

ITEM #3

LUIS F. FAFIAS-MESIAS

715 S BEACH BOULEVARD

PARCEL #162R-0-10-130.000

A. VARIANCE FOR ACCESSORY
STRUCTURE (SWIMMING POOL) IN
FRONT YARD INSTEAD OF REAR YARD



Building/Zoning Department
301 Coleman Avenue
Waveland, MS 39576
(228)466-2549
(228)467-5177 FAX

Application for Variance

Section 904. Applying for a Variance

To apply for a variance from the terms of the Zoning Ordinance, the applicant MUST submit the following:

1. PROVIDE PROOF OF CURRENT OWNERSHIP OR A DOCUMENT FROM THE OWNER GRANTING YOU PERMISSION TO SEEK A VARIANCE FOR THIS PROPERTY.
2. Letter stating what is being requested and what type of development is proposed.
3. Two (2) copies of survey plat detailing existing structure, proposed development and encroachment, dimensions of property, location of all streets bordering property.
4. Names and mailing addresses of all property owners adjacent to side of property affected.
5. A fee of Two Hundred Fifty (\$250.00) dollars, payable in advance to help defray the expense of advertising and processing. This fee is non-refundable regardless of approval or denial.
6. IF PROPERTY IS IN A PLATTED SUBDIVISION, PLEASE ATTACH ANY RESTRICTIVE COVENANTS. IF UNSURE, YOU MAY GO TO THE CHANCERY CLERK'S OFFICE.

Typically, the Planning and Zoning Commission meets on the last Monday of the month. Please call the Building and Zoning Office for submittal deadlines and the dates of the Meetings.

Please remember that the Planning and Zoning Commission is a recommending body. The case will go the Board of Alderman at their next regularly scheduled meeting for final action on the variance request.

Name of Applicant: Luis F. GARCIA MESSIAS Date of Application: 30 Dec 2025
 Phone#: [REDACTED] E-mail (optional): [REDACTED]
 Property Physical Address(s) or Parcel #(s): 718 SOUTH BEACH BLVD. WAVELAND MS 39576
 Current Zoning of Property: _____
 Proposed Variance: BUILD A POOL IN THE FRONT OF THE HOUSE
 Applicant Signature: [Signature] Date: 30 Dec 2025

U.S. DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
National Flood Insurance Program

OMB Control No. 1660-0008
Expiration Date: 06/30/2026

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

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 COMPANY USE
A1. Building Owner's Name: <u>LUIS GARFIAS</u>		Policy Number: _____
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>718 SOUTH BEACH BLVD</u>		Company NAIC Number: _____
City: <u>WAVELAND</u>	State: <u>MS</u>	ZIP Code: <u>39576</u>
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: <u>TAX PARCEL # (162R-0-10-130.000)</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): <u>RESIDENTIAL</u>		
A5. Latitude/Longitude: Lat. <u>N 30-16-08.55</u> Long. <u>W 89-22-58.69</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983 <input type="checkbox"/> WGS 84		
A6. Attach at least two and when possible four clear photographs (one for each side) of the building (see Form pages 7 and 8).		
A7. Building Diagram Number: <u>5</u>		
A8. For a building with a crawlspace or enclosure(s):		
a) Square footage of crawlspace or enclosure(s): <u>0.00</u> sq. ft.		
b) Is there at least one permanent flood opening on two different sides of each enclosed area? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>0</u> Engineered flood openings: <u>0</u>		
d) Total net open area of non-engineered flood openings in A8.c: <u>0.00</u> sq. in.		
e) Total rated area of engineered flood openings in A8.c (attach documentation -- see Instructions): <u>0.00</u> sq. ft.		
f) Sum of A8.d and A8.e rated area (if applicable -- see Instructions): <u>0.00</u> sq. ft.		
A9. For a building with an attached garage:		
a) Square footage of attached garage: <u>0.00</u> sq. ft.		
b) Is there at least one permanent flood opening on two different sides of the attached garage? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>0</u> Engineered flood openings: <u>0</u>		
d) Total net open area of non-engineered flood openings in A9.c: <u>0.00</u> sq. in.		
e) Total rated area of engineered flood openings in A9.c (attach documentation -- see Instructions): <u>0.00</u> sq. ft.		
f) Sum of A9.d and A9.e rated area (if applicable -- see Instructions): <u>0.00</u> sq. ft.		
SECTION B: FLOOD INSURANCE RATE/MAP (FIRM) INFORMATION		
B1.a. NFIP Community Name: <u>WAVELAND</u>		B1.b. NFIP Community Identification Number: <u>285262</u>
B2. County Name: <u>HANCOCK</u>	B3. State: <u>MS</u>	B4. Map/Panel No.: <u>28045C0344</u> B5. Suffix: <u>D</u>
B6. FIRM Index Date: <u>10/16/2009</u>		B7. FIRM Panel Effective/Revised Date: <u>10/16/2009</u>
B8. Flood Zone(s): <u>VE</u>		B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): <u>24</u>
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: <input type="checkbox"/> FIS <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other: _____		
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____		
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA		
B13. Is the building located seaward of the Limit of Moderate Wave Action (LIMWA)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 718 SOUTH BEACH BLVD
City: WAVELAND State: MS ZIP Code: 39576
FOR INSURANCE COMPANY USE
Policy Number:
Company NAIC Number:

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: [X] 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, AO, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO, A99. Complete Items C2.a-h below according to the Building Diagram specified in Item A7. In Puerto Rico only, enter meters.
Benchmark Utilized: Top NET Vertical Datum: NAVD 1988

Indicate elevation datum used for the elevations in items a) through h) below.
[] NGVD 1929 [X] NAVD 1988 [] Other:

Datum used for building elevations must be the same as that used for the BFE. Conversion factor used? [] Yes [X] No
If Yes, describe the source of the conversion factor in the Section D Comments area.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor): 26.50 [X] feet [] meters
b) Top of the next higher floor (see Instructions): 0.00 [X] feet [] meters
c) Bottom of the lowest horizontal structural member (see Instructions): 25.00 [X] feet [] meters
d) Attached garage (top of slab): 0.00 [X] feet [] meters
e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area): 0.00 [X] feet [] meters
f) Lowest Adjacent Grade (LAG) next to building: [X] Natural [] Finished 12.30 [X] feet [] meters
g) Highest Adjacent Grade (HAG) next to building: [X] Natural [] Finished 12.80 [X] feet [] meters
h) Finished LAG at lowest elevation of attached deck or stairs, including structural support: 0.00 [X] 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 state 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? [X] Yes [] No
[] Check here if attachments and describe in the Comments area.

Certifier's Name: DUKE LEVY License Number: PS 01722
Title: PROFESSIONAL LAND SURVEYOR
Company Name: DUKE LEVY & ASSOCIATES
Address: 4412 LEISURE TIME DRIVE
City: DIAMONDHEAD State: MS ZIP Code: 39525

Signature: [Handwritten Signature] Date: 12/16/2025
Telephone: [Redacted] Ext. [Redacted] Email: [Redacted]



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

Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and description of any attachments):
(WO # 2025-323) BENCHMARK - A MAG NAIL WITH A DISK WAS SET IN THE CENTERLINE OF THE THE ASPHALT ROAD AND APPROXIAMENTELY CENTERED ON THE PROPERTY.THE ELEVATION ON TOP OF THE MAG NAIL IS (5.05') FEET.THE OWNER OR CONTRACTOR SHALL REQUEST THE UC EC PRIOR TO THE COMMENCEMENT OF FRAMING.

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-10

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 718 SOUTH BEACH BLVD	FOR INSURANCE COMPANY USE
City: WAVELAND State: MS ZIP Code: 39576	Policy Number: _____
	Company NAIC Number: _____

SECTION E - BUILDING MEASUREMENT INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO, ZONE AR/AO, AND ZONE A (WITHOUT BFE)

For Zones AO, AR/AO, and A (without BFE), complete Items E1-E5. For Items E1-E4, use natural grade, if available. If the Certificate is intended to support a Letter of Map Change request, complete Sections A, B, and C. Check the measurement used. In Puerto Rico only, enter meters.

Building measurements are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

E1. Provide measurements (C.2.a in applicable Building Diagram) for the following and check the appropriate boxes to show whether the measurement is above or below the natural HAG and the 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 1-2 of Instructions), the next higher floor (C2.b in applicable Building Diagram) 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 AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge

Check here if attachments and describe in the Comments area.

Property Owner or Owner's Authorized Representative Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____

Telephone: _____ Ext.: _____ Email: _____

Comments: _____

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 718 SOUTH BEACH BLVD	FOR INSURANCE COMPANY USE Policy Number: _____ Company NAIC Number: _____
City: <u>WAVELAND</u> State: <u>MS</u> ZIP Code: <u>39576</u>	

SECTION G - COMMUNITY INFORMATION (RECOMMENDED FOR COMMUNITY OFFICIAL COMPLETION)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Section A, B, C, E, G, or H of this Elevation Certificate. Complete the applicable item(s) and sign below when:

- 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 state law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.a. A local official completed Section E for a building located in Zone A (without a BFE), Zone AO, or Zone AR/AO, or when item E6 is completed for a building located in Zone AO.
- G2.b. A local official completed Section H for insurance purposes.
- G3. In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E and H.
- G4. The following information (Items G5-G11) is provided for community floodplain management purposes.
- G5. Permit Number: _____ G6. Date Permit Issued: _____
- G7. Date Certificate of Compliance/Occupancy Issued: _____
- G8. This permit has been issued for: New Construction Substantial Improvement
- G9.a. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters Datum: _____
- G9.b. Elevation of bottom of as-built lowest horizontal structural member: _____ feet meters Datum: _____
- G10.a. BFE (or depth in Zone AO) of flooding at the building site: _____ feet meters Datum: _____
- G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member: _____ feet meters Datum: _____
- G11. Variance issued? Yes No If yes, attach documentation and describe in the Comments area.

The local official who provides information in Section G must sign here. *I have completed the information in Section G and certify that it is correct to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.*

Local Official's Name: _____ Title: _____

NFIP Community Name: _____

Telephone: _____ Ext.: _____ Email: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____

Comments (Including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information in Sections A, B, D, E, or H):

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 718 SOUTH BEACH BLVD	FOR INSURANCE COMPANY USE
City: WAVELAND State: MS ZIP Code: 39576	Policy Number: _____ Company NAIC Number: _____

SECTION H - BUILDING'S FIRST FLOOR HEIGHT INFORMATION FOR ALL ZONES (SURVEY NOT REQUIRED) (FOR INSURANCE PURPOSES ONLY)

The property owner, owner's authorized representative, or local floodplain management official may complete Section H for all flood zones to determine the building's first floor height for insurance purposes. Sections A, B, and I must also be completed. Enter heights to the nearest tenth of a foot (nearest tenth of a meter in Puerto Rico). *Reference the Foundation Type Diagrams (at the end of Section H Instructions) and the appropriate Building Diagrams (at the end of Section I Instructions) to complete this section.*

H1. Provide the height of the top of the floor (as indicated in Foundation Type Diagrams) above the Lowest Adjacent Grade (LAG):

a) For Building Diagrams 1A, 1B, 3, and 5-9. Top of bottom _____ feet meters above the LAG floor (include above-grade floors only for buildings with subgrade crawlspaces or enclosure floors) is:

b) For Building Diagrams 2A, 2B, 4, and 6-9. Top of next higher floor (i.e., the floor above basement, crawlspace, or enclosure floor) is: _____ feet meters above the LAG

H2. Is all Machinery and Equipment servicing the building (as listed in Item H2 Instructions) elevated to or above the floor indicated by the H2 arrow (shown in the Foundation Type Diagrams at end of Section H Instructions) for the appropriate Building Diagram?
 Yes No

SECTION I - PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and H must sign here. *The statements in Sections A, B, and H are correct to the best of my knowledge.* Note: If the local floodplain management official completed Section H, they should indicate in Item G2.b and sign Section G.

Check here if attachments are provided (including required photos) and describe each attachment in the Comments area.

Property Owner or Owner's Authorized Representative Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____

Telephone: _____ Ext.: _____ Email: _____

Comments: _____

ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19
BUILDING PHOTOGRAPHS
 See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 718 SOUTH BEACH BLVD	FOR INSURANCE COMPANY USE
City: WAVELAND State: MS ZIP Code: 39576	Policy Number: _____ Company NAIC Number: _____

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.

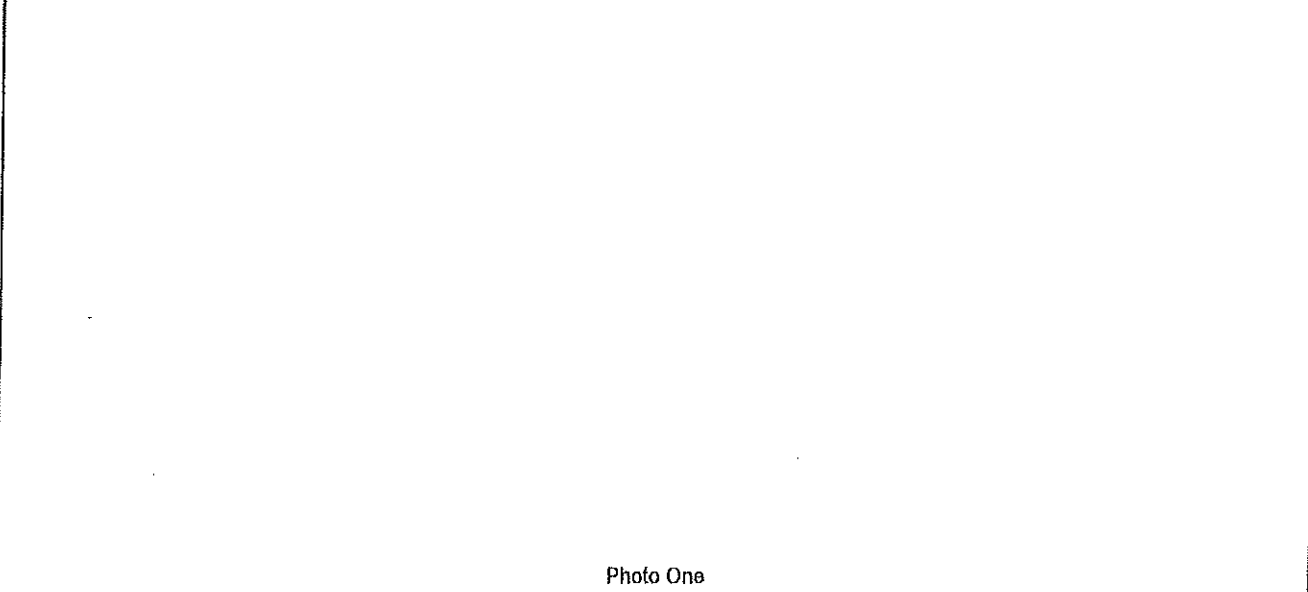


Photo One

Photo One Caption:

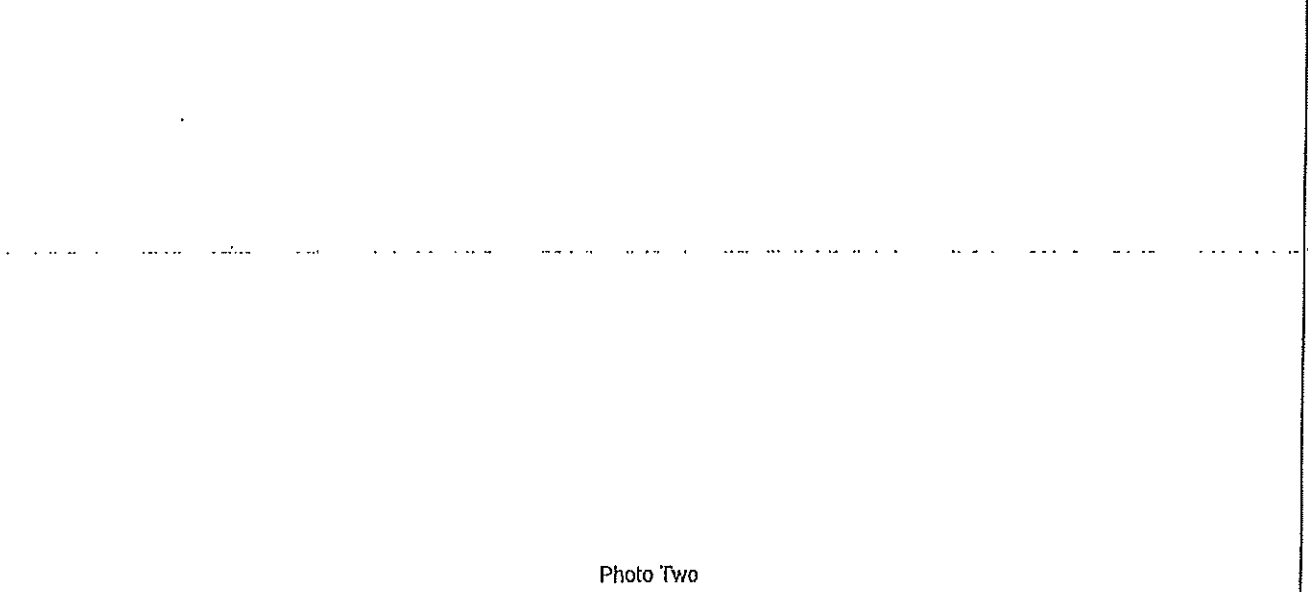


Photo Two

Photo Two Caption:



ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19
BUILDING PHOTOGRAPHS
Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:
718 SOUTH BEACH BLVD

City: WAVELAND State: MS ZIP Code: 39576

FOR INSURANCE COMPANY USE

Policy Number: _____

Company NAIC Number: _____

Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.

Photo Three

Photo Three Caption:

Clear Photo Three

Photo Four

Photo Four Caption:

Clear Photo Four



PILGER TITLE CO.
Real Estate Closings

1408 Blenville Boulevard, Suite 101 | Ocean Springs, MS 39564 | 228-215-0011 | fax 228-215-0023

October 24, 2025

Luis Mesias
Lisa Sendra

[REDACTED]
Waveland, MS 39576

Dear Sir or Madam:

Thank you for choosing PILGER TITLE CO. to handle your real estate closing needs. Enclosed, you will find the original, recorded Deed and Owner's Policy of Title Insurance in connection with the property you recently purchased. Please keep these documents in a very safe place because the originals are irreplaceable.

You should also be aware the property taxes will come due at the end of the year; the tax bill will still be in the seller's name and will be sent to the seller by the tax collector. If you have a mortgage and escrow account, your lender will pay these taxes. However, if your purchase does not include a mortgage, **you** should pay these taxes in late December or early January, whether you receive a tax bill or not.

Please note anytime a new deed is filed for a subject property, the owner(s) must file or **REFILE** for any property tax exemptions, including but not limited to homestead exemption. All tax exemptions must be filed or refiled between January 1st and April 1st at the county tax assessor's office.

The file regarding your property will be saved at our office so that we will be in a position to assist you in the event you sell or mortgage your property in the future. If such event does occur, just contact our office and we will promptly prepare your closing paperwork.

This should complete the documentation of your purchase. It has been a pleasure assisting you and if you have any questions, please do not hesitate to contact me.

Respectfully,

Anesha Mitchell
Policy Assistant

2025 14056
Recorded in the Above
Deed Book & Page
09-24-2025 10:40:51 AM
Tiffany L. Couson
Hancock County

Prepared By:
David B. Pilger
Attorney at Law
1406 Blenville Blvd.
Ocean Springs, MS 39564
[REDACTED]

Grantors:
Clifton W. Newlin
Nadine Newlin McCall
[REDACTED]
New Orleans, Louisiana 70018
[REDACTED]

Return To:
Pilger Title Co.
1406 Blenville Blvd.
Ocean Springs, MS 39564
[REDACTED]

Grantees:
Luis Francisco Garfias Mesias
Lisa Jean Sendra
[REDACTED]
Waveland, Mississippi 39576
[REDACTED]

File No. B-25-962

INDEXING INSTRUCTIONS: A parcel of land being a pt. of Lots 122 & 123, Third Ward, Town of Waveland, Hancock County, Mississippi

STATE OF MISSISSIPPI
COUNTY OF HANCOCK

WARRANTY DEED

FOR AND IN CONSIDERATION OF the price and sum of TEN AND NO/100 DOLLARS (\$10.00), cash in hand paid, and other good and valuable consideration, the receipt and sufficiency of all of which is hereby acknowledged, we, Clifton W. Newlin and Nadine Newlin McCall, do hereby sell, convey and warrant unto Luis Francisco Garfias Mesias and Lisa Jean Sendra, as joint tenants with right of survivorship and not as tenants in common, all of that certain tract, piece or parcel of land situated in Hancock County, Mississippi, together with all improvements, buildings, fixtures, and appurtenances thereunto belonging, and being more particularly described as follows, to-wit:

LEGAL DESCRIPTION ATTACHED HERETO AS EXHIBIT "A"

This being the same property as that conveyed to Clifton W. Newlin, a married man, and Nadine Newlin McCall, an unmarried woman, by instrument recorded in Deed Book 2010, at Page 13269, Land Deed Records of Hancock County, Mississippi.

If this property is bounded by water, this conveyance includes any natural accretion, and is subject to any erosion due to the action of the elements. Such riparian and littoral rights as exist are conveyed herewith but without warranty as to their nature or extent. If any portion of the property is below the mean high tide watermark, or is coastal wetlands as defined in the Mississippi Coastal Wetlands Protection Act it is conveyed by quitclaim only.

Grantor(s) quitclaim any and all oil, gas, and other minerals owned, if any, to Grantee(s). No mineral search was requested or performed by preparer.

This conveyance is subject to any and all covenants, rights of way, easements, restrictions and reservations of record in the office of the Chancery Clerk of Hancock County, Mississippi.

It is agreed and understood that the taxes for the current year have been pro-rated as of this date on an estimated basis, and when said taxes are actually determined, if the proration as of this date is incorrect, the Parties hereto agree to make all necessary adjustments on the basis of an actual proration.

This conveyance is not part of the Grantors' Homestead.

The survey of MP Design Group, dated August 23, 2023 is attached hereto as Exhibit "B".

WITNESS MY SIGNATURE, on this the 16th day of September, 2025.


Clifton W. Newlin

ACKNOWLEDGMENT

STATE OF Louisiana

COUNTY OF Orleans
Parish

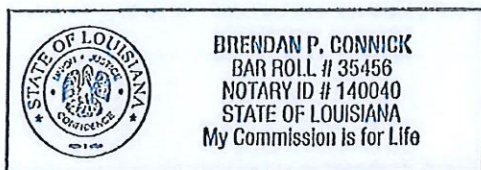
PERSONALLY APPEARED BEFORE ME, the undersigned authority in and for the jurisdiction aforesaid, the within named Clifton W. Newlin who acknowledged before me that he signed, executed and delivered the above and foregoing instrument on the day and year thereof, for the use and purposes therein mentioned.

GIVEN UNDER MY HAND AND OFFICIAL SEAL, on this the 16th day of September, 2025.

(AFFIX SEAL)


NOTARY PUBLIC

My commission expires: _____



WITNESS MY SIGNATURE, on this the 15th day of September, 2025.

Nadine Newlin McCall
Nadine Newlin McCall


A C K N O W L E D G M E N T

STATE OF LOUISIANA
PATRIE
COUNTY OF CALCASTEU

PERSONALLY APPEARED BEFORE ME, the undersigned authority in and for the jurisdiction aforesaid, the within named Nadine Newlin McCall who acknowledged before me that she signed, executed and delivered the above and foregoing instrument on the day and year thereof, for the use and purposes therein mentioned.

GIVEN UNDER MY HAND AND OFFICIAL SEAL, on this the 15th day of September, 2025.

(AFFIX SEAL)

William T. McCall
NOTARY PUBLIC
William T. McCall


My commission expires: at death

EXHIBIT "A"

LEGAL DESCRIPTION

PARCEL 1:

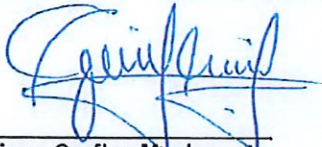
A PARCEL OF LAND SITUATED AND BEING LOCATED IN A PART OF LOT 123 OF THE THIRD WARD OF THE TOWN OF WAVELAND, HANCOCK COUNTY, MISSISSIPPI, AS PER THE OFFICIAL PLAT OF SAID TOWN MADE BY E. S. DRAKE, AND BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS, TO WIT:

BEGINNING AT A 2" PIPE FOUND AT THE SOUTHEAST CORNER OF SAID LOT 123, THIRD WARD, TOWN OF WAVELAND; THENCE S 55° 52' 02" W 128.44 FEET ALONG THE NORTH RIGHT-OF-WAY OF SOUTH BEACH BOULEVARD TO A 2" PIPE FOUND; THENCE N 32° 06' 30" W 959.20 FEET TO A POINT; THENCE N 18° 40' 01" W 117.00 FEET TO A POINT; THENCE N 05° 11' 09" E 169.00 FEET TO A 1/2" REBAR FOUND; THENCE S 31° 59' 28" E 604.65 FEET TO A 2" PIPE FOUND; THENCE S 32° 06' 30" E 598.25 FEET TO THE POINT OF BEGINNING. SAID PARCEL OF LAND CONTAINS 3.28 ACRES, MORE OR LESS.

PARCEL 2:

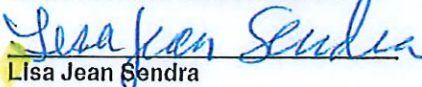
A PARCEL OF LAND SITUATED AND BEING LOCATED IN A PART OF LOT 122 OF THE THIRD WARD OF THE TOWN OF WAVELAND, HANCOCK COUNTY, MISSISSIPPI, AS PER THE OFFICIAL PLAT OF SAID TOWN MADE BY E. S. DRAKE, AND BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS, TO WIT:

BEGINNING AT A CHISELED "X" MARK FOUND AT THE NORTHEAST CORNER OF SAID LOT 122, THIRD WARD, TOWN OF WAVELAND, SAID POINT BEING LOCATED ON THE SOUTH RIGHT-OF-WAY OF SOUTH BEACH BOULEVARD; THENCE S 32° 06' 30" E 138.27 FEET TO A POINT ON THE MEAN HIGH WATER LINE OF THE GULF OF MEXICO; THENCE ALONG SAID MEAN HIGH WATER LINE 129.10 FEET TO A POINT BEING S 54° 19' 03" W 129.21 FEET FROM THE PREVIOUS CALL; THENCE N 32° 06' 30" W 141.79 FEET TO A CHISELED "X" MARK SET IN A CONCRETE SIDEWALK; THENCE N 55° 52' 37" E 129.04 FEET ALONG SAID SOUTH RIGHT-OF-WAY OF SOUTH BEACH BOULEVARD TO THE POINT OF BEGINNING. SAID PARCEL OF LAND CONTAINS 18,236 SQUARE FEET, MORE OR LESS.



Luis Francisco Garfias Mesias

9-18-25
Date



Lisa Jean Sandra

9-18-25
Date

December 30, 2025

Planning and Zoning Commission
City of Waveland
301 Coleman Avenue
Waveland, MS 39576

Dear Friends of the Planning and Zoning Commission,

**RE: Building a Pool in the Front of a New House
718 South Beach Boulevard, Waveland MS 39576**

My wife Lisa Jean SENDRA and myself, Luis F. Garfias-Mesias, are the owners of the lot located at 718 South Beach Boulevard, Waveland MS 39576.

The present letter is to request a Variance for Building a Pool in the Front of a New House (see attached drawing of the Plot Plan).

Please do not hesitate to contact me via cell phone, text, or e-mail at any time before the February hearing in relation to this request.

I really appreciate your help and understanding.

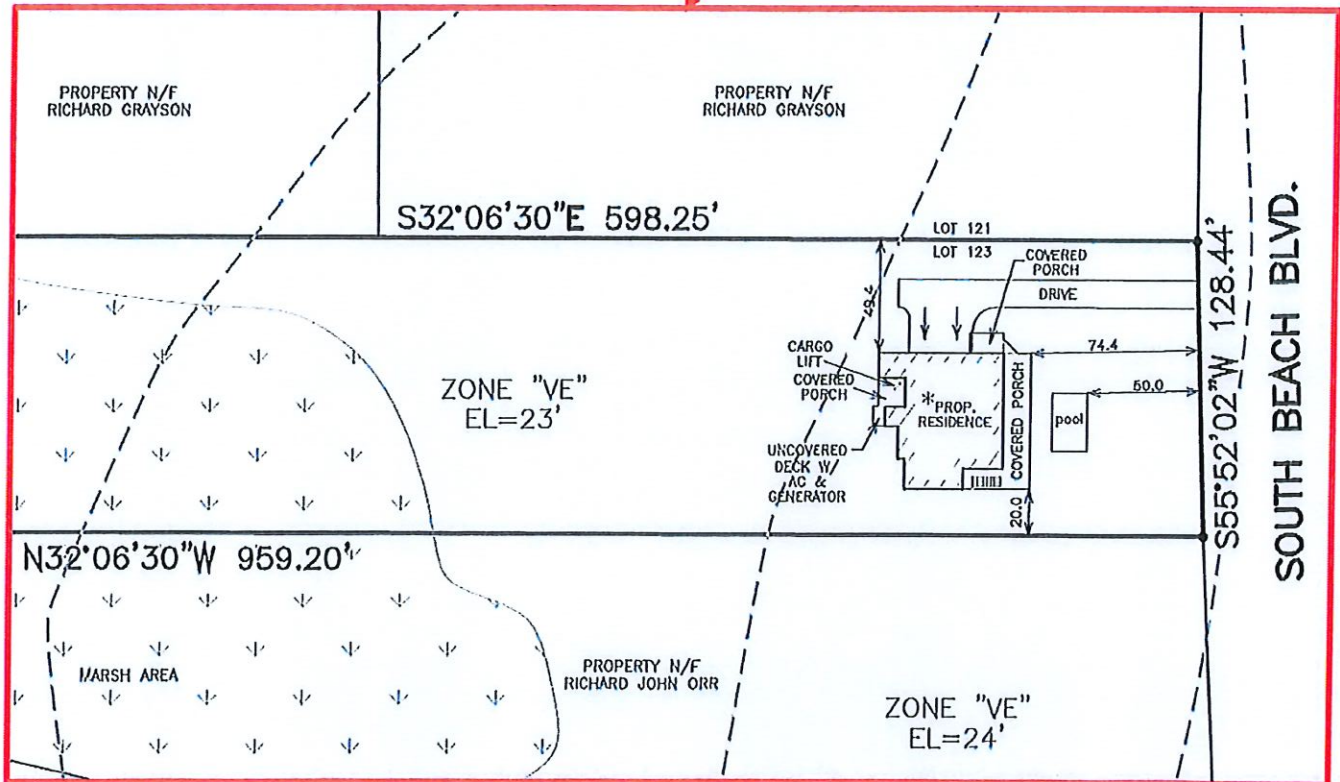
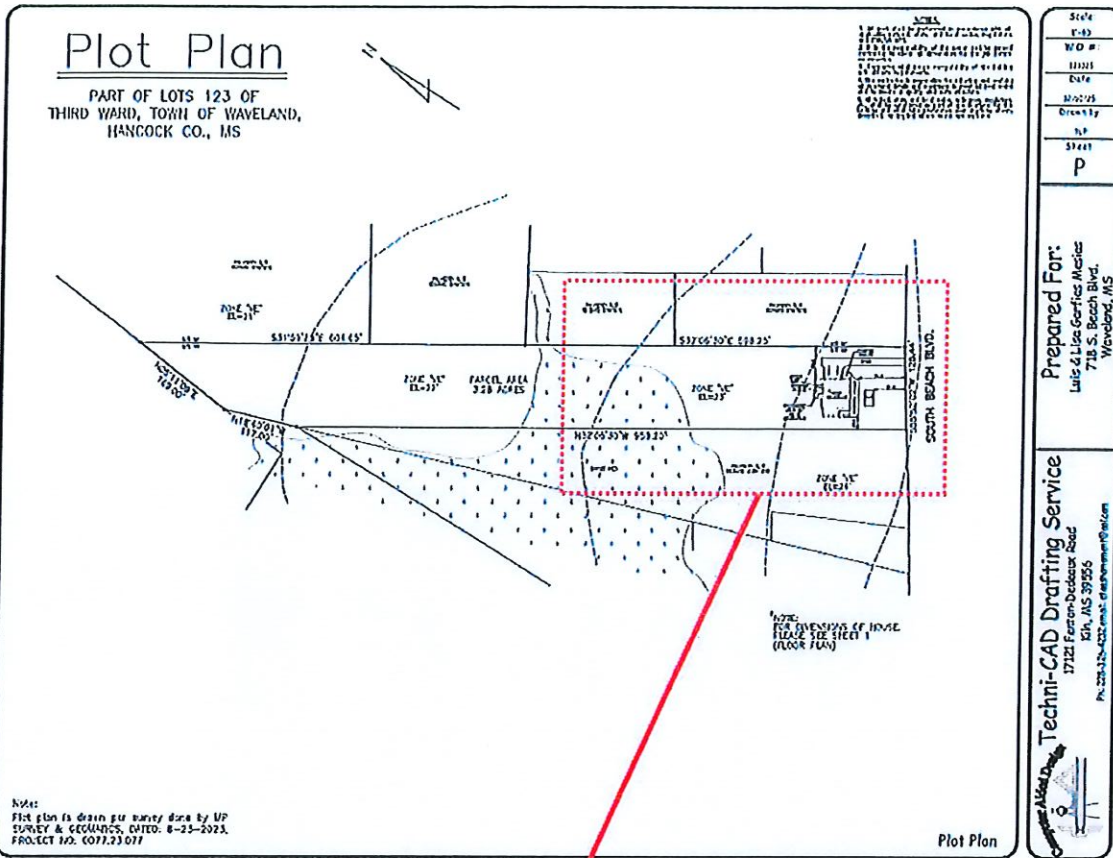
Best regards,



Luis F. Garfias-Mesias

Home: 400-444-4444 Waveland MS 39576

E: [REDACTED]



ITEM #4

CYNTHIA PREVOU

9126 KILN-WAVELAND CUTOFF ROAD

PARCEL #138M-0-33-306.000

A. REQUEST FOR 568-SQUARE FOOT
VARIANCE REQUEST IN A C-3 ZONE.
REQUIREMENTS ARE 1000-SQUARE
FOOT MINIMUM AND BUILDING WILL
BE 432-SQUARE FEET



Building/Zoning Department
301 Coleman Avenue
Waveland, MS 39576
(228)466-2549
(228)467-5177 FAX

Application for Variance

Section 904. Applying for a Variance

To apply for a variance from the terms of the Zoning Ordinance, the applicant **MUST** submit the following:

1. / ✓ **PROVIDE PROOF OF CURRENT OWNERSHIP OR A DOCUMENT FROM THE OWNER GRANTING YOU PERMISSION TO SEEK A VARIANCE FOR THIS PROPERTY.**
2. / ✓ **Letter stating what is being requested and what type of development is proposed.**
3. / ✓ **Two (2) copies of survey plat detailing existing structure, proposed development and encroachment, dimensions of property, location of all streets bordering property.**
4. / ✓ **Names and mailing addresses of all property owners adjacent to side of property affected.**
5. / ✓ **A fee of Two Hundred Fifty (\$250.00) dollars, payable in advance to help defray the expense of advertising and processing. This fee is non-refundable regardless of approval or denial.**
6. / ✓ **IF PROPERTY IS IN A PLATTED SUBDIVISION, PLEASE ATTACH ANY RESTRICTIVE COVENANTS. IF UNSURE, YOU MAY GO TO THE CHANCERY CLERK'S OFFICE.**

Typically, the Planning and Zoning Commission meets on the last Monday of the month. Please call the Building and Zoning Office for submittal deadlines and the dates of the Meetings.

Please remember that the Planning and Zoning Commission is a recommending body. The case will go the Board of Alderman at their next regularly scheduled meeting for final action on the variance request.

Name of Applicant: Cynthia Prevou Date of Application: 1-12-26
Phone: [REDACTED] E-mail (optional): [REDACTED]
Property Physical Address(s) or Parcel #(s): 9126 Kiln-Waveland cut off Rd
Current Zoning of Property: C-3
Proposed Variance: Reduced space footage of structure + addition of garage
Applicant Signature: [Signature] Date: 1-12-26

U.S. DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
National Flood Insurance Program

OMB Control No. 1660-0008
Expiration Date: 06/30/2026

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

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 COMPANY USE

A1. Building Owner's Name: CYNTHIA PREVOU

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:
UNIMPROVED LOTS KILN WAVELAND CUT OFF RD

Policy Number: _____

Company NAIC Number: _____

City: WAVELAND State: MS ZIP Code: 39576

A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number:
TAX PARCEL # 138M-0-33-306.000

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): NON RESIDENTIAL

A5. Latitude/Longitude: Lat. 30-18-27.9 Long. 89-24-19.7 Horizontal Datum: NAD 1927 NAD 1983 WGS 84

A6. Attach at least two and when possible four clear photographs (one for each side) of the building (see Form pages 7 and 8).

A7. Building Diagram Number: 5

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s): N/A sq. ft.
- b) Is there at least one permanent flood opening on two different sides of each enclosed area? Yes No N/A
- c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade:
Non-engineered flood openings: N/A Engineered flood openings: N/A
- d) Total net open area of non-engineered flood openings in A8.c: N/A sq. in.
- e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructions): N/A sq. ft.
- f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): N/A sq. ft.

A9. For a building with an attached garage:

- a) Square footage of attached garage: N/A sq. ft.
- b) Is there at least one permanent flood opening on two different sides of the attached garage? Yes No N/A
- c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade:
Non-engineered flood openings: N/A Engineered flood openings: N/A
- d) Total net open area of non-engineered flood openings in A9.c: N/A sq. in.
- e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructions): N/A sq. ft.
- f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): N/A sq. ft.

SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1.a. NFIP Community Name: WAVELAND B1.b. NFIP Community Identification Number: 285262

B2. County Name: HANCOCK B3. State: MS B4. Map/Panel No.: 28045C0342 B5. Suffix: D

B6. FIRM Index Date: 10/16/09 B7. FIRM Panel Effective/Revised Date: 10/16/09

B8. Flood Zone(s): AE B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): 17

B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9:
 FIS FIRM Community Determined Other: _____

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

B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? Yes No

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>UNIMPROVED LOTS KILN WAVELAND CUT OFF RD</u>	FOR INSURANCE COMPANY USE
City: <u>WAVELAND</u> State: <u>MS</u> ZIP Code: <u>39576</u>	Policy Number: _____ 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, AO, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO, A99. Complete Items C2.a–h below according to the Building Diagram specified in Item A7. In Puerto Rico only, enter meters.
 Benchmark Utilized: TRIMBLE VRS NETWORK Vertical Datum: NAVD88 GEOID 12BUS

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929 NAVD 1988 Other: _____

Datum used for building elevations must be the same as that used for the BFE. Conversion factor used? Yes No
 If Yes, describe the source of the conversion factor in the Section D Comments area.

Check the measurement used:

- | | | | |
|---|------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor): | 18.0 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor (see Instructions): | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (see Instructions): | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab): | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area): | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest Adjacent Grade (LAG) next to building: <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Finished | 4.2 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest Adjacent Grade (HAG) next to building: <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Finished | 4.5 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Finished LAG at lowest elevation of attached deck or stairs, including structural support: | N/A | <input 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 state 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 and describe in the Comments area.

Certifier's Name: DONALD E RIED License Number: PLS 3037

Title: LAND SURVEYOR

Company Name: RIED AND ASSOCIATES LLC

Address: 9526 BENESHEEWAH TRAIL

City: PASS CHRISTIAN State: MS ZIP Code: 39571

Signature: _____ Date: 07/14/25

Telephone: [REDACTED] Ext.: _____ Email: [REDACTED]



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

Comments including source of conversion factor in C2, type of equipment and location per C2.e; and description of any attachments):

BENCH MARK AT THE INTERSECTION OF NIAGARA ST AND LAKE ST AT 3.77 FEET THE ELEVATION SHOWN IN C2a IS ONE FOOT ABOVE BASE FLOOD ELEVATION PER CITY OF WAVELAND BUILDING REQUIREMENTS

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:

UNIMPROVED LOTS KILN WAVELAND CUT OFF RD

City: WAVELAND

State: MS

ZIP Code: 39576

FOR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number:

SECTION H - BUILDING'S FIRST FLOOR HEIGHT INFORMATION FOR ALL ZONES (SURVEY NOT REQUIRED) (FOR INSURANCE PURPOSES ONLY)

The property owner, owner's authorized representative, or local floodplain management official may complete Section H for all flood zones to determine the building's first floor height for insurance purposes. Sections A, B, and I must also be completed. Enter heights to the nearest tenth of a foot (nearest tenth of a meter in Puerto Rico). *Reference the Foundation Type Diagrams (at the end of Section H Instructions) and the appropriate Building Diagrams (at the end of Section I Instructions) to complete this section.*

H1. Provide the height of the top of the floor (as indicated in Foundation Type Diagrams) above the Lowest Adjacent Grade (LAG):

a) For Building Diagrams 1A, 1B, 3, and 5-9. Top of bottom _____ feet meters above the LAG floor (include above-grade floors only for buildings with subgrade crawlspaces or enclosure floors) is:

b) For Building Diagrams 2A, 2B, 4, and 6-9. Top of next higher floor (i.e., the floor above basement, crawlspace, or enclosure floor) is: _____ feet meters above the LAG

H2. Is all Machinery and Equipment servicing the building (as listed in Item H2 instructions) elevated to or above the floor indicated by the H2 arrow (shown in the Foundation Type Diagrams at end of Section H instructions) for the appropriate Building Diagram?

Yes No

SECTION I - PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and H must sign here. *The statements in Sections A, B, and H are correct to the best of my knowledge.* Note: If the local floodplain management official completed Section H, they should indicate in Item G2.b and sign Section G.

Check here if attachments are provided (including required photos) and describe each attachment in the Comments area.

Property Owner or Owner's Authorized Representative Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____

Telephone: _____ Ext.: _____ Email: _____

Comments:

ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19
BUILDING PHOTOGRAPHS
Continuation Page

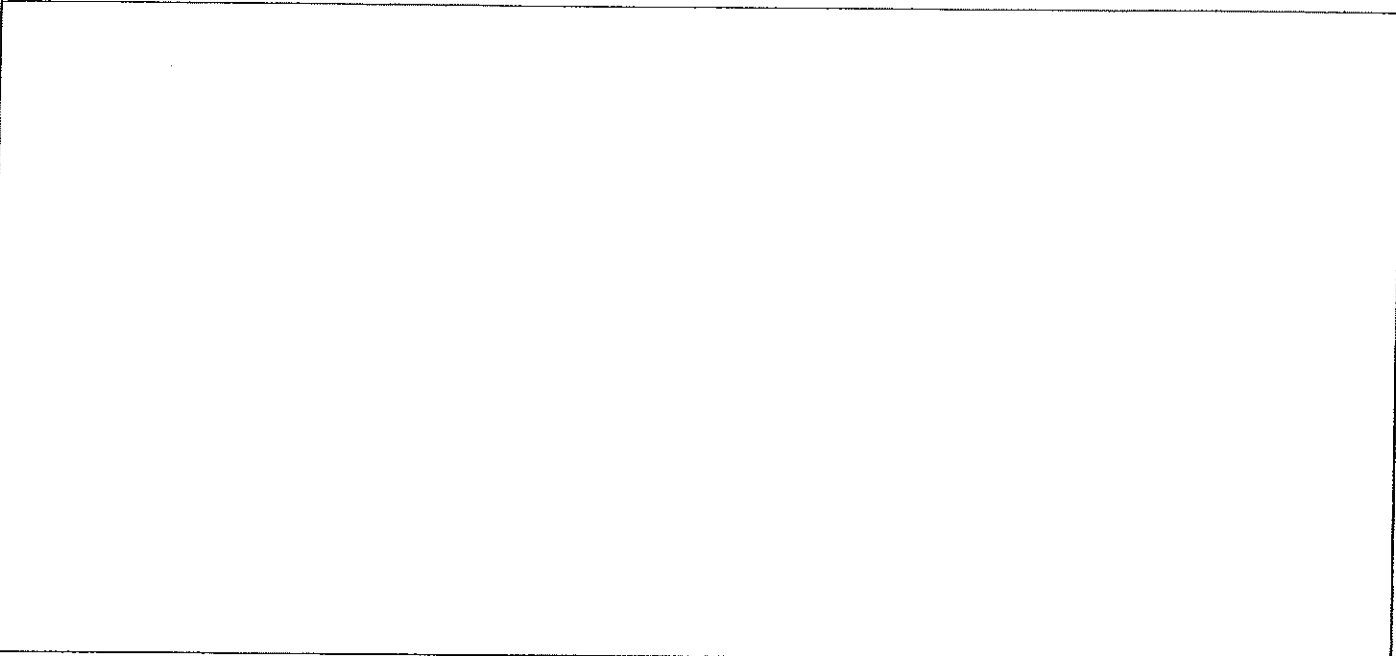
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:
UNIMPROVED LOTS KILN WAVELAND CUT OFF RD

FOR INSURANCE COMPANY USE

City: WAVELAND State: MS ZIP Code: 39576

Policy Number: _____
Company NAIC Number: _____

Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Clear Photo Three

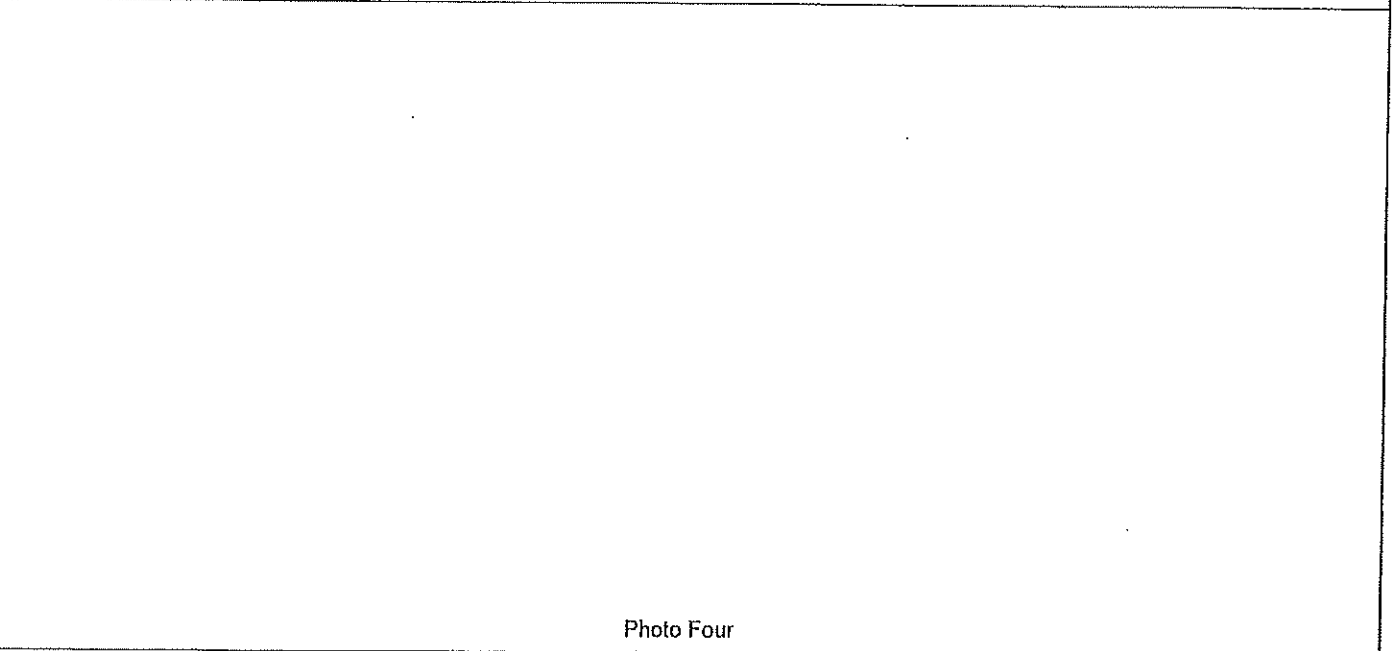


Photo Four

Clear Photo Four

MTG Autos

9126 Kiln-Waveland Cut-Off Road, Waveland, MS 39576

email: [REDACTED]

January 12th, 2026

Commissioners and Board Members,

We are a small independent locally owned used auto sales business seeking a variance for two reasons:

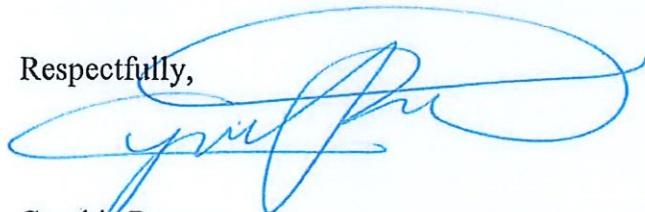
1. To reduce the required square footage of our office space from 1000sqft to 350-450sqft.

Smaller building = More parking spaces for cars.

2. In the future, we would like to add a metal garage building for a workshop.

Thank you for your consideration.

Respectfully,



Cynthia Prevou

President

2025 8225
Recorded in the Above
Deed Book & Page
06-19-2025 04:07:50 PM
Tiffany L Cowan
Hancock County

Prepared by & return to:
Preston J. Mauffray (MSB #101131)
Landmark Title & Escrow Co., Inc.
521 Ulman Avenue, Bay St. Louis, MS 39520
Telephone: [REDACTED]
File No.: 1130-22225

Indexing: Lots 9, 10, 36 & 37, Sq. 140, SHORELINE PARK S/D, Un. 7, Add. No. 3, Hancock Co., MS.

**STATE OF MISSISSIPPI
COUNTY OF HANCOCK**

WARRANTY DEED

FOR AND IN CONSIDERATION of the sum of Ten Dollars (\$10.00) cash in hand paid, and other good and valuable consideration not necessary to be mentioned herein, the receipt and sufficiency of all of which is hereby acknowledged, I,

JACQUELINE A. VIDRINE, Grantor
[REDACTED]
[REDACTED]

do hereby sell, convey and warrant unto

CYNTHIA PREVOU and RICO LANEAX, Grantees
[REDACTED]
[REDACTED]

as joint tenants with full rights of survivorship and not as tenants in common, the following described land and property situated in Hancock County, Mississippi, to wit:

Lots 9, 10, 36 and 37, Square 140, SHORELINE PARK SUBDIVISION, Unit 7, Addition No. 3, Hancock County, Mississippi, as per plat of said subdivision on file in the office of the Chancery Clerk of Hancock County, Mississippi.

Together with all and singular the rights, privileges, improvements and appurtenances to the same belonging or in any wise appertaining.

This conveyance is made subject to any and all prior reservations, restrictions, easements,

exceptions, covenants and conditions of record, including any mineral, oil or gas reservations and any covenants or restrictions which appear of record.

If bounded by water, the warranty granted herein shall not extend to any part of the above-described property which is tideland or coastal wetlands as defined in the Mississippi Coastal Wetlands Protection Act and this conveyance includes any natural accretion and is subject to any erosion due to the action of the elements.

The Grantor herein certifies that the property hereinabove conveyed forms no part of the homestead of said Grantor.

It is agreed and understood that, if the taxes for the current year have been prorated as of this date on an estimated basis, and when said taxes are finally determined, if the proration as of this date is incorrect, the parties herein agree to pay on a basis of the actual proration. Otherwise, taxes for the current year and all subsequent years are specifically assumed by the Grantees herein.

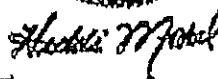
IN WITNESS WHEREOF, the Grantor has signed and delivered this deed on the date of the acknowledgment below.


JACQUELINE A. VIDRINE, Grantor



Hancock County
I certify this instrument was filed on
06-19-2025 04:07:50 PM
and recorded in Deed Book
2025 at Pages 8225 - 8226
Tiffany L Cowan

STATE OF North Carolina
COUNTY/
PARISH OF Transylvania



PERSONALLY CAME AND APPEARED before me, the undersigned authority in and for the jurisdiction aforesaid, on this the 17th day of June, 2025, the within named JACQUELINE A. VIDRINE, who acknowledged that she executed and delivered the foregoing instrument of writing on the day and year therein mentioned.



My commission expires:
05/12/2030

TRACY W MCGINNIS
NOTARY PUBLIC
BUNCOMBE COUNTY NC
MY COMMISSION EXP: 05/12/2030
(seat)

NOTARY PUBLIC

*** Certified Copy Page ***

I, Tiffany L Cowman, Chancery Clerk, do hereby certify that the foregoing is a FULL, TRUE and CORRECT copy of the Instruments(s) herewith set out as same appears of record in: Deed BOOK - 2025, AT PAGE - 8225 in said court.

Witness my hand and seal this 16 Day of December, 2025.

Tiffany L Cowman
Chancery Clerk
Hancock County, MS

DC: 









PURCHASE OR RENT TO OWN

NEW PRE-OWNED

DESCRIPTION: 12 X 36 Side utility

PURCHASE

CASH PRICE: \$

SALES TAX: \$

TOTAL CASH PRICE..... \$

RENT TO OWN

TERMS	24 MO.	36 MO.	48 MO.	60 MO.	72 MO. <small>(Auto Pay Required)</small>
MONTHLY RENTAL	\$	\$	\$	\$	\$
MONTHLY SALES TAX	\$	\$	\$	\$	\$
TOTAL MONTHLY RENT PAYMENT	\$	\$	\$	\$	\$
RENT TO OWN SECURITY DEPOSIT	\$	\$	\$	\$	\$

CONTACT NUMBER:

INITIAL DELIVERY AND SETUP INCLUDED (UP TO 50 MILES FROM DEALER)



ALL BEARINGS SHOWN ARE GRID
BEARINGS
CONVERGENCE ANGLE -0°17'19"
STATE PLANE ZONE 18S EAST

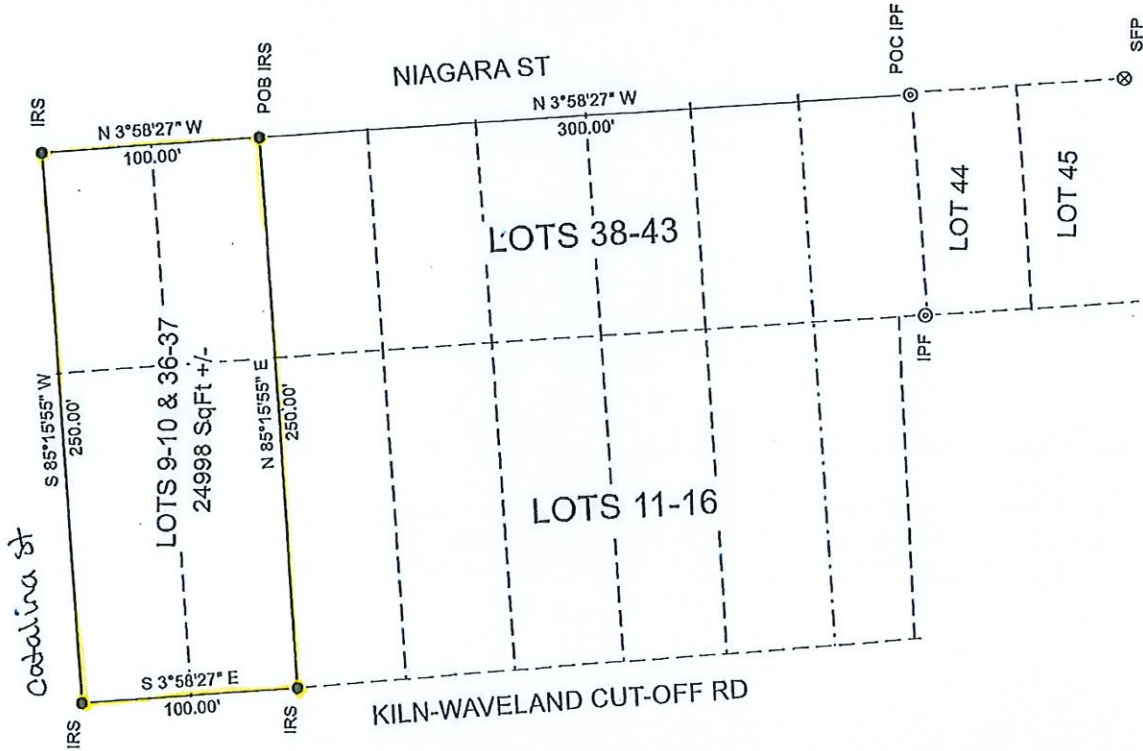
THIS IS BASED ON INFORMATION PROVIDED
BY THE CLIENT AND THE SURVEYOR HAS
NOT CONDUCTED AN INDEPENDENT SEARCH
OF RECORDS, ENCUMBRANCES,
EASEMENTS, OR OTHER RIGHTS AFFECTING
THE SUBJECT PROPERTY. OWNERSHIP OF
THE SUBJECT PROPERTY IS THE RESPONSIBILITY
OF THE CLIENT. THE SURVEYOR DOES NOT
WARRANT THAT A CURRENT TITLE SEARCH MAY
DISCLOSE

SURVEY IS VALID ONLY IF PLAT HAS
ORIGINAL SEAL AND SIGNATURE OF THE
SURVEYOR

NO ATTEMPT HAS BEEN MADE AS PART
OF THIS BOUNDARY SURVEY TO OBTAIN
OR SHOW THE LOCATION, DEPTH, OR
SIZE, DEPTH, CONDITION OR LOCATION OF
ANY UTILITY OF PUBLIC SERVICE UTILITY

IN CONSIDERATION OF A FEE PAID I DO DECLARE
THAT THIS SURVEY WAS DONE BY ME OR
UNDER MY IMMEDIATE SUPERVISION AND
IS CORRECT TO MY PROFESSIONAL
KNOWLEDGE AND BELIEF.

THIS SURVEY MEETS THE MISSISSIPPI
MINIMUM STANDARDS FOR A CLASS
B SURVEY



SURVEY DESCRIPTION

PARCEL OF LAND LOCATED IN THE SHORELINE PARK SUBDIVISION
BLOCK 140 UNIT 7 ADDITION 3 HANCOCK COUNTY MISSISSIPPI

LOTS 8-9 & LOTS 36-37

COMMENCING AT AN IRON PIPE AT THE
NORTHEAST CORNER OF LOT 44 IN THE
SHORELINE PARK SUBDIVISION BLOCK 140
UNIT 7 ADDITION 3 IN THE CITY OF WAVELAND

ITEM #5
EDWARD TOOMEY
702 NICHOLSON AVENUE
PARCEL #161C-0-02-072.000

A. PRELIMINARY AND FINAL PLAT
APPROVAL



APPLICATION FOR PRELIMINARY SUBDIVISION PLAT APPROVAL

Name of Subdivision (If Applicable): N/A
Number of Lots in Subdivision: N/A
Zoning Classification of Said Property: N/A

(Attested by City Building Official)

Name of Owner: Edward Toomey
Name of Engineer: Duke Levy
Name of Applicant: Edward Toomey
Address of Applicant: [REDACTED]
Phone Number of Applicant: [REDACTED]
Date of Application: 1.15.26
Names and Addresses of Adjacent Owners: N/A

Legal Description of Property: Please Include Warranty Deed

There are (are no) restrictive covenants or deed restrictions which are attached.

January 15, 2026


City of Waveland
Planning and Zoning Board
301 Coleman Avenue
Waveland, MS. 39576

Subject: Subdivide Parcel 161C-0-02-072.000

Please consider this request to subdivide Parcel 161C-0-02.072 so that Lot 6 becomes a separate parcel. We combined Lots 2 through 6 many years ago and recently sold Lots 2 through 5.

Lot 6 meets the square footage and front footage requirements set forth by the City of Waveland. The lot will be the same size as the original lot size shown on the Anna Henry Plat recorded on August 14, 1911.

Thanks

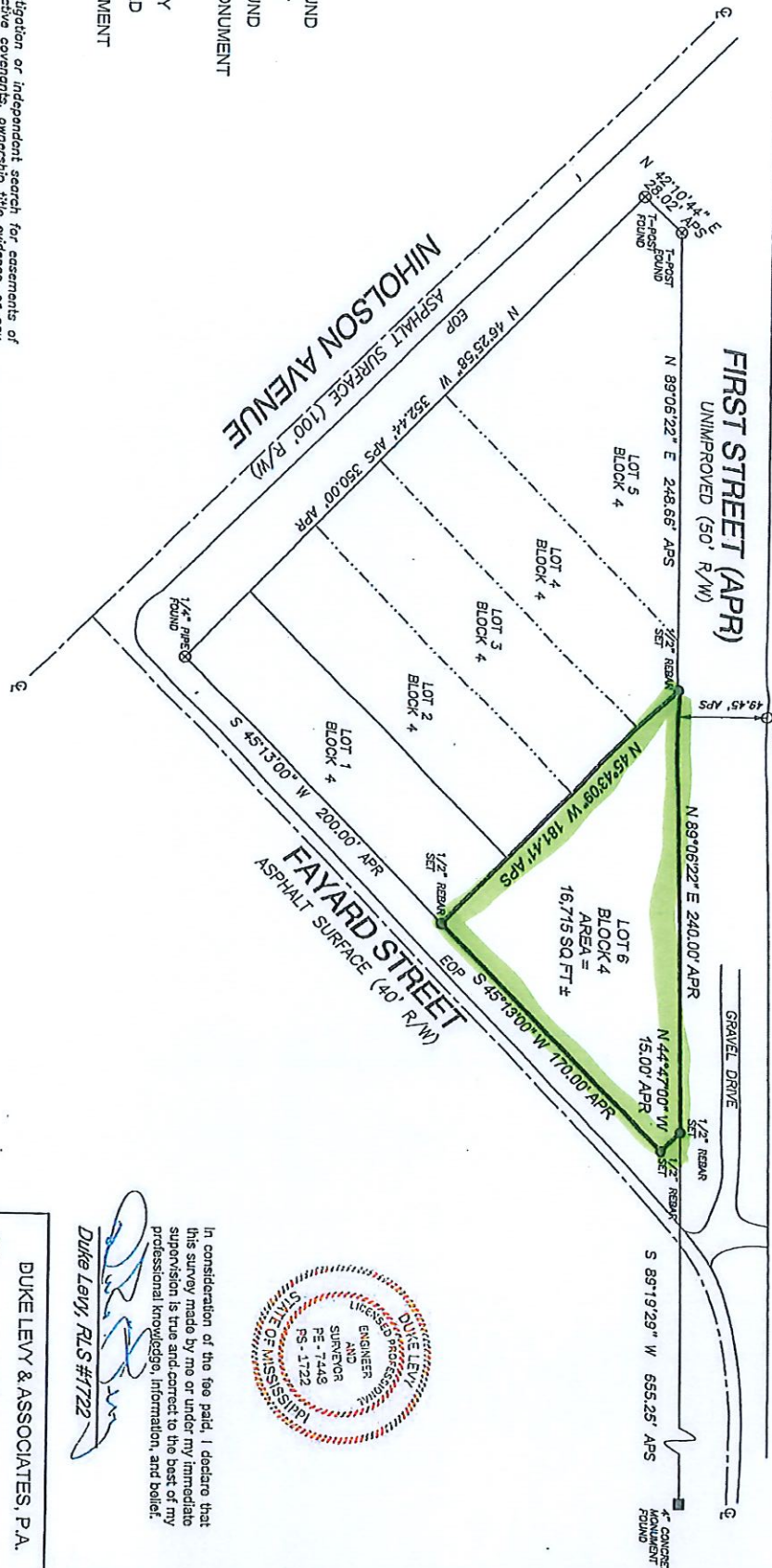
Edward Toomey


BOUNDARY SURVEY



LEGAL DESCRIPTION:

A survey of Lot 6, Block 4, Mrs. Anna Henry Subdivision of Nicholson Avenue, City of Waveland, Hancock County, Mississippi.



LEGEND:

- CENTERLINE
- IRON ROD FOUND
- IRON ROD SET
- ⊗ IRON PIPE FOUND
- ⊞ CONCRETE MONUMENT
- ⊘ POWER POLE
- ⊘ APS AS PER SURVEY
- ⊘ APR AS PER RECORD
- ⊘ EOP EDGE OF PAVEMENT

NOTES:

Surveyor has made no investigation or independent search for easements of record, encroachments, restrictive covenants, ownership title evidence, or any other facts that or otherwise and current title search may disclose. No attempt has been made as a part of this boundary survey to obtain or show data concerning existence, size, depth, condition, capacity, or location of any utility or municipal/public service facility. This survey meets Mississippi minimum requirements for a class "B" survey. Survey is valid only if print, has original seal and signature of the surveyor. No flood zone determination can be made by ordering a FEMA Elevation Certificate.

REFERENCES:

- 1) DEED BOOK BB28; PAGE 326
- 2) PLAT OF ANNA HENRY SUBDIVISION
- 3) HANCOCK COUNTY TAX MAP

BEARINGS REFERENCED TO GEODETIC BY GPS OBSERVATIONS



In consideration of the fee paid, I declare that this survey made by me or under my immediate supervision is true and correct to the best of my professional knowledge, information, and belief.

Duke Levy
Duke Levy, RLS #1722

DRAWN BY: JLC

<p>DUKE LEVY & ASSOCIATES, P.A.</p> <p>4412 LEISURE TIME DRIVE DIAMONDHEAD, MS 39525 (228) 343-9691 PHONE</p>	
SCALE:	1" = 80'
DRAWING:	W/O# 2025-219
DATE:	10-01-2025
CLIENT:	EJ TOOMEY

A. Settlement Statement

U.S. Department of Housing and Urban Development

OMB Approval No 2502-0265

1. <input type="checkbox"/> FHA	2. <input type="checkbox"/> RHS	3. <input type="checkbox"/> Conv. Unins.	6. File No. B-25-1182	7. Loan No.	8. Mortgage Insurance Case No.
4. <input type="checkbox"/> VA	5. <input type="checkbox"/> Conv. Ins.				
C. Note: This form is furnished to give you a statement of actual settlement costs. Amounts paid to and by the settlement agent are shown. Items marked "(p.o.c.)" were paid outside the closing; they are shown here for informational purposes and are not included in the totals.					
D. Name & Address of Borrower: Robert J. Walters 318 Moonraker Drive Slidell, LA 70458			E. Name & Address of Seller: Edward J. Toomey and Melinda K. Toomey 327 Demottluzin Avenue Bay St. Louis, MS 39520		F. Name & Address of Lender:
G. Property Location: NHN Fayard Street Waveland, MS 39576 Lot 6, Block 4, Anna Henry SD, Second Ward, Town of Waveland			H. Settlement Agent: Pflger Title Co. Place of Settlement: 530 Main Street Suite A Bay St. Louis, MS 39520		I. Settlement Date: 12/08/2025 Funding Date: 12/08/2025 Disbursement Date: 12/08/2025

Summary of Buyer's Transaction		Summary of Seller's Transaction	
100: Gross Amount Due from Borrower		400: Gross Amount Due to Seller	
101: Contract sales price	\$54,000.00	401: Contract sales price	\$54,000.00
102: Personal property		402: Personal property	
103: Settlement charges to borrower (line 1400)	\$1,162.00	403:	
104:		404:	
105:		405:	
Adjustment for items paid by seller in advance		Adjustment for items paid by seller in advance	
106: City/Town Taxes		406: City/Town Taxes	
107: County Taxes 12/08/2025 to 01/01/2026	\$11.96	407: County Taxes 12/08/2025 to 01/01/2026	\$11.96
108: Assessments		408: Assessments	
109:		409:	
110:		410:	
111:		411:	
112:		412:	
120: Gross Amount Due from Borrower	\$55,173.96	420: Gross Amount Due to Seller	\$54,011.96
200: Amount Paid by or in Behalf of Borrower		500: Reductions in Amount Due to Seller	
201: Deposit	\$1,000.00	501: Excess deposit (see instructions)	
202: Principal amount of new loan(s)		502: Settlement charges to seller (line 1400)	\$5,400.00
203: Existing loan(s) taken subject to		503: Existing loan(s) taken subject to	
204:		504: Payoff of First Mortgage Loan	
205:		505: Payoff of Second Mortgage Loan	
206:		506:	
207:		507:	
208:		508:	
209:		509:	
Adjustments for items unpaid by seller		Adjustments for items unpaid by seller	
210: City/Town Taxes		510: City/Town Taxes	
211: County Taxes		511: County Taxes	
212: Assessments		512: Assessments	
213:		513:	
214:		514:	
215:		515:	
216:		516:	
217:		517:	
218:		518:	
219:		519:	
220: Total Paid by/for Borrower	\$1,000.00	520: Total Reduction Amount Due Seller	\$5,400.00
300: Cash at Settlement from/to Borrower		600: Cash at Settlement to/from Seller	
301: Gross amount due from borrower (line 120)	\$55,173.96	601: Gross amount due to seller (line 420)	\$54,011.96
302: Less amounts paid by/for borrower (line 220)	\$1,000.00	602: Less reductions in amounts due seller (line 520)	\$5,400.00
303: Cash: <input checked="" type="checkbox"/> From <input type="checkbox"/> To Borrower	\$54,173.96	603: Cash: <input checked="" type="checkbox"/> To <input type="checkbox"/> From Seller	\$48,611.96

Section 5 of the Real Estate Settlement Procedures Act (RESPA) requires the following: • HUD must develop a Special Information Booklet to help persons borrowing money to finance the purchase of residential real estate to better understand the nature and costs of real estate settlement services; • Each lender must provide the booklet to all applicants from whom it receives or for whom it prepares a written application to borrow money to finance the purchase of residential real estate; • Lenders must prepare and distribute with the booklet a Good Faith Estimate of the settlement costs that the borrower is likely to incur in connection with the settlement. These disclosures are mandatory.

Section 4(a) of RESPA mandates that HUD develop and prescribe this standard form to be used at the time of loan settlement to provide full disclosure of all charges imposed upon the borrower and seller. These are third party disclosures that are designed to provide the borrower with pertinent information during the settlement process in order to be a better shopper.

The Public Reporting Burden for this collection of information is estimated to average one hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

The information requested does not lend itself to confidentiality.

		Paid From Borrower's Funds at Settlement	Paid From Seller's Funds at Settlement
700. Total Real Estate Broker Fees			
Division of Commission (line 700) as follows:			
701:	\$2,700.00 to Coldwell Banker Alfonso Realty		
702:	\$2,700.00 to Coldwell Banker Alfonso Realty		
703:	Commission paid at settlement		\$5,400.00
704:			
800. Items Payable in Connection with Loan:			
801:	Our origination charge		
802:	Your credit or charge (points) for the specific interest rate chosen		
803:	Appraisal fee		
804:	Credit report		
805:	Tax service		
806:	Flood certification		
807:			
808:			
809:			
810:			
900. Items Required by Lender to be Paid in Advance:			
901:	Daily interest charges from 12/08/2025 to 01/01/2026		
902:	Mortgage insurance premium		
903:	Homeowner's insurance		
904:			
1000. Reserves Deposited with Lender:			
1001:	Initial deposit for your escrow account		
1002:	Homeowner's insurance		
1003:	Mortgage insurance		
1004:	Property taxes		
1005:			
1006:			
1007:	Aggregate Adjustment \$0.00		
1100. Title Charges:			
1101:	Settlement or closing fee to Pifer Title Co.	\$350.00	
1102:	Owner's title insurance to Old Republic National Title Insurance Company	\$216.00	
1103:	Lender's title insurance to Old Republic National Title Insurance Company		
1104:	Lender's title policy limit \$50,000		
1105:	Owner's title policy limit \$54,000.00		
1106:	Title Abstract/Exam to Pifer Title Co.	\$245.00	
1107:	Document Preparation to Pifer Title Co.	\$175.00	
1108:	Express Mail/Courier to Pifer Title Co.		
1109:	Wire Fee to Pifer Title Co.		
1110:	Owner's Title Insurance Binder to Pifer Title Co.	\$150.00	
1200. Government Recording and Transfer Charges:			
1201:	Recording fees Deed \$26.00 Mortgage & Release \$ to Hancock County Chancery Clerk	\$26.00	
1202:	City/County tax/stamps Deed \$0.00 Mortgage \$0.00		
1203:	State tax/stamps Deed \$0.00 Mortgage \$0.00		
1204:			
1300. Additional Settlement Charges:			
1301:			
1302:			
1303:			
1304:			
1305:			
1306:			
1307:			
1308:			
1309:			
		\$1,162.00	\$5,400.00

See signature addendum



Robert J. Walters
Robert J. Walters

12-8-26
Date

Edward J. Toomey
Edward J. Toomey

12-8-25
Date

Melinda K. Toomey
Melinda K. Toomey

12-8-25
Date

The HUD-1 settlement statement which I have prepared is a true and accurate account of this transaction. I have caused or will cause the funds to be disbursed in accordance with this statement

[Signature]
Settlement Agent

12-8-25
Date