

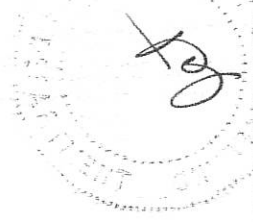
CITY OF  
**WAVELAND**  
HOSPITALITY CITY

**WAVELAND**  
**OCCUPANCY CERTIFICATE**

This Certificate issued pursuant to the requirements of the Standard Building Code certifying that at the time of issuance this structure was in compliance with the various ordinances of the Jurisdiction regulating building construction or use. For the following:

Issued to: **JIM RUHL** Permit No. **N/A**  
Building Address **116 AIKEN RD** Certificate No. **C00937**  
City, State Zip **WAVELAND, MS 39576** Security ID: **LIJE**

Issued: **2/4/2009** Expires: **END OF OCCUPANCY**  
*[Signature]* Date: **02/04/09**  
Building Official



Comments:  
THIS STRUCTURE MEETS OR EXCEEDS THE IBC/IRC 2003 BUILDING CODE HIGH VELOCITY WIND ZONE AS ADOPTED BY THE CITY OF WAVELAND

POST IN A CONSPICUOUS PLACE

# ELEVATION CERTIFICATE


OMB No. 1660-0008  
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name <u>JIM RUHL</u>		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>116 AIKEN ROAD</u> City <u>Waveland</u> State <u>Ms</u> ZIP Code <u>39576</u>		Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>N 30-17-33.2</u> Long. <u>W 089-21-15.2</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>1</u>		
A8. For a building with a crawl space or enclosure(s), provide		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) <u>NA</u> sq ft		a) Square footage of attached garage <u>NA</u> sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <u>NA</u>		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <u>NA</u>
c) Total net area of flood openings in A8.b <u>NA</u> sq in		c) Total net area of flood openings in A9.b <u>NA</u> sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <u>Waveland</u>		B2. County Name <u>Hancock</u>		B3. State <u>MS</u>	
B4. Map/Panel Number <u>285262-0004</u>	B5. Suffix <u>B</u>	B6. FIRM Index Date <u>11-16-83</u>	B7. FIRM Panel Effective/Revised Date <u>11-16-83</u>	B8. Flood Zone(s) <u>A9</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>12</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
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 <u>Daten/a</u> <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)		
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction <small>*A new Elevation Certificate will be required when construction of the building is complete.</small>		
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-g below according to the building diagram specified in Item A7. Benchmark Utilized <u>Local</u> Vertical Datum <u>NGVD 1929</u> Conversion/Comments <u>n/a</u>		
Check the measurement used.		
a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<u>16.3</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>NA</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>NA</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>NA</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	<u>16.3</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<u>10.2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<u>14.7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)

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>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.</i>			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.			
Certifier's Name <u>Duke Levy</u>		License Number <u>01722</u>	
Title <u>Surveyor</u>		Company Name <u>Duke Levy and Associates, P.A.</u>	
Address <u>1711 Waveland Ave</u>		City <u>Waveland</u>	State <u>MS</u> ZIP Code <u>39576</u>
Signature 	Date <u>08/07/07</u>	Telephone <u>228-467-5212</u>	



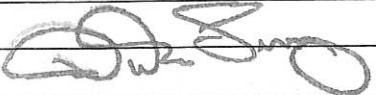
<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 116 AIKEN ROAD	Policy Number
City Waveland StateMsZIP Code 39576	Company NAIC Number

**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 lowest machinery is A/C

TBM (TOP OF FIRE HYDRANT VALVE ACROSS FROM 115 AIKEN ROAD ELEV. = 17.5)

Signature  Date 08/07/07  Check here if attachments

**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, crawl space, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the HAG.

b) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.

E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 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. and G9.

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.-G9.) is provided for community floodplain management purposes.

G4. Permit Number _____	G5. Date Permit Issued _____	G6. Date Certificate Of Compliance/Occupancy Issued _____
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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 (PR) Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters (PR) Datum \_\_\_\_\_

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____
Comments _____	

Check here if attachments

2009 1631  
Recorded in the Above  
Deed Book & Page  
02-04-2009 09:35:49 AM  
Timothy A Kellar  
Hancock County

WAVELAND

NONCONVERSION AGREEMENT

with

CITY OF WAVELAND, MISSISSIPPI

This DECLARATION made this 4th day of Feb., 20 09,  
by Jim Ruhl ("Owner") having an address at  
116 Aiken Rd

WITNESSETH:

WHEREAS, the Owner is the record owner of all that real property located at  
116 Aiken Rd in the City of Waveland, Ms. in the County of Hancock,  
designated in the Tax Records as 16B-2-01-050-000

WHEREAS, the Owner has applied for a permit to place a structure on that property that has an  
enclosed area below the base flood elevation constructed in accordance with the requirements of  
Article No. 5, Section "B" paragraph 5 of the Waveland Floodplain Management Ordinance of Number  
325 and under Permit Number 09831.

WHEREAS, the Owner agrees to record this DECLARATION and certifies and declares that the  
following covenants, conditions and restrictions are placed on the affected property as a condition of  
granting the Permit, and affects rights and obligations of the Owner and shall be binding on the Owner,  
his heirs, personal representatives, successors, future owners, and assigns.

UPON THE TERMS AND SUBJECT TO THE CONDITIONS, as follows:

1. The structure or part thereof to which these conditions apply is:
2. At this site, the Base Flood Elevation is 10 feet above mean sea level, National Geodetic Vertical Datum.
3. Enclosed areas below the Base Flood Elevation shall be used solely for parking of vehicles, limited storage, or access to the building. All interior walls, ceilings and floors below the Base Flood Elevation shall be unfinished or constructed of flood resistant materials. Mechanical, electrical or plumbing devices shall not be installed below the Base Flood Elevation.
4. The walls of the enclosed areas below the Base Flood Elevation shall be equipped and remain equipped with openings as shown on the Permit.
5. The jurisdiction issuing the Permit and enforcing the Ordinance may take any appropriate legal action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.
6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.
7. Other conditions:

In witness whereof the undersigned set their hands and seals this 4th day of Feb., 20 09

James Ruhl  
Owner



State of Mississippi County of Hancock  
Personally appeared before me, the undersigned  
authority in and for the said county and state,  
Witness  
Timothy A. Kellar on this 4th day of Feb 20 09 within  
Chancery Clerk my jurisdiction, the within named James Ruhl  
By: [Signature] who acknowledged that he executed the  
above and foregoing instrument.

2/04/2009 REAL PROPERTY APPRAISAL MASTER FILE INQUIRY 09:28:48  
 State ID: 161B-2-01-050.000 ACCOUNT # 161 YEAR APPRAISED:  
 -----ACREAGE----- TAX MTG REC JUD EXMPT  
 MAP PARCEL SCT QTR TWN RNG DEEDED CALCULATED DIST CODE LOC DST CODE  
 01 09 14W 1450 0  
 BEAT: 2 CITY: 2 SCHOOL: 1 SPECIAL: 0

OWNER CODE....  
 OWNER NAME....: RUHL JAMES ETUX TRUSTEES LAST UPDATED  
 IN CARE OF....: Date: 8/16/2007  
 MAILING ADDR...: 6841 VANGUARD AVE BY: GWALTMAN  
 CITY/STATE/ZIP: GARDEN GROVE CA 92845  
 PROPERTY STR ADDR: No. 116 Name: AIKEN RD

Town:  
 BRIEF DESCR: 3 BLK 2 GAYLE AIKEN SUBD  
 SUBDIVISION: 000000169 BLOCK: LOT#: LOT SIZE:  
 ZONED:

DEED INFO:	DATE	BOOK	PAGE	DATE	BOOK	PAGE	DATE	BOOK	PAGE
	5/12/2004	BB283	382	6/20/2001	BB229	306	10/27/1998	B179	199
	6/22/1995	B122	0228	11/08/1994	B112	89			

SPECIAL ASMNT: CD BENEFIT CD BENEFIT CD BENEFIT CD BENEFIT CD BENEFIT CD BENEFIT

F6 - Land Info F7 - Building Info F8 - Homestead F12 - Exit

2009 1632  
 Deed Book & Page

Hancock County  
 I certify this instrument was filed on  
 02-04-2009 09:35:49 AM  
 and recorded in Deed Book  
 2009 \* Page 1632  
 Timothy A. Kella  
 CLERK  
 HANCOCK COUNTY, MS  
*Latie L. Lee*