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 Flevation Certificate and all attachments for (1) community official (2) insurance agent/company, and (2) building august

SECTION A - PROPERTY INFORMATION						FOR INSURANCE COMPANY USE	
A1. Building Owner's Name DAVID GANT					Policy Number:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 120 SHELTER ROCK DRIVE					Company NAIC Number:		
City LONG BEACH			State Mississippi		ZIP Code 39560		
A3. Property Description PARCEL NO. 0612F-02-0	CONTRACTOR		el Number, Legal D CK ESTATES	escription, etc.)			
A4. Building Use (e.g., Re	sidential, Non-Residential	, Addition	i, Accessory, etc.)	RESIDENTIAL			
A5. Latitude/Longitude: 1	089 09'28.9"	Horizontal Datum	m: NAD 1927 X NAD 1983				
A6. Attach at least 2 photo	ographs of the building if the	re Certific	cate is being used i	e obtain flood insur	ance.		
A7. Building Diagram Nun	iber 6						
A8. For a building with a c	rawispace or enclosure(s)	:					
a) Square footage of	crawlspace or enclosure(s	)	175 sq ft				
b) Number of perman	ent flood openings in the c	rawlspac	e or enclosure(s) v	vithin 1.0 foot above	adjacent g	rade 2	
c) Total net area of flo		400	sg in			*	
d) Engineered flood o	penings? X Yes	No.					
A9. For a building with an				~			
	attached garage 0						
b) Number of perman	ent flood openings in the a	ttached g	parage within 1.0 fo	ot above adjacent g	rade	Ø-	
<ul> <li>c) Total net area of flo</li> </ul>	od openings in A9 b	.0	sqាំភ				
d) Engineered flood o	penings? Yes 🗵	Nο					
	SECTION B - FLOOD	INSURA	NCE RATE MAP	(FIRM) INFORMA	TION		
B1. NFIP Community Name & Community Number CITY OF LONG BEACH, 285257			B2. County Name HARRISON		B3. State Mississippi		
84. Map/Panel B5. St Number B5. St	fffix B6, FIRM Index Date	Ef	37. FIRM Panel B8. Floo Effective/ Revised Date		B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)		
28047C0356 G	12/21/2017	06/16/	COTTO CONTRACTOR STATE OF THE PARTY OF THE P	ÄE	20		
B10. Indicate the source of	the Base Flood Elevation			pth entered in Item	B9:		
B11. Indicate elevation dat	um used for BFE in Item B	9: N	GVD 1929 🔀 NA	VD 1988 ☐ Oth	er/Source:		
B12. Is the building located	l in a Coastal Barrier Reso	urces Sy	stem (CBRS) area	or Otherwise Prote	cted Area (0	DPA)? ☐ Yes ⊠ No	
Designation Date:		CBRS	☐ OPA				
-		7					

## **ELEVATION CERTIFICATE**

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IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE								
Building Street Address (including Apt., Unit, Suite, an 120 SHELTER ROCK DRIVE	nd/or Bldg. No.) or F	P.O. Route and Bo	ox No.	Policy Number:					
City LONG BEACH	State Mississippi	ZIP Code 39560		Company NAIC Number					
SECTION E - BUILDING E FOR ZON	LEVATION INFOR			REQUIRED)					
For Zones AO and A (without BFE), complete Items E complete Sections A, B, and C. For Items E1–E4, use enter meters.	1–E5. If the Certific natural grade, if av	ate is intended to allable. Check the	support a measurer	LOMA or LOMR-F request, ment used. In Puerto Rico only,					
E1. Provide elevation information for the following and the highest adjacent grade (HAG) and the lowest a) Top of bottom floor (including basement,	d check the approp adjacent grade (LA	riate boxes to sho G).	w whether	r the elevation is above or below					
crawlspace, or enclosure) is	<del></del>	feet	meter	s above or below the HAG.					
<ul> <li>Top of bottom floor (including basement, crawlspace, or enclosure) is</li> </ul>		feet	meter	s above or below the LAG.					
E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1-2 of Instructions),									
the next higher floor (elevation C2.b in the diagrams) of the building is		[ feet	meter	s above or below the HAG.					
E3. Attached garage (fop of slab) is		[] feet	meter	s above or below the HAG.					
E4. Top of platform of machinery and/or equipment servicing the building is		feet	meter	s above or below the HAG.					
E5. Zone AO only: If no flood depth number is available floodplain management ordinance?   Yes	le, is the top of the	bottom floor eleva	ated in acc cial must o	cordance with the community's certify this information in Section G.					
SECTION F - PROPERTY OW	NER (OR OWNER	'S REPRESENTA	TIVE) CE	RTIFICATION					
The property owner or owner's authorized representate community-issued BFE) or Zone AO must sign here. T	ive who completes he statements in S	Sections A, B, and ections A, B, and	d E for Zor E are corr	ne A (without a FEMA-issued or rect to the best of my knowledge.					
Property Owner or Owner's Authorized Representative	's Name								
Address	C	ity	Sta	ate ZIP Code					
Signature	D	ate	Tel	ephone					
Comments	-2								

## **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

Mississippi

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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.

120 SHELTER ROCK DRIVE

City

State

ZIP Code

FOR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number

39560

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.

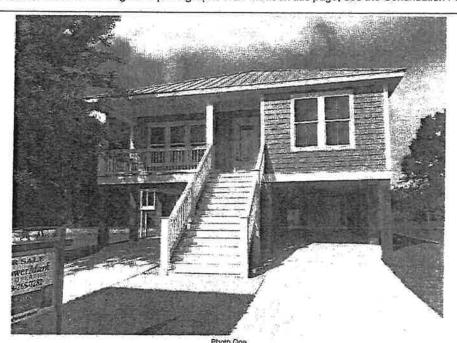


Photo One Caption FRONT VIEW 08/09/2019

**ELEVATION CERTIFICATE** 

LONG BEACH



Photo Two Caption REAR VIEW 08/09/2019