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.

| | | | | FOR INSUF | RANCE COMPANY USE | | |
|--|----------------|--|----------|--|-----------------------|--------------|---|
| A1. Building Owner's Name Eddie R. Knox | | | | | Policy Num | ber: | |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 208 Murphy Avenue | | | | Route and | Company N | AIC Number: | |
| City State Gulfport Mississippi | | | | | ZIP Code 39507 | | |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PIDN: 0911B-02-032.000, Lot 8, Block 2, Gulf View Addition | | | | | | | |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential | | | | | | | |
| A5. Latitude/Longi | tude: Lat. N | 30d22'45.2" | _ong. V | V 089d02'49.4" | Horizontal Datum | : | 927 × NAD 1983 |
| A6. Attach at least | 2 photograpl | hs of the building if the | Certific | cate is being used to | o obtain flood insura | ince. | |
| A7. Building Diagra | am Number | 5 | | | | | |
| A8. For a building | with a crawls | pace or enclosure(s): | | | | | |
| a) Square foo | tage of crawls | space or enclosure(s) | | 0 sq ft | | | |
| b) Number of | permanent flo | ood openings in the cra | wlspac | e or enclosure(s) w | rithin 1.0 foot above | adjacent gra | ade0 |
| c) Total net ar | ea of flood op | penings in A8.b0 | S | sq in | | | |
| d) Engineered | flood openin | gs? 🗌 Yes 🗵 No |) | | | | |
| A9. For a building with an attached garage: | | | | | | | |
| a) Square footage of attached garage sq ft | | | | | | | |
| 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 | | | | | | | |
| SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION | | | | | | | |
| B1. NFIP Communi | | THE RESERVE THE PROPERTY OF TH | | B2. County Name | | | B3. State |
| Gulf | port 2 | 85253 | | Harrison | | | Mississippi |
| B4. Map/Panel Number | B5. Suffix | B6. FIRM Index Date | E | IRM Panel fective/ | B8. Flood Zone(s) | (Zor | e Flood Elevation(s) ne AO, use Base |
| 28047C0268 | G | 12/21/2017 | | evised Date 6/16/2009 | "AE" | Floo | od Depth) 19 |
| 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 Determi | | | | | | | |
| B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 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 | | | | | | | |
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| IMPORTANT: In these spaces, copy the corresponding | FOR INSURANCE COMPANY USE | | | | |
|--|--|---|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or 208 Murphy Avenue | Policy Number: | | | | |
| City Star Gulfport Mis | e ZIP Code issippi 39507 | | Company NAIC Number | | |
| SECTION C BUILDING EL | EVATION INFORMA | TION (SURVEY RI | EQUIRED) | | |
| C1. Building elevations are based on: Construction* Construction* Certificate will be required when construction of the Elevations — Zones A1—A30, AE, AH, A (with BFE), Complete Items C2.a—h below according to the build Benchmark Utilized: Static GPS Observation Indicate elevation datum used for the elevations in it | on Drawings* Build Dinstruction of the building VE, V1–V30, V (with Building diagram specified Vertical Datum: ems a) through h) belowed bource: e as that used for the Eace, or enclosure floor (V Zones only) Tricing the building ments) (LAG) (HAG) | ding Under Construing Is complete. FE), AR, AR/A, AR/ in Item A7. In Puert NAVD 1988 w. BFE. 1 25. 7 N/A N/A N/A 15. 1 15. 1 | Check the measurement used. Check the meters | | |
| h) Lowest adjacent grade at lowest elevation of dec structural support | k or stairs, including | <u>15, 5</u> | X feet meters | | |
| SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION | | | | | |
| This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment und Were latitude and longitude in Section A provided by a lice | my best efforts to inter der 18 U.S. Code, Sec | pret the data availa tion 1001. | law to certify elevation information. ble. I understand that any false Check here if attachments. | | |
| Certifier's Name Timothy L. Glass P.L.S Title Professional Land Surveyor | License Number Ms Reg. # 02584 | | PROFESSION OF THE PROPERTY OF | | |
| Company Name Glass Land Surveying, Inc. Address 10453 Pin Oak Drive City Biloxi | State Mississippi | ZIP Code 39532 | Place Place Seal Place P | | |
| Copy all pages of this Elevation Contilicate and all attachmer Comments (including type of equipment and location, per Elevations shown hereon are derived from static GPS obs www.ngs.noaa.gov. Datum NAVD 1988 (Computed using | C2(e), if applicable) ervation and OPUS so | | | | |
| Item C2(e) denotes A/C. | | | | | |

ELEVATION CERTIFICATE

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| IMPORTANT: In these spaces, copy the corres | ponding information | from Section A. | FOR INSURA | NCE COMPANY USE |
|--|--|--|--|--|
| Building Street Address (including Apt., Unit, Suit 208 Murphy Avenue | e, and/or Bldg. No.) or | P.O. Route and Box No | . Policy Number | |
| City Gulfport | State Mississippi | ZIP Code 39507 | Company NA | IC Number |
| SECTION E – BUILDIN FOR | G ELEVATION INFO ZONE AO AND ZON | RMATION (SURVEY) E A (WITHOUT BFE) | NOT REQUIRED) | |
| For Zones AO and A (without BFE), complete Iter complete Sections A, B,and C. For Items E1–E4, enter meters. | ns E1–E5. If the Certif use natural grade, if a | icate is intended to supp vailable. Check the mea | ort a LOMA or LOM surement used. In F | IR-F request, Puerto Rico only, |
| E1. Provide elevation information for the following the highest adjacent grade (HAG) and the loval a) Top of bottom floor (including basement, | g and check the appro west adjacent grade (I | priate boxes to show wh .AG). | ether the elevation | is above or below |
| crawlspace, or enclosure) is b) Top of bottom floor (including basement, | | [] feet [] n | neters 🔲 above o | or below the HAG. |
| crawlspace, or enclosure) is | | feet 🗌 n | <u></u> | or 🗌 below the LAG. |
| E2. For Building Diagrams 6–9 with permanent flo the next higher floor (elevation C2.b in the diagrams) of the building is | ood openings provided | d in Section A Items 8 an | | l–2 of Instructions), or □ below the HAG. |
| E3. Attached garage (top of slab) is | | | | or Delow the HAG. |
| E4. Top of platform of machinery and/or equipme servicing the building is | nt | | | or below the HAG. |
| E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes | ailable, is the top of th | | n accordance with t | he community's |
| SECTION F - PROPERTY | OWNER (OR OWNE | R'S REPRESENTATIVE | CERTIFICATION | <u> </u> |
| The property owner or owner's authorized represe community-issued BFE) or Zone AO must sign her | ntative who completes | Scotions A. D. and E.fa | n Zono A Authort | FFAAR towns at a |
| Property Owner or Owner's Authorized Representa | | | - Corrock to the best | or my knowledge. |
| Address | ĺ | Dity | State Mississippi | ZIP Code |
| Signature | [| Date | Telephone | · · · · · · · · · · · · · · · · · · · |
| Comments | | | · · · · · · · · · · · · · · · · · · · | |
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| | | | ☐ Check | here if attachments. |

ELEVATION CERTIFICATE

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| IMPORTANT: In these spaces, copy the c | FOR INSURANCE COMPANY USE | | |
|---|---|---|---|
| Building Street Address (including Apt., Unit 208 Murphy Avenue | Policy Number: | | |
| City | State ZII | | |
| Gulfport | . — | P Code 1507 | Company NAIC Number |
| SEC | TION G COMMUNITY INFORMA | TION (OPTIONAL) | |
| The local official who is authorized by law o Sections A, B, C (or E), and G of this Eleva used in Items G8–G10. In Puerto Rico only, | r ordinance to administer the comm | | nagement ordinance can complete below. Check the measurement |
| G1. The information in Section C was engineer, or architect who is authodata in the Comments area below | taken from other documentation tha orized by law to certify elevation info .) | t has been signed ar rmation. (Indicate th | nd sealed by a licensed surveyor, e source and date of the elevation |
| G2. A community official completed Se or Zone AO. | ection E for a building located in Zor | ne A (without a FEMA | A-issued or community-issued BFE) |
| G3. The following information (Items G | G4–G10) is provided for community t | loodplain manageme | ent purposes. |
| G4. Permit Number | G5. Date Permit Issued | G6. C | Date Certificate of compliance/Occupancy Issued |
| G7. This permit has been issued for: | ☐ New Construction ☐ Substant | ial Improvement | |
| G8. Elevation of as-built lowest floor (includ of the building: | ling basement) | feet | meters |
| G9. BFE or (in Zone AO) depth of flooding a | at the building site: | [] feet | meters Datum |
| G10. Community's design flood elevation: | | feet | meters Datum |
| _ocal Official's Name | Title | | |
| Community Name | Telepho | ne | |
| Signature | Date | | · |
| Comments (including type of equipment and I | ocation, per C2(e), if applicable) | *** | |
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| | | | Check here if attachments. |

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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|--|--|-------------------|---------------------|
| Building Street Address (including Apt., Unit, 208 Murphy Avenue | | | |
| City Gulfport | State Mississippi | ZIP Code 39507 | 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"

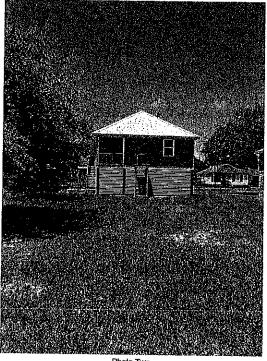


Photo Two

"REAR VIEW"

Photo Two Caption

FEMA Form 086-0-33 (7/15)

Replaces all previous editions.

Form Page 5 of 6

BUILDING PHOTOGRAPHS OMB No. 1660-0008 **ELEVATION CERTIFICATE** Continuation Page 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 Bidg. No.) or P.O. Route and Box No. Policy Number: 208 Murphy Avenue City State ZIP Code Company NAIC Number Gulfport Mississippi 39507 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 Photo One Caption Photo Two

FEMA Form 086-0-33 (7/15)

Photo Two Caption

Photo Two