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 INFORMATION FOR INS					FOR INSU	RANCE COMPANY USE	
A1. Building Own Greg Smith	er's Name					Policy Num	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3931 Washington Avenue					Company N	IAIC Number	
City Gulfport				State Mississi	0.43 • 0.57 (0.44)	ZIP Code 39507	
Lot 4, Pinewood S	ubdivision, C	and Block Numbers, Ta City of Gulfport, Harriso	ax Parce on Count	el Number, Le y, Mississippi	gal Description, et , Tax Parcel# 0910	c.) 0k-01-001.004	"
A4. Building Use	(e.g., Reside	ntial, Non-Residential,	Addition	, Accessory,	etc.) Residentia	al	
A5. Latitude/Long	itude: Lat. 3	0°23'54.80" N	Long. 8	9°03'09.41" V	V Horizonta	I Datum: NAD 1	1927 NAD 1983
A6. Attach at leas	t 2 photograp	ohs of the building if th	e Certific	cate is being i	used to obtain floo	d insurance.	
A7. Building Diagr	am Number	5					
A8. For a building	with a crawls	space or enclosure(s):					
a) Square foo	tage of craw	lspace or enclosure(s))		N/A sq ft		
b) Number of	permanent fl	ood openings in the cr	awlspac	e or enclosur	e(s) within 1.0 foot	above adjacent gra	ade N/A
		penings in A8.b		N/A sq ir			
d) Engineered flood openings?							
A9. For a building v	vith an attacl	ned garage:					
a) Square foot	a) Square footage of attached garage N/A sq ft						
b) Number of p	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A						
c) Total net area of flood openings in A9.b N/A sq in							
d) Engineered flood openings? Yes No							
SECTION B. ELOOD INCLIDANCE DATE MAD (FIDNI) INCODAS TION							
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name B3. State							
City of Gulfport #28		, , , , , , , , , , , , , , , , , , , ,		Harrison	Name		Mississippi
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ rised Date	B8. Flood Zone(s)	B9. Base Flood El (Zone AO, use	levation(s) e Base Flood Depth)
28047C0268	G	12-21-2017	06-16-2		"AE"	14'	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:							
☐ FIS Profile ☑ FIRM ☐ Community Determined ☐ Other/Source:							
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 DPA							

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IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/ 3931 Washington Avenue	Policy Number:			
	tate ZI	P Code	Company NAIC Number	
Gulfport	ississippi 39	9507		
SECTION C – BUILDING E	LEVATION INFORMA	ATION (SURVEY R	EQUIRED)	
		uilding Under Constru	uction* Finished Construction	
*A new Elevation Certificate will be required when				
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE) Complete Items C2.a–h below according to the bu Benchmark Utilized: GPS Trimble VRS network G	ilding diagram specified	d in Item A7. In Puert	/AE, AR/A1–A30, AR/AH, AR/AO. to Rico only, enter meters.	
Indicate elevation datum used for the elevations in	items a) through h) bel	low.		
☐ NGVD 1929 ※ NAVD 1988 ☐ Other				
Datum used for building elevations must be the sar	me as that used for the	BFE.	Check the measurement used.	
 a) Top of bottom floor (including basement, crawls 	space, or enclosure floo	or)	19.1 feet meters	
b) Top of the next higher floor			N/A feet meters	
c) Bottom of the lowest horizontal structural memb	per (V Zones only)		N/A feet meters	
d) Attached garage (top of slab)	er so . Verral usosa usopen, messas .		N/A feet meters	
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)			18.8 X feet meters	
f) Lowest adjacent (finished) grade next to building (LAG)			7.8 X feet meters	
g) Highest adjacent (finished) grade next to buildir	ng (HAG)		8.4 X feet meters	
 h) Lowest adjacent grade at lowest elevation of de structural support 	ck or stairs, including		7.2 X 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 l			○ Check here if attachments.	
Certifier's Name	License Number		SSECONIII ON	
Gene Paul Stenum PLS #02752			A SECTION OF SECTION O	
Title Land Surveyor			1000	
Company Name			SURVEY	
Stenum Surveying, LLC			A CONTRACTOR OF THE PARTY OF TH	
Address 8593 W. Oaklawn Rd.	Alere			
City Biloxi	State	ZIP Code	1 / MISS 20 20	
	Mississippi	39532	8-10	
Signature Additional Signature	Date 08-18-2020	Telephone (228) 392-5552	Ext.	
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.				
Comments (including type of equipment and location, per C2(e), if applicable)				
Comments (including type of equipment and location, pe		, ()		
Comments (including type of equipment and location, pe		, ()		
Comments (including type of equipment and location, pe				
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ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the correspond			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and 3931 Washington Avenue	l/or Bldg. No.) or f	P.O. Route and Box No.	Policy Number:
0.15	State Mississippi	ZIP Code 39507	Company NAIC Number
SECTION E – BUILDING EL FOR ZONI	EVATION INFOR	RMATION (SURVEY NO A (WITHOUT BFE)	OT REQUIRED)
For Zones AO and A (without BFE), complete Items E1 complete Sections A, B,and C. For Items E1–E4, use n enter meters.	–E5. If the Certific atural grade, if av	ate is intended to suppor ailable. Check the measu	t a LOMA or LOMR-F request, rement used. In Puerto Rico only,
E1. Provide elevation information for the following and the highest adjacent grade (HAG) and the lowest a	check the approp	riate boxes to show whet .G).	her the elevation is above or below
Top of bottom floor (including basement, crawlspace, or enclosure) is		feet me	ters above or below the HAG.
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 	-	feet _ me	ters above or below the LAG.
E2. For Building Diagrams 6–9 with permanent flood of the next higher floor (elevation C2.b in	penings provided	n Section A Items 8 and	or 9 (see pages 1–2 of Instructions),
the diagrams) of the building is E3. Attached garage (top of slab) is			
E4. Top of platform of machinery and/or equipment servicing the building is		products typically to	
E5. Zone AO only: If no flood depth number is available	e, is the top of the	bottom floor elevated in	accordance with the community's
noodplain management ordinance? Yes	No Unknow	n. The local official mus	st certify this information in Section G.
SECTION F - PROPERTY OWN	IER (OR OWNER	S REPRESENTATIVE)	CERTIFICATION
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The property of the community-issued BFE or Zone AO must sign here.	e statements in S	Sections A, B, and E for ections A, B, and E are c	Zone A (without a FEMA-issued or correct to the best of my knowledge.
Property Owner or Owner's Authorized Representative's	s Name		
Address	Ci	ty	State ZIP Code
Signature	Da	ite	Telephone
Comments		, , , , , , , , , , , , , , , , , , ,	
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ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corr			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, S 3931 Washington Avenue	uite, and/or Bidg. No.) or F	O. Route and Box No.	Policy Number:
City Gulfport	State Mississippi	ZIP Code 39507	Company NAIC Number
SECTION	ON G - COMMUNITY INFO	ORMATION (OPTIONAL)	
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, er	n Certificate. Complete the	community's floodplain mar applicable item(s) and sign	nagement ordinance can complete below. Check the measurement
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)	en from other documentat ed by law to certify elevati	ion that has been signed ar on information. (Indicate the	nd sealed by a licensed surveyor, e source and date of the elevation
G2. A community official completed Sect or Zone AO.	ion E for a building located	in Zone A (without a FEM/	A-issued or community-issued BFE)
G3. The following information (Items G4-	-G10) is provided for comn	nunity floodplain manageme	ent purposes.
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	New Construction Su	ubstantial Improvement	
G8. Elevation of as-built lowest floor (including of the building:	j 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:			meters Datum
Local Official's Name	Т	itle	
Community Name	Tı	elephone	
Signature	D	ate	
Comments (including type of equipment and loc 1.) Elevation reported in Section C2(a) is the fin C2(e) is the elevation of elevated air conditioner columns with living floor approximately 10 feet a	ish floor elevation of eleva r deck on south side of res above existing ground, with	ated living floor of the reside sidence. The residence is all no enclosures beneath the	n elevated structure on pilings/ e living floor.
2.) Residence lies within Floodzone "AE" with a			
 Elevations reported in Section C2(f) and Sec additional vertical ties were made to City of Gulf certificate. 	tion C2(g) are based on G port Supplement Benchma	iPS observations obtained ark #S-269-07 and Benchm	on-site using referenced network and nark #S-270-07, at time of this
4.) The elevation of the top of the slab below the	elevated living floor is 9.0) ['] .	
			·
			⊠ Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding information from Section A.			
ot., Unit, Suite, and/or Bldg. No.) o	r P.O. Route and Box No.	FOR INSURANCE COMPANY USE Policy Number:	
State	ZIP Code	Company NAIC Number	
Mississippi	39507	Company to the Humber	
	ot., Unit, Suite, and/or Bldg. No.) o State	ot., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. State ZIP Code	

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 of Residence, Lot 4, Pinewood Subdivision, looking West. Aug. 14, 2020

Clear Photo One

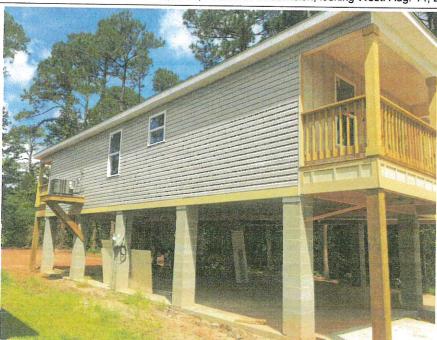


Photo Two

Photo Two Caption

South view of Residence, Lot 4, Pinewood Subdivision, looking Northwest. Aug. 14, 2020

BUILDING PHOTOGRAPHS

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Continuation Page Expiration Date: November 30, 2022

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. 3931 Washington Avenue City State ZIP Code Gulfport Mississippi 39507 Expiration Date: November 30, 2022 FOR INSURANCE COMPANY USE Policy Number: 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 Three

Photo Three Caption

ELEVATION CERTIFICATE

Rear view of Residence, Lot 4, Pinewood Subdivision, looking East. Aug. 14, 2020

Clear Photo Three



Photo Four

Photo Four Caption

North view of Residence, Lot 4, Pinewood Subdivision, looking South. Aug. 14, 2020

Clear Photo Four