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

OMB No. 1660-0008 Expiration Date: November 30, 2022

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 | INFOR | MATION | | FOR INSUR | ANCE COMPANY USE | |
|--|---|---------|------------------------------------|----------------------|-----------------------------------|---|--|
| A1. Building Owner's Name J.W. Mitchell | | | | | Policy Numb | der: | |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 12235 Sunshine Lane | | | | | Company N | AIC Number: | |
| City Gulfport | | *: | State Mississip | A | ZIP Code 39503 | | |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 29, Retreat Village S/D, Tax Parcel # 1008G-02-101.000 | | | | | | | |
| A4. Building Use (e.g., Re | A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential | | | | | | |
| A5. Latitude/Longitude: | A5. Latitude/Longitude: Lat. 30*27'48.1" Long. 089*00'54.0" Horizontal Datum: NAD 1927 NAD 1983 | | | | | | |
| A6. Attach at least 2 phot | A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. | | | | | | |
| A7. Building Diagram Nur | nber5 | | | | | | |
| A8. For a building with a d | crawlspace or enclosure(s): | | | | | | |
| a) Square footage of | crawlspace or enclosure(s) | | | 0.00 sq ft | | | |
| | ent flood openings in the cr | | | e(s) within 1.0 foot | above adjacent gra | ide 0 | |
| c) Total net area of flo | c) Total net area of flood openings in A8.b 0.00 sq in | | | | | | |
| d) Engineered flood of | ppenings? Yes X | 10 | | | | | |
| A9. For a building with an attached garage: | | | | | | | |
| a) Square footage of attached garage o.00 sq ft | | | | | | | |
| b) Number of perman | b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0 | | | | | | |
| c) Total net area of flo | c) Total net area of flood openings in A9.b 0.00 sq in | | | | | | |
| d) Engineered flood openings? Yes No | | | | | | | |
| SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION | | | | | | | |
| B1. NFIP Community Name & Community Number B2. County Name B3. State | | | | | | | |
| City of Gulfport 285253 | 00000000000000000000000000000000000000 | | Harrison | | | Mississippi | |
| B4. Map/Panel B5. S Number | uffix B6. FIRM Index Date | Effe | IRM Panel ective/ vised Date | B8. Flood Zone(s) | B9. Base Flood E (Zone AO, use | I levation(s) e Base Flood Depth) | |
| 28047C0260 H | 12-21-2017 | 12-21-2 | | AE | 17 | ā . | |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: FIS Profile X FIRM Community Determined Other/Source: | | | | | | | |
| B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source: | | | | | | | |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No | | | | | | | |
| Designation Date: CBRS OPA | | | | | | | |
| _ | | | ш | | | | |

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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. 12235 Sunshine Lane | | | | Policy Number: | | | |
| City State ZIP Code Gulfport Mississippi 39503 | | | | | Company NAIC Number | | |
| | SECTION C - BUILDING ELE | VATION INFORMAT | ION (SURVEY RI | EQUIRED) | | | |
| *A C2. El | uilding elevations are based on: Construction new Elevation Certificate will be required when co evations – Zones A1–A30, AE, AH, A (with BFE), Normplete Items C2.a–h below according to the build | nstruction of the buildi /E, V1-V30, V (with B | FE), AR, AR/A, AR/ | /AE, AR/A1 | – –A30, <i>F</i> | | |
| | enchmark Utilized: Gpt BM #2410 | Vertical Datum: | | .0 11100 0111 | , enter | motors. | |
| In | dicate elevation datum used for the elevations in its | , , | W. | | | | |
| Da | atum used for building elevations must be the same | as that used for the E | BFE. | Check | the me | easurement used. | |
| a) | Top of bottom floor (including basement, crawlspa | ace, or enclosure floor |) | 19.2 | feet | meters | |
| b) | Top of the next higher floor | | No. of the second second | N/A | { feet | meters | |
| c) | Bottom of the lowest horizontal structural member | (V Zones only) | | N/A | { feet | meters | |
| ď | Attached garage (top of slab) | | ă | N/A | feet | meters meters | |
| e) | Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Com | icing the building ments) | | 19.2 | g feet | meters | |
| f) | Lowest adjacent (finished) grade next to building | (LAG) | | 4.5 | { feet | meters meters | |
| g) | Highest adjacent (finished) grade next to building | (HAG) | | 4.8 | √ feet | meters meters | |
| h) | Lowest adjacent grade at lowest elevation of decl structural support | or stairs, including | #:W | 4.9 | ₹ feet | meters | |
| SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION | | | | | | | |
| I certif | ertification is to be signed and sealed by a land sur that the information on this Certificate represents ent may be punishable by fine or imprisonment un | my best efforts to inte | rpret the data avails | y law to ce able. I unde | tify eleverstand | vation information. that any false | |
| Were I | atitude and longitude in Section A provided by a lic | ensed land surveyor? | ⊠Yes □ No | Ch | eck her | re if attachments. | |
| | or's Name C. Booth, Jr. | License Number PLS-02666 | | Á | 555G | . BOO | |
| Title Profes | sional Land Surveyor | | | a s | | ace PROFE | |
| | any Name our Engineering, PLLC | | | | | RVEYOR | |
| Addres 925 To | ss ommy Munro Drive Suite G | | | Way. | A B | 6.12666 | |
| City Biloxi | | State Mississippi | ZIP Code 39532 | | EO | FMSSISS | |
| Signat | Jet Sool | Date 11-12-2020 | Telephone (228) 385-2350 | Ext. 111 | | | |
| Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner. | | | | | | | |
| The Ci | ty of Gulfport requires 1 foot of freeboard above the hmark (60d nail) was set in a power pole in front or vest elevation of equipment servicing in C2 e) is the | Base Flood Elevation 6. | 00 feet. | 2 2 2 | | | |
| S20-10 | 0-014 EC3 | | | | | | |

ELEVATION CERTIFICATE

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| IMPORTANT: In these spaces, copy the corresponding information from Se | FOR INSURANCE COMPANY USE | | | | | |
|--|---|--|--|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Roi 12235 Sunshine Lane | ute and Box No. | Policy Number: | | | | |
| CityStateZIPGulfportMississippi395 | Code 603 | Company NAIC Number | | | | |
| 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 in complete Sections A, B, and C. For Items E1–E4, use natural grade, if available, enter meters. | ntended to support a Check the measure | LOMA or LOMR-F request, ment used. In Puerto Rico only, | | | | |
| 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 ☐ mete | rs 🔲 above or 🔲 below the HAG. | | | | |
| b) Top of bottom floor (including basement, crawlspace, or enclosure) is | ☐ feet ☐ mete | rs 🔲 above or 🔲 below the LAG. | | | | |
| E2. For Building Diagrams 6-9 with permanent flood openings provided in Section 1. | ion A Items 8 and/or | 9 (see pages 1–2 of Instructions), | | | | |
| the next higher floor (elevation C2.b in the diagrams) of the building is | feet mete | rs above or below the HAG. | | | | |
| E3. Attached garage (top of slab) is | feet mete | rs 🔲 above or 🔲 below the HAG. | | | | |
| E4. Top of platform of machinery and/or equipment servicing the building is | ☐ feet ☐ mete | rs 🔲 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. | | | | | | |
| community-issued BFE) or Zone AO must sign here. The statements in Sections | A, B, and E are co | rrect to the best of my knowledge. | | | | |
| community-issued BFE) or Zone AO must sign here. The statements in Sections Property Owner or Owner's Authorized Representative's Name | s A, B, and E are co | rrect to the best of my knowledge. | | | | |
| community-issued BFE) or Zone AO must sign here. The statements in Sections | s A, B, and E are co | tate ZIP Code | | | | |
| community-issued BFE) or Zone AO must sign here. The statements in Sections Property Owner or Owner's Authorized Representative's Name | S A, B, and E are co | rrect to the best of my knowledge. | | | | |
| community-issued BFE) or Zone AO must sign here. The statements in Sections Property Owner or Owner's Authorized Representative's Name Address City | S A, B, and E are co | tate ZIP Code | | | | |
| community-issued BFE) or Zone AO must sign here. The statements in Sections Property Owner or Owner's Authorized Representative's Name Address City Signature Date | S A, B, and E are co | tate ZIP Code | | | | |
| community-issued BFE) or Zone AO must sign here. The statements in Sections Property Owner or Owner's Authorized Representative's Name Address City Signature Date | S A, B, and E are co | tate ZIP Code | | | | |
| community-issued BFE) or Zone AO must sign here. The statements in Sections Property Owner or Owner's Authorized Representative's Name Address City Signature Date | S A, B, and E are co | tate ZIP Code | | | | |
| community-issued BFE) or Zone AO must sign here. The statements in Sections Property Owner or Owner's Authorized Representative's Name Address City Signature Date | S A, B, and E are co | tate ZIP Code | | | | |
| community-issued BFE) or Zone AO must sign here. The statements in Sections Property Owner or Owner's Authorized Representative's Name Address City Signature Date | S A, B, and E are co | tate ZIP Code | | | | |
| community-issued BFE) or Zone AO must sign here. The statements in Sections Property Owner or Owner's Authorized Representative's Name Address City Signature Date | S A, B, and E are co | tate ZIP Code | | | | |
| community-issued BFE) or Zone AO must sign here. The statements in Sections Property Owner or Owner's Authorized Representative's Name Address City Signature Date | S A, B, and E are co | tate ZIP Code | | | | |
| community-issued BFE) or Zone AO must sign here. The statements in Sections Property Owner or Owner's Authorized Representative's Name Address City Signature Date Comments | S A, B, and E are co | tate ZIP Code | | | | |
| community-issued BFE) or Zone AO must sign here. The statements in Sections Property Owner or Owner's Authorized Representative's Name Address City Signature Date Comments | S A, B, and E are co | tate ZIP Code | | | | |
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| community-issued BFE) or Zone AO must sign here. The statements in Sections Property Owner or Owner's Authorized Representative's Name Address City Signature Date Comments | S A, B, and E are co | tate ZIP Code | | | | |
| community-issued BFE) or Zone AO must sign here. The statements in Sections Property Owner or Owner's Authorized Representative's Name Address City Signature Date Comments | S A, B, and E are co | tate ZIP Code | | | | |

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| IMPORTANT: In these spaces, copy the corre | sponding information from Section A. | FOR INSURANCE COMPANY USE |
|--|--|--|
| Building Street Address (including Apt., Unit, Su 12235 Sunshine Lane | No. Policy Number: | |
| City | Company NAIC Number | |
| Gulfport | State ZIP Code Mississippi 39503 | |
| SECTIO | N G - COMMUNITY INFORMATION (OPTIO | NAL) |
| The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en | Certificate, Complete the applicable item(s) as | ain management ordinance can complete nd sign below. Check the measurement |
| G1. The information in Section C was take engineer, or architect who is authoriz data in the Comments area below.) | en from other documentation that has been sig ed by law to certify elevation information. (Indi | gned and sealed by a licensed surveyor, cate the source and date of the elevation |
| G2. A community official completed Section Zone AO. | on E for a building located in Zone A (without a | a FEMA-issued or community-issued BFE) |
| G3. The following information (Items G4- | G10) is provided for community floodplain mai | nagement purposes. |
| G4. Permit Number | G5. Date Permit Issued | G6. Date Certificate of Compliance/Occupancy Issued |
| G7. This permit has been issued for: |]New Construction | ent |
| G8. Elevation of as-built lowest floor (including of the building: | g basement) | feet meters Datum |
| G9. BFE or (in Zone AO) depth of flooding at | the building site: | feet meters Datum |
| G10. Community's design flood elevation: | P | ☐ feet ☐ meters Datum |
| Local Official's Name | Title | |
| Community Name | Telephone | |
| Signature | Date | |
| Comments (including type of equipment and lo | cation, per C2(e), if applicable) | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | Check here if attachments. |

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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| IMPORTANT: In these spaces, | FOR INSURANCE COMPANY USE | | |
|---|---------------------------|----------|---------------------|
| Building Street Address (includir 12235 Sunshine Lane | 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 Caption Front View taken 11-12-2020

Clear Photo One

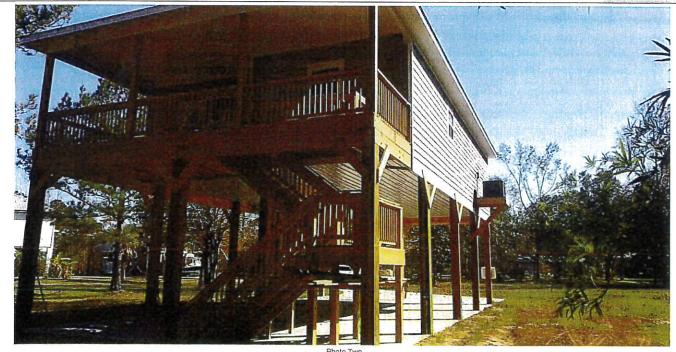


Photo Two Caption Rear view taken 11/12/2020

Clear Photo Two