

Memo of Review For Correctness and Completion

The attached FEMA Elevation Certificate has been reviewed by this office.

The items noted below are not correct on the attached form and should read as entered on this page.

BUILDING ADDRESS MUST BE ENTERED

		SECTIO	N A - PROPERTY INFORMA	TION	T F	For Insurance Company Use:
A1. Building Owner's Name Dennis Chavers					Policy Number	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 615 Fournier Ave					Company NAIC Number	
City State Gulfport MS	ZIP Code 39501					
A3. Property Description (L	ot and Block Nu	mbers, Tax Parcel Num	nber, Legal Description, etc.)			
Lots 1,2, and 3 BI A4. Building Use (e.g., Res	OCK 8 Island	View Sub-divison	Pagany etal			
A5. Latitude/Longitude: La	at. 30 21'30.6	4" Long	-89 07'08.56W Horizo	ntal Datum:	□ NAD	1927 ⊠ NAD 1983
A6. Attach at least 2 photog A7. Building Diagram Numb	raphs of the buil er 1B	ding if the Certificate is	being used to obtain flood insurar	nce.	בו ואאט	1921 Ø MAD 1903
A8. For a building with a cra	wlspace or encl	osure(s):				
 a) Square footage of 	crawlspace or er	iclosure(s) N/A	sq ft		515150	
b) Number of permane	ent flood opening	is in the crawlspace or N/A	enclosure(s) within 1.0 foot above	adjacent grade _	N/A	
 c) Total net area of flo d) Engineered flood o 			sq in			
A9. For a building with an al	3	☐ Yes 🛣 No				
 a) Square footage of a 	ttached garage.	N/A	sq ft	N1/A		
b) Number of permane	ent flood opening	s in the attached garag	ge within 1.0 foot above adjacent g	radeN/A		
c) Total net area of flod) Engineered flood or			sq in			
d) Engineered flood of		ON P FLOOD INS	SUDANCE DATE MAD (FID	M INCORRA		
D. USID O			SURANCE RATE MAP (FIR	WI) INFORMAT	ION	
B1. NFIP Community Name City of Gulfport	& Community No 285253		2. County Name Harrison		B3. State MS	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index	B7. FIRM Panel	B8. Flood		Base Flood Elevation(s)
28047C 0376	G	Date 12-21-2020	Effective/Revised Date 06-16-2009	Zone(s) AE	(Zone	AO, use base flood depth)
B10. Indicate the source of	the Base Flood	levation (BFE) data or	base flood depth entered in Item	B9:	10	
☐ FIS Profile B11. Indicate elevation datu	☼ FIRM m used for BFF	☐ Community	Determined ☐ Other/So ☐ NGVD 1929 ☐ X NAVD 19	ource: Other	/Causas	
B12. Is the building located Designation Date:	in a Coastal Bar	rier Resources System	(CBRS) area or Otherwise Protection	ctedArea (OPA)?	/Source: _	□ Yes 🕱 No
and the second s	SECTION		EVATION INFORMATION (SIIDVEV DEO	IIIDED)	
C1. Building elevations are l		□ Construction		ler Construction*		
*A new Elevation Certif	cate will be requ	ired when construction	of the building is complete.	lei Construction	ш	Finished Construction
1000 : 11 11		The state of the s				
Local Official's Name Michae	el Edwards		Title CRS /CFM	1		
Community Name City of	Gulfport	79794	Telephone 228-868-5		-	
Signature Mike!	1 Edward	***************************************	Date 6-16-20			
Comments						110000000000000000000000000000000000000

B6 Correction Date



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.

SECTION A – PROPERTY INFORMATION FOR INSURANCE							ANCE COMPANY USE	
A1. Building Owner's Name Dennis Chavers Policy Number:								
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: 615 Fournier Ave.								
City State ZIP Code Gulfport Mississippi 39501								
the same of the self-and addresses to the	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lots 1, 2 & 3 Block 8 Island View Subdivision							
A4. Building Use (e	.g., Resider	ntial, Non-Residential,	Addition	, Accessory,	etc.) Residentia	1		
A5. Latitude/Longitu	ude: Lat. <u>3</u> 0	0d 21' 30.64 N	Long(089d 07' 08.5	6W Horizontal	I Datum: NAD 1	927 🗵 NAD 1983	
A6. Attach at least 2	2 photograp	hs of the building if the	e Certific	ate is being ι	used to obtain floor	d insurance.		
A7. Building Diagrar	m Number	1B						
A8. For a building w	ith a crawls	space or enclosure(s):						
a) Square foota	age of crawl	space or enclosure(s)	******************************		N/A sq ft			
b) Number of pe	ermanent flo	ood openings in the cra	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	de N/A	
c) Total net area	a of flood op	penings in A8.b	SERVE CONTROL TO SERVE THE PROPERTY CONTROL ASSESSMENT	N/A sq in				
d) Engineered f	flood openin	ngs? 🗌 Yes 🗵 N	10					
A9. For a building wi	ith an attach	ned garage:						
a) Square foota	ge of attach	ied garage		N/A sq ft	a ex			
b) Number of pe	ermanent flo	ood openings in the att	tached g	arage within	1.0 foot above adja	acent grade N/A		
c) Total net area	a of flood op	penings in A9.b		N/A sq	in	*		
d) Engineered fl	lood openin	gs? Yes 🗵 N	lo					
		CTION R. EL COD I	NCUDA	NOT DATE	MAD (FIDM) INC			
R1 NFIP Community		COMMUnity Number	NSUKA	1		DRMATION	D0 04-4-	
Commence and the commence of t	B1. NFIP Community Name & Community Number City of Gulfport 285253 B2. County Name Harrison B3. State Mississippi							
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood El (Zone AO, use	evation(s) Base Flood Depth)	
28047C0376 G 06-16-2009 Revised Date 06-16-2009 AE 18.0								
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								

OMB No. 1660-0008 Expiration Date: November 30, 2018 **ELEVATION CERTIFICATE** IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE Ruilding Street Address (including Ant. Unit Suite and/or Ridg No) or P.O. Route and Roy No Policy Number

615 Fournier Ave.	buile, alturol blug, No.) of P.O. No.	ite and box (40,	Policy Number.		
City Gulfport	State ZIP Mississippi 395	Code 01	Company NAIC Number		
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					
 C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished 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/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2,a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: Static GPS Opus Corrected Vertical Datum: NAVD 88 					
Indicate elevation datum used for the ele NGVD 1929 🔀 NAVD 1988 Datum used for building elevations mus	Other/Source:		Oh alkita was a was a was a		
a) Top of bottom floor (including basem	nent, crawlspace, or enclosure floor)	Check the measurement used. 19.1 ⊠ feet ☐ meters		
b) Top of the next higher floor	,	,	N/A feet meters		
c) Bottom of the lowest horizontal struc	tural member (V Żones only)		N/A feet meters		
d) Attached garage (top of slab)	***		N/A feet meters		
e) Lowest elevation of machinery or eq (Describe type of equipment and loc	uipment servicing the building ation in Comments)		19.1 🔀 feet 🔲 meters		
f) Lowest adjacent (finished) grade ne	xt to building (LAG)		15.6 🛛 feet 🔲 meters		
g) Highest adjacent (finished) grade ne	xt to building (HAG)		16.5 🗵 feet 🗌 meters		
h) Lowest adjacent grade at lowest electric structural support	vation of deck or stairs, including	gt-8-8	16.0 🔀 feet 🔲 meters		
SECTION D - S	URVEYOR, ENGINEER, OR AR	CHITECT CERTIF	ICATION		
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 pro-	vided by a licensed land surveyor?	⊠Yes □No	Check here if attachments.		
Certifier's Name Todd Farrar	License Number PS 27907	990-990-990-990-990-990-990-990-990-990	STANEARS		
Title Professional Land Surveyor		er en	Se Maryon 1		
Company Name General Engineering & Environmental Comp	anles, Inc.,	a Per en de la companya de la compa	Seal 1		
Address 12241 Industriplex Blvd., Bldg C			of Piere" s		
City Baton Rouge	State Louisiana	ZIP Code 70809	OF White		
Signature / /	Date 4.1. 1116	Telephone (225) 753-6545	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 control of control of the lot has an elevation of the lot has a lot ha	the final elevation certificate. The I	nighest adjacent roa	ad elevation 16.24'. The city drain		

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresp	FOR INSURAN	CE COMPANY USE				
Building Street Address (including Apt., Unit, Suite 615 Fournier Ave.	, and/or Bldg. No.) o	P.O. Route and Box No.	Policy Number:			
City Gulfport	State Mississippi	ZIP Code 39501	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 Item complete Sections A, B,and C. For Items E1–E4, u	ns E1–E5. If the Certi	ficate is intended to suppor	t a LOMA or LOMR rement used. In Pu	R-F request, perto Rico only,		
enter meters. E1. Provide elevation information for the following the highest adjacent grade (HAG) and the low	and check the approvest adjacent grade (opriate boxes to show whet LAG).	her the elevation is	above or below		
a) Top of bottom floor (including basement, crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet me	ters 🔲 above or	below the HAG.		
crawlspace, or enclosure) is	\$	[feet] me	ters 🔲 above or	below the LAG,		
E2. For Building Diagrams 6–9 with permanent flother the next higher floor (elevation C2.b in the diagrams) of the building is	od openings provide	d in Section A Items 8 and		2 of Instructions), ☐ below the HAG.		
E3. Attached garage (top of slab) is		torona arrang		below the HAG,		
E4. Top of platform of machinery and/or equipment servicing the building is	nt	[feet] me		below the HAG.		
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	ailable, is the top of th	ne bottom floor elevated in	accordance with the	e community's		
SECTION F - PROPERTY	· · · · · · · · · · · · · · · · · · ·			ation in Section G.		
				FEMA_issued or		
The property owner or owner's authorized represen	ntative who complete	is Sections A, B, and E for	ZVIIC M (WINIOUL A F			
The property owner or owner's authorized represent community-issued BFE) or Zone AO must sign her	e. The statements in	Sections A, B, and E for Sections A, B, and E are o	correct to the best o	f my knowledge.		
The property owner or owner's authorized represent community-issued BFE) or Zone AO must sign her Property Owner or Owner's Authorized Representation	e. The statements in	es Sections A, B, and E for Sections A, B, and E are o	correct to the best o	f my knowledge.		
community-issued BFE) or Zone AO must sign her	e. The statements in ative's Name	Sections A, B, and E are o	State	f my knowledge. ZIP Code		
community-issued BFE) or Zone AO must sign her Property Owner or Owner's Authorized Representa	e, The statements in	Sections A, B, and E are c	correct to the best o	f my knowledge.		
community-issued BFE) or Zone AO must sign her Property Owner or Owner's Authorized Represents Address	e, The statements in	Sections A, B, and E are c	State	f my knowledge.		
community-issued BFE) or Zone AO must sign her Property Owner or Owner's Authorized Represents Address Signature	e, The statements in	Sections A, B, and E are c	State	f my knowledge.		
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community-issued BFE) or Zone AO must sign her Property Owner or Owner's Authorized Represents Address Signature	e, The statements in	Sections A, B, and E are c	State	f my knowledge.		
community-issued BFE) or Zone AO must sign her Property Owner or Owner's Authorized Represents Address Signature	e, The statements in	Sections A, B, and E are c	State	f my knowledge.		
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ELEVÁTION CERTIFICATE

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	Box No.	Policy Number:					
City Gulfport	State ZIP Code Mississippi 39501		Company NAIC Number				
SECTION G - COMMUNITY INFORMATION (OPTIONAL)							
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.							
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)							
G2. A community official completed Secti or Zone AO.	on E for a building located in Zone A (with	out a FEM/	\-issued or community-issued BFE)				
	G10) is provided for community floodplain	managem	ent purposes.				
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued				
G7. This permit has been issued for:	New Construction Substantial Improv	/ement					
G8. Elevation of as-built lowest floor (including of the building:	; basement)	feet	meters Datum				
G9. BFE or (In Zone AO) depth of flooding at t	he building site:		meters Datum				
G10. Community's design flood elevation:		feet	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.

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

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.
615 Fournier Ave.

City State ZIP Code Gulfport Mississippi 39501

FOR INSURANCE COMPANY USE
Policy Number:

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.

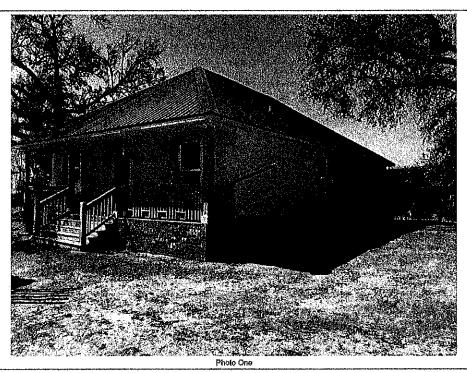


Photo One Caption

View of Front and North side of House

Clear Photo One



Photo Tw

Photo Two Caption

View of Front and South Side of House

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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

			
IMPORTANT: In these spaces, copy th	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., 615 Fournier Ave.	. 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.

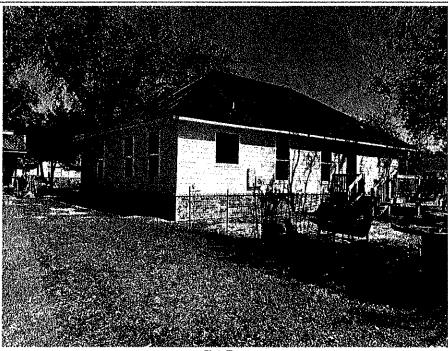


Photo Three

Photo Three Caption

View of Rear and South Side of House

Clear Photo Three

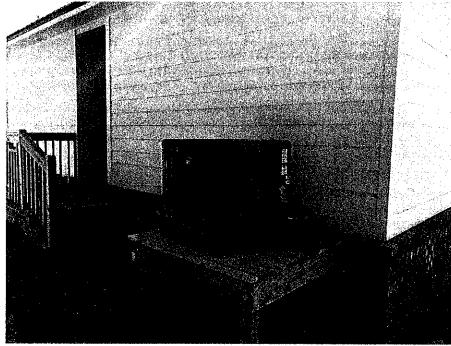


Photo Four

Photo Four Caption

View of Air Conditioning Unit

Clear Photo Four