

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <u>Joseph Cross</u> <u>14080-Final</u>		FOR INSURANCE COMPANY USE
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>592 West Beach Blvd.</u>		Policy Number:
<u>City Long Beach</u>	<u>State Ms</u>	Company NAIC Number:
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>0612L-01-001.001 Sec.18, T8S.,R12W.</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>N30°20.382</u> Long. <u>W89°09.947</u>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>5</u>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <u>n/a</u> sq ft		a) Square footage of attached garage <u>n/a</u> sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>n/a</u>		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>n/a</u>
c) Total net area of flood openings in A8.b <u>n/a</u> sq in		c) Total net area of flood openings in A9.b <u>n/a</u> sq in
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <u>City of Long Beach 285257</u>		B2. County Name <u>Harrison</u>		B3. State <u>Ms.</u>	
B4. Map/Panel Number <u>28047C0358G0358</u>	B5. Suffix <u>G</u>	B6. FIRM Index Date <u>6-16-09</u>	B7. FIRM Panel Effective/Revised Date <u>6-16-09</u>	B8. Flood Zone(s) <u>VE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>22</u>

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

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: GPS Opus Solution Vertical Datum: NAVD 1988 GEOID12A
 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.

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>24.75</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	<u>n/a</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>23.22</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>n/a</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>22.82</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>9.9</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>10.4</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>9.9</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> 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.

Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Check here if attachments.

Certifier's Name <u>JAMES R. CLARKE</u>	License Number <u>PS-1653</u>
Title <u>PRINCIPAL</u>	Company Name <u>J.R. CLARKE & ASSOC.</u>
Address <u>P.O. BOX 4106</u>	City <u>GULFORT</u> State <u>MS</u> ZIP Code <u>39502</u>
Signature <u>[Signature]</u>	Date <u>9-5-14</u> Telephone <u>228-868-1121</u>



ELEVATION CERTIFICATE, page 2

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. 592 West Beach Blvd.	Policy Number:
City Long Beach State Ms ZIP Code 39560	Company NAIC Number:

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments I have not VE zone documents for this building. C2: Benchmark by NGS Opus Soluyion report File: log0904s.tps OP1409923427057, dated September 05,2014. The slab under building at high point 10.98ft. C2e: A/C unit on west face of building nearer the northwest corner.C2h:southwest corner deck. There are 6 lights under building above the BFE. There are 3 switches under the building below BFE. See page 4. There is a small framed area under the stairway. See page 3.

Signature  Date 9-5-14

SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
 - a) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below the HAG.
 - b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters 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 8–9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.
- E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

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.

Property Owner's or Owner's Authorized Representative's Name _____

Address _____ City _____ State _____ ZIP Code _____

Signature _____ Date _____ Telephone _____

Comments _____

Check here if attachments.

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 Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4–G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
-------------------	------------------------	---

- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ 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: _____ feet meters Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments _____

Check here if attachments.

Building Photographs

See Instructions for Item A6.

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.
592 West Beach Blvd.

City Long Beach

State Ms

ZIP Code 39560

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.



FRONT 9-4-14



REAR 9-5-14



FRAMED AREA UNDER STAIRWAY 9-5-14

Building Photographs

Continuation Page

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.
592 West Beach Blvd.

City Long Beach

State Ms ZIP Code 39560

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.



EAST 9-4-14



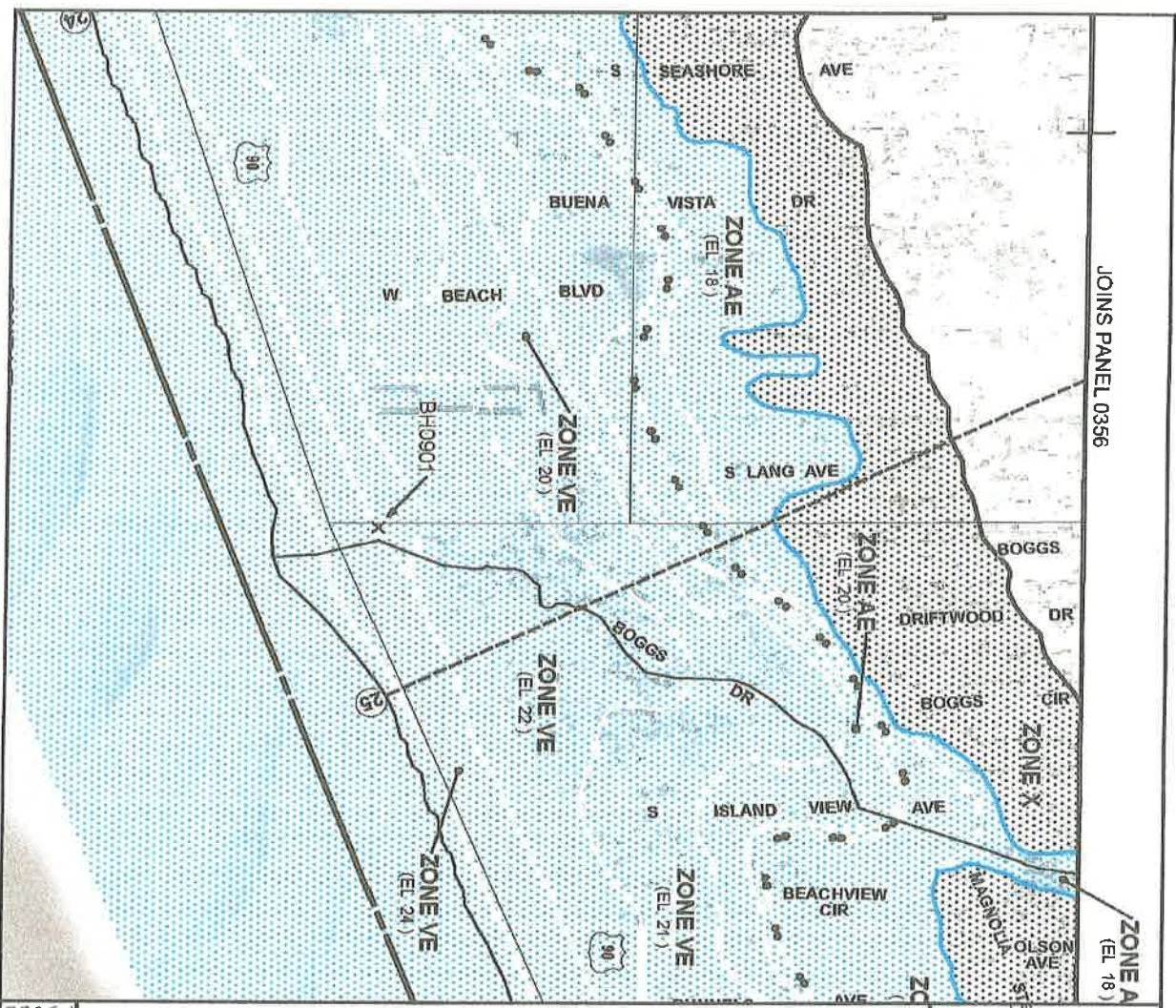
WEST 9-4-14



SWITCH FOR CARGO LIFT 15.17FT.
9-5-14



ELECTRICAL OUTLETS 16.47FT.
9-5-14



JOINS PANEL 0356



MAP SCALE 1" = 500'



PANEL 0358G

FIRM
FLOOD INSURANCE RATE MAP
HARRISON COUNTY,
MISSISSIPPI
AND INCORPORATED AREAS

PANEL 358 OF 575

(SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS:

COMMUNITY	NUMBER	PANEL	SUFFIX
HARRISON COUNTY	282/55	0358	G
LONG BEACH, CITY OF	282/57	0358	G
PASS CHRISTIAN, CITY OF	282/61	0358	G

Notes to User: The map number shown below should be used when referring to this community. The community name shown above should be used on insurance applications for the subject community.

MAP NUMBER
28047C0358G

EFFECTIVE DATE
JUNE 16, 2009



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at www.msc.fema.gov

Subject: OPUS solution : log0904s.tps OP1409923427057

From: opus (opus@ngs.noaa.gov)

To: clarkejamesrasso@bellsouth.net;

Date: Friday, September 5, 2014 8:25 AM

FILE: log0904s.tps OP1409923427057

2005 NOTE: The IGS precise and IGS rapid orbits were not available
2005 at processing time. The IGS ultra-rapid orbit was/will be used to
2005 process the data.
2005

NGS OPUS SOLUTION REPORT

All computed coordinate accuracies are listed as peak-to-peak values.
For additional information: <http://www.ngs.noaa.gov/OPUS/about.jsp#accuracy>

USER: clarkejamesrasso@bellsouth.net DATE: September 05, 2014
RINEX FILE: log0247s.14o TIME: 13:24:35 UTC

SOFTWARE: page5 1209.04 master93.pl 022814 START: 2014/09/04 18:15:00
EPHEMERIS: igu18084.eph [ultra-rapid] STOP: 2014/09/04 20:48:00
NAV FILE: brdc2470.14n OBS USED: 5988 / 6228 : 96%
ANT NAME: TPSGR3 NONE # FIXED AMB: 25 / 36 : 69%
ARP HEIGHT: 01.831 OVERALL RMS: 0.021(m)

REF FRAME: NAD_83(2011)(EPOCH:2010.0000) IGS08 (EPOCH:2014.6762)

X:	80306.051(m)	0.060(m)	80305.274(m)	0.060(m)
Y:	-5508731.592(m)	0.033(m)	-5508730.093(m)	0.033(m)
Z:	3202905.744(m)	0.040(m)	3202905.569(m)	0.040(m)

LAT:	30 20 22.47278	0.029(m)	30 20 22.49264	0.029(m)
E LON:	270 50 6.70645	0.060(m)	270 50 6.67818	0.060(m)
W LON:	89 9 53.29355	0.060(m)	89 9 53.32182	0.060(m)
EL HGT:	-24.730(m)	0.049(m)	-26.122(m)	0.049(m)
ORTHO HGT:	3.011(m) 0.086(m) [NAVD88 (Computed using GEOID12A)]			

UTM COORDINATES STATE PLANE COORDINATES

	UTM (Zone 16)	SPC (2301 MS E)
Northing (Y) [meters]	3358400.471	93109.815
Easting (X) [meters]	291899.767	268128.605
Convergence [degrees]	-1.09388763	-0.16743504
Point Scale	1.00013428	0.99996253

Combined Factor 1.00013816 0.99996641

US NATIONAL GRID DESIGNATOR: 16RBU9189958400(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
DO8512	MARY MARY_289 LSU C4G CORS ARP	N300122.709	W0895446.801	80150.8
DH3836	MSSC STENNIS SPACE CTR CORS ARP	N302230.794	W0893649.903	43352.1
DG6568	COVG COVINGTON CORS ARP	N302833.269	W0900543.922	90700.1

NEAREST NGS PUBLISHED CONTROL POINT

DL8855	D 368	N302033.0	W0891034.6	1149.4
--------	-------	-----------	------------	--------

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.