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.

Gopy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

				FOR INSUR	RANCE COMPANY USE			
A1. Building Ow McDOUGALL							Policy Num	
A2. Building Stre Box No. 4109 CENTRAL:		ncluding Apt., Unit, Su	iite, and/	or Bldg. No.)	or P.O. Route	e and	Company N	IAIC Number:
City GULFPORT				State Mississ	ppi		ZIP Code 39501	see a j
A3. Property Des LOTS 7-9, BLOC	cription (Lot : K 2, BUENA	and Block Numbers, T VISTA SUBDIVISION	ax Parce PARCE	el Number, Le L 0711P-03-0	gal Descripti 20.000	on, etc.)		
A4. Building Use	(e.g., Reside	ential, Non-Residential	, Additio	n, Accessory,	etc.) RES	SIDENTIAL		<u> </u>
A5. Latitude/Long		•		39-06'37.4"			m: NAD 1	1927 🕅 NAD 1983
A6. Attach at leas	st 2 photogra	phs of the building if th	- ne Certifi	cate is being				
A7. Building Diag	ram Number	5						
Á8. For a building	with a crawl	space or enclosure(s)	:					
a) Square for	otage of craw	/Ispace or enclosure(s)	<u> </u>	0.00 sq f	t		
b) Number of	permanent fl	lood openings in the c	rawispac	e or enclosur	e(s) within 1.	0 foot above	adjacent gra	ide 0
c) Total net a	rea of flood o	penings in A8.b		1 ps 00.0	1			
d) Engineere	d flood openi	ngs? 🗌 Yes 🔲 I	No.	·		. '		
A9. For a building	with an attac	hed garage:				;		
a) Square foo	tage of attacl	hed garage		0.00 sq ft				
b) Number of	permanent fi	ood openings in the at	tached o	larage within	1.0 foot abov	e adiacent d	rade O	
		penings in A9.b				a millanames S		· · · · · · · · · · · · · · · · · · ·
		ngs? TYes Th	The state of the s	o	***			
.,g	nesa operiin	.90° □1.63 □1.	40					
	SE	CTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM)	INFORMA	TION	
		Community Number		B2. County				B3. State
CITY OF GULFPO	RT 285253			HARRISON				Mississippi
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	M Panel ective/ vised Date	B8. Flood Zone(s)	1 /~	ase Flood Ele Zone AO, use	evation(s) Base Flood Depth)
28047C-0376	G	12-21-2017	06-16-2		"AE"	19.0		
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 ☐ OPA								
								
								}

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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. 4109 CENTRAL STREET	Policy Number:				
City State ZIP Code GULFPORT Mississippi 39501	Company NAIC Number				
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					
C1. Building elevations are based on: Construction Drawings* Building Under Construction A new Elevation Certificate will be required when construction of the building is complete. C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/Complete Items C2.a—h below according to the building diagram specified in Item A7. In Puert Benchmark Utilized: GPS MS EAST USM NETWORK Vertical Datum: NAVD 88 Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 NAVD 1988 Other/Source: Datum used for building elevations must be the same as that used for the BFE. a) Top of bottom floor (including basement, crawlspace, or enclosure floor) b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (HAG)	uction* Finished Construction /AE, AR/A1–A30, AR/AH, AR/AÖ.				
Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	15.7 🛛 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 licensed land surveyor? Yes No Check here if attachments.					
Certifier's Name GARY A DURBIN Title PROFESSIONAL LAND SURVEYOR Company Name GARY A DURBIN, P.L.S. Address 2081 TRAILWOOD DRIVE City State Mississippi 39532 Signature Date 08-28-2020 (228) 365-3632 Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance Comments (including type of equipment and location, per C2(e), if applicable) SITE BENCHMARK PK NAIL IN ASPHALT ELEV=15.32 C2e AIR CONDITIONER ON PLATFORM EAST SIDE OF BUILDING	Seal Seal Seal Ext. agent/company, and (3) building owner.				

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IMPORTANT: In these spaces, copy the corresponding in	formation from Sec	tion A.	FOR INSURANCE	E COMPANY USE	
Bullding Street Address (including Apt., Unit, Suite, and/or B	ldg. No.) or P.O. Roul	te and Box No.	Policy Number:	-	
4109 CENTRAL STREET				<u> </u>	
City State GULFPORT Missis	ZIP (ssippi 3950	4.5	Company NAIC N	lumber	
SECTION E – BUILDING ELEVA FOR ZONE AO	TION INFORMATION AND ZONE A (WIT	N (SURVEY NO HOUT BFE)	(REQUIRED)		
For Zones AO and A (without BFE), complete Items E1–E5. complete Sections A, B,and C. For Items E1–E4, use natura enter meters.	If the Certificate is into grade, if available. C	ended to support heck the measur	a LOMA or LOMR-F ement used. In Puer	request, to Rico only,	
E1. Provide elevation information for the following and check the highest adjacent grade (HAG) and the lowest adjacent grade (HAG) and the lowest adjacent grade (HAG).	k the appropriate boxent grade (LAG).	es to show wheth	er the elevation is ab	oove or below	
a) Top of bottom floor (including basement, crawlspace, or enclosure) is		☐ feet ☐ mete	ers Dabove or D	below the HAG.	
b) Top of bottom floor (including basement, crawlspace, or enclosure) is		☐ feet ☐ mete		below the LAG.	
E2. For Building Diagrams 6–9 with permanent flood openin	as provided in Section			_	
the next higher floor (elevation C2.b in the diagrams) of the building is	go provided at decido	☐ feet ☐ mete		below the HAG.	
E3. Attached garage (top of slab) is		feet met		below the HAG.	
E4. Top of platform of machinery and/or equipment		·	-	<u> </u>	
servicing the building is		☐ feet ☐ mete		below the HAG.	
E5. Zone AO only: If no flood depth number is available, is the floodplain management ordinance? Yes No	he top of the bottom fl Unknown. The	oor elevated in a local official must	ccordance with the c certify this informati	ommunity's on in Section G.	
SECTION F - PROPERTY OWNER (OR OWNER'S REPR	ESENTATIVE) C	ERTIFICATION	1 1 1	
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.					
The property owner or owner's authorized representative who community-issued BFE) or Zone AO must sign here. The star	o completes Sections tements in Sections A	A, B, and E for Z , B, and E are co	one A (without a FEI rrect to the best of it	MA-issued or ny knowledge.	
The property owner or owner's authorized representative who community-issued BFE) or Zone AO must sign here. The state Property Owner or Owner's Authorized Representative's Nan	tements in Sections A	A, B, and E for Z , B, and E are co	one A (without a FEI rect to the best of in	MA-issued or ny knowledge.	
community-issued BFE) or Zone AO must sign here. The star	tements in Sections A	, B, and E are co	one A (without a FEI rrect to the best of in	MA-issued or ny knowledge. ZIP Code	
community-issued BFE) or Zone AO must sign here. The star Property Owner or Owner's Authorized Representative's Nan	tements in Sections A	, B, and E are co	rrect to the best of in	ný knowledge.	
community-issued BFE) or Zone AO must sign here. The star Property Owner or Owner's Authorized Representative's Nan Address	tements in Sections A	, B, and E are co	rrect to the best of in	ný knowledge.	
Property Owner or Owner's Authorized Representative's Nan Address Signature	tements in Sections A	, B, and E are co	rrect to the best of in	ný knowledge.	
Property Owner or Owner's Authorized Representative's Nan Address Signature	tements in Sections A	, B, and E are co	rrect to the best of in	ný knowledge.	
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Building Street Address (including Apt., Unit, Suite, and/or Bido 4109 CENTRAL STREET	g. No.) or P.O. Route and Box No.	Policy Number:
City State GULFPORT Mississi	ZIP Code ppi 39501	Company NAIC Number
SECTION G - COMMU	INITY INFORMATION (OPTIONAL)
The local official who is authorized by law or ordinance to adm Sections A, B, C (or E), and G of this Elevation Certificate. Cor used in Items G8–G10. In Puerto Rico only, enter meters.	Inister the community's floodplain n mplete the applicable item(s) and si	nanagement ordinance can complete gn below. Check the measurement
G1. The information in Section C was taken from other dengineer, or architect who is authorized by law to certain the Comments area below.)	rtify elevation information. (Indicate	the source and date of the elevation
G2. A community official completed Section E for a building of Zone AO.		The state of the s
G3. The following information (Items G4-G10) is provide	· · · · · · · · · · · · · · · · · · ·	
G4. Permit Number G5. Date Per	mit listued G6.	Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	tion Substantial Improvement	
G8. Elevation of as-built lowest floor (including basement) of the building:	fe	et 🗌 meters Datum
G9. BFE or (in Zone AO) depth of flooding at the building site:	🗖 fe	et meters Datum
G10. Community's design flood elevation:	[fe	et [] 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.

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Building Street Address (including 4109 CENTRAL STREET	Apt., Unit, Suite, and/or Bldg. No.) or	r P.O. Route and Box No.	Policy Number:
City	State Mississippi	ZIP Code 39501	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.

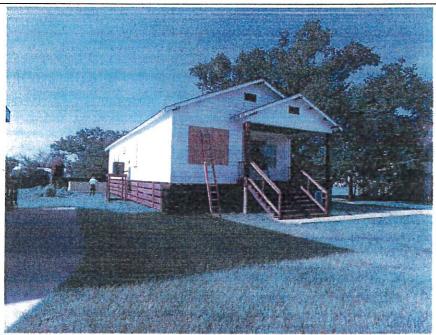


Photo One

Photo One Caption 08/28/2020 FRONT

Clear Photo One



Photo Two

Photo Two Caption FRONT

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including 4109 CENTRAL STREET	Apt., Unit, Suite, and/or Bldg. No.) o	r P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
GULFPORT	Mississippi	39501	

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 REAR

Clear Photo Three



Photo Four

Photo Four Caption REAR

Clear Photo Four