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

ELEVATION CERTIFICATE

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

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 Richard Rose						Policy Nun		
A2. Building Street Address (including Apt., Unit, Sulte, and/or Bldg. No.) or P.O. Route and Box No.). Route and	Company	NAIC Numi	her:
12238 Rose Point Drive						Company	VIO Maine	JGI,
City Gulfport	Olale					ZIP Code 39503	Park State Company, Vision	
A3. Property Des Tax Parcel # 100	scription (Lot a 8G-02-001.00	and Block Numbers, Ta 22	ax Parc	el Number, Legal D	escription, etc.)			
A4. Building Use	(e.g., Reside	ntial, Non-Residential,	Additio	n, Accessory, etc.)	Residential			
		30*27'49.8"				n: [] NAD	1927 🔯	NAD 1083
		ohs of the building if the				ance.	702. <u>[</u>	1010 1000
A7. Building Diag				<u> </u>				
A8. For a building	with a crawls	space or enclosure(s):						
		ispace or enclosure(s)		0 saft				
b) Number of	permanent fl	ood openings in the cr	awlspa	ce or enclosure(s) v	vithin 1.0 foot above	adjacent or	ahe	0
c) Total net a	rea of flood o			sq in	110 1001 0000	adjacent gr		
		ngs? Yes 🗵 N						
A9. For a building			Ü					
		ned garage 0		sa ft				
		55 (89,000)		/3 A/A				
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0								
c) Total net area of flood openings in A9.b 0 sq in								
d) Engineered flood openings? Yes No								
The state of the s	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMA	FION		
B1, NFIP Commun	ity Name & C	ommunity Number		B2. County Name			B3. State	1
Gulfport, MS 2852	53			Harrison			Mississippi	
34. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. F	IRM Panel	B8. Flood Zone(s)	B9. Bas	e Flood Ele	evation(s)
28047C0260	G	3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	R	fective/ evised Date	9	(Zor	ne AO, use od Depth)	
	G	06/16/2009	06/16	/2009	AE	17		
B10. Indicate the se	ource of the F	Base Flood Elevation (E)EE/ 4	to as been fleet to				
☐ FIS Profile	⊠ FIRM [☐ Community Determ	ined [ala or base flood de 7 Other/Source:	ptn entered in Item	B9;		
			573	_				
B11. Indicate eleva	tion datum us	ed for BFE in Item B9:	□ N0	GVD 1929 ⊠ NA	VD 1988 Oth	er/Source: _		
B12. Is the building	located in a	Coastal Barrier Resour	ces Sy	stem (CBRS) area	or Otherwise Protec	ted Area (C	IPAI2 IT V	/on V No
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes X No Designation Date:								
	About the state of			one one				
MA Comp 000 0 00	/714 CV							

ELEVATION CERTIFICATE

	¥.,	
种物的有种的	, ,	ia, o

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

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, St 12238 Rose Point Drive	ite, and/or Bidg. No.) or P.O. Ro	ute and Box No.	Policy Number:
City Gulfpoit		Code	Company NAIC Number
SECTION C - BUIL	DING ELEVATION INFORMA	TION (SURVEY R	EQUIREDI
C1. Building elevations are based on: C2. *A new Elevation Certificate will be require C2. Elevations – Zones A1–A30, AE, AH, A (v Complete Items C2.a–h below according to Benchmark Utilized; GPT BM# 2411 Indicate elevation datum used for the elevation.	Construction Drawings*	Iding Under Construing is complete. IFE), AR, AR/A, AR/ In Item A7. In Puert : NAVD 1988	ction* 🗵 Finished Construction
☐ NGVD 1929 ☐ NAVD 1988 [Other/Source:		and you fill be as the baddings of the fill The Antalog Call B. O. Salbatian
Datum used for building elevations must b		3FE.	Chack the management of the d
 a) Top of bottom floor (Including basemer b) Top of the next higher floor c) Bottom of the lowest horizontal structur d) Attached garage (top of slab) 	nt, crawlapace, or enclosure floor	20. 5 N/A, N/A	Check the measurement used. Feet meters
 b) Lowest elevation of machinery or equip (Describe type of equipment and location) 	ment servicing the building on in Comments)	20, 1	⊠ feet ☐ meters
f) Lowest adjacent (finished) grade next to	o buliding (LAG)	4,9	X feet meters
g) Highest adjacent (finished) grade next	io building (HAG)	<u>5, 5</u>	X feet meters
 h) Lowest adjacent grade at lowest elevat structural support 	ion of deck or stairs, including	5.0	I meters
SECTION D - SUR	VEYOR, ENGINEER, OR ARC	CHITECT CERTIFI	CATION
This certification is to be signed and sealed by a factify that the information on this Certificate restatement may be punishable by fine or impriso Were latitude and longitude in Section A provide	a land surveyor, engineer, or arc opresents my best efforts to inter nment under 18 U.S. Code, Sec.	hitect authorized by pret the data availal tion 1001. XYes No	
Certifier's Name			⊠ Check here if attachments.
James C. Booth, Jr.	License Number PS-02666	range en	655 - 40h
Title Professional Land Surveyor			- Property of the second of th
Company Name Seymour Engineering, LLC		112.5	
Address 925 Tommy Munro Drive Suite "G"			- Marie 2003
City Biloxi	State Mississippi	ZIP Code 39532	
Signature	Date 05/17/2017	Telephone (228) 385-2350	
Copy all pages of this Elevation Certificats and all	attachments for (1) community off	icial, (2) insurance a	gent/company, and (3) building owner.
Comments (including type of equipment and local The lowest elevation of equipment servicing in C	ation, per C2(e), If applicable)		the state of the s
$\label{eq:constraints} (x,y,y,z) = (x,y,z) + (x,z) + (x,z)$	e de la companya de		
\$06-10-071 Rose Point EC3 2017			e di
All manufactures of the state o		TOTAL VIEW AND	·

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6,

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

First the description of the land			Evhicanou para, Movembet 20, 20.18
IMPORTANT: In these spaces, copy the corres	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Sui 12238 Rose Point Drive	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.

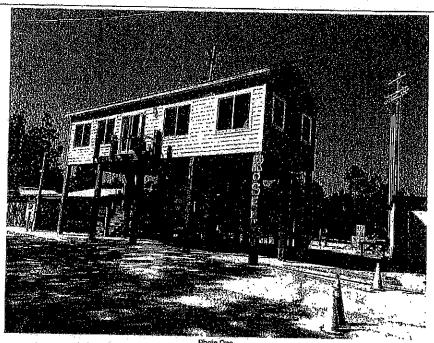


Photo One Caption Front View taken 05/17/2017



Photo Two Caption Rear View taken 05/17/2017