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 INSUR	ANCE COMPANY USE			
A1. Building Owner's Name SPINNER REAL ESTATE HOLDINGS, LLC				Policy Numi	per:			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. 8813 LORRAINE ROAD					Company N	AIC Number:		
City								
GULPORT Mississippi 39503				i i				
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT D OF THE RESUBDIVISION OF COUNTY PARCEL 1010D-01-008.002								
A4. Building Use (A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) NON-RESIDENTIAL, RESTAURANT					URANT		
A5. Latitude/Longit	ude: Lat. <u>30</u>	24'28.4"	Long0	89 01'39.8"		Horizontal D	atum: 🔲 NAD 1	927 🗵 NAD 1983
A6. Attach at least	2 photograp	ns of the building if the	e Certific	ate is being u	sed to o	btain flood in	surance.	
A7. Building Diagra	m Number	5						
A8. For a building v	with a crawls	pace or enclosure(s):						
a) Square foot	age of crawl	space or enclosure(s)			0.00	sq ft		
b) Number of p	ermanent flo	od openings in the cr	awispace	e or enclosure	e(s) withi	in 1.0 foot ab	ove adjacent gra	ade 0
c) Total net are	ea of flood or	enings in A8.b		0.00 sq in	ı			
d) Engineered	flood openin	gs? 🗌 Yes 🗵 N	No					
A9. For a building w	/ith an attach	ed garage:						
a) Square footage of attached garage 0.00 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 0.00 sq in								
d) Engineered flood openings?								
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Community Name & Community Number CITY OF GULPORT, 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. Flo Zone(s		89. Base Flood E (Zone AO, us	llevation(s) e Base Flood Depth)
28047C0267	G	12-21-2017	06-16-2		AE	1	6	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:								
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X 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: I	these spaces, copy the corresponding information from Section A.	FOR	FOR INSURANCE COMPANY USE		
	Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box I		Policy Number:		
City State ZIP Code GULPORT Mississippi 39503			Company NAIC Number		
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					
 C1. Building elevations are based on: Construction Drawings* Building Under Construction*					
	Benchmark Utilized: GPS RTK NETWORK Vertical Datum: NAVD88, GEOID 2009				
Indicate e	elevation datum used for the elevations in items a) through h) below.				
	NGVD 1929 X NAVD 1988 Other/Source: sed for building elevations must be the same as that used for the BFE.		Check the measurement used.		
a) Top o	f bottom floor (including basement, crawlspace, or enclosure floor)	21.0	<u>0</u>		
b) Top o	f the next higher floor	N/A			
c) Botto	n of the lowest horizontal structural member (V Zones only)	N/A	-		
d) Attac	hed garage (top of slab)	N/A	feet meters		
e) Lowe (Desc	st elevation of machinery or equipment servicing the building ribe type of equipment and location in Comments)	20.9			
f) Lowe	st adjacent (finished) grade next to building (LAG)	9.0			
g) Highe	est adjacent (finished) grade next to building (HAG)	15.3	B ☐ feet ☐ meters		
	st adjacent grade at lowest elevation of deck or stairs, including ural support	9.0	e feet meters		
was a second	SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT C	ERTIFICAT	ION		
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.					
	and longitude in Section A provided by a licensed land surveyor? X Yes	□No [Check here if attachments.		
Certifier's Na CLIFFORD A	ne License Number . CROSBY, P.L.S. MS 2539		ODA.CO		
Title OWNER			SPEC ST		
Company Na CROSBY SU					
Address 716 LIVE OA					
City BILOXI	State ZIP Code Mississippi 39532				
Signature	Date Telephon 08-14-2020 (228) 234	-1649			
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.					
Comments (in LOWEST MA	ncluding type of equipment and location, per C2(e), if applicable) CHINERY IS THE BOTTOM OF THE AIR CONDITIONING UNIT ON RAISEE	DECK.			

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on A.		ICE COMPANY USE
and Box No.	Policy Number:	
de	Company NAIC	Number
(SURVEY NOT OUT BFE)	REQUIRED)	
nded to support eck the measure	a LOMA or LOMF ement used. In Pu	R-F request, uerto Rico only,
to show wheth	er the elevation is	above or below
feetmete	ers 🔲 above or	below the HAG.
feet mete	ers 🔲 above or	below the LAG.
A Items 8 and/o	or 9 (see pages 1-	-2 of instructions),
feet mete		r ☐ below the HAG.
☐ feet ☐ mete	ers 🔲 above o	r ☐ below the HAG.
feet met	ers 🔲 above o	r [] below the HAG.
oor elevated in a ocal official mus	ccordance with the certify this inform	ne community's nation in Section G.
SENTATIVE) (ERTIFICATION	•
A B and E for 2	one A (without a	FEMA-issued or of my knowledge.
		-
	State	ZIP Code
	Telephone	
	and Box No. GURVEY NOTOUT BFE Inded to support eck the measure It to show whether It to show whethe	Company NAIC (SURVEY NOT REQUIRED) OUT BFE) Inded to support a LOMA or LOMF eck the measurement used. In Put to show whether the elevation is feet meters above or A Items 8 and/or 9 (see pages 1- feet meters above or

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IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COM	PANY USE			
Building Street Address (including Apt., Unit, St 8813 LORRAINE ROAD	o. Policy Number:				
City GULPORT	State ZIP Code Mississippi 39503	Company NAIC Number			
SECTIO	N G - COMMUNITY INFORMATION (OPTIC	IAL)			
The local official who is authorized by law or on Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete the applicable item(s) a	in management ordinance can o d sign below. Check the measur	omplete ement		
engineer, or architect who is authorize data in the Comments area below.)	en from other documentation that has been sl ed by law to certify elevation information. (Ind	ate the source and date of the e	levation		
G2. A community official completed Section or Zone AO.	on E for a building located in Zone A (without	FEMA-issued or community-iss	ued BFE)		
G3. The following information (Items G4-	G10) is provided for community floodplain ma	agement purposes.			
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Iss	ued		
G7. This permit has been issued for:	New Construction Substantial Improver	nt			
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		feet 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 at	tachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3813 LORRAINE ROAD			Policy Number:	
City	State	ZIP Code	Company NAIC Number	
GULPORT	Mississippi	39503		

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.

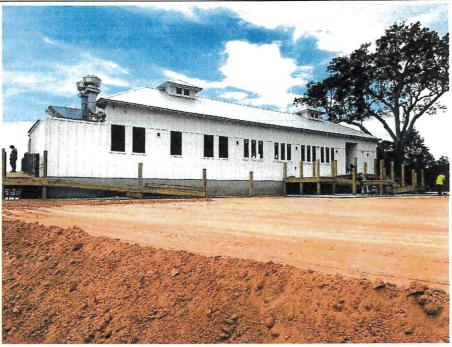


Photo One

Photo One Caption FRONT VIEW 08/14/2020

Clear Photo One



Photo Two

Photo Two Caption REAR VIEW 08/14/2020

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 8813 LORRAINE ROAD	Apt., Unit, Suite, and/or Bldg. No.) o	r P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
GULPORT	Mississippi	39503	

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 RIGHT SIDE VIEW 08/14/2020

Clear Photo Three

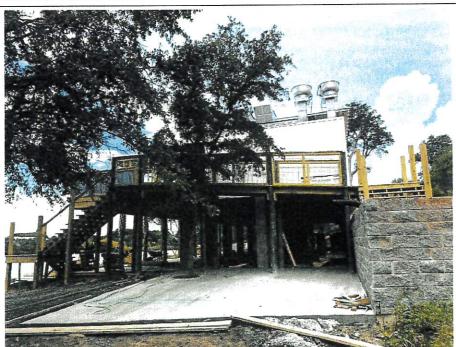


Photo Four

Photo Four Caption LEFT SIDE VIEW 08/14/2020

Clear Photo Four