPORT	Mississippi	39503	

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 10/08/2019



Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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

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. 11589 EASY STREET			FOR INSURANCE COMPANY USE Policy Number:
City	State	ZIP Code	Company NAIC Number
GULFPORT	Mississippi	39503	

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.

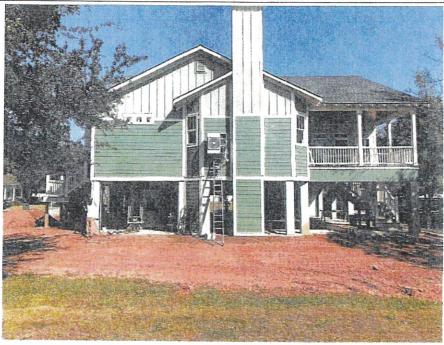


Photo One

Photo One Caption RIGHT SIDE VIEW 10/08/2019



Photo Two

Photo Two Caption LEFT SIDE VIEW 10/08/2019