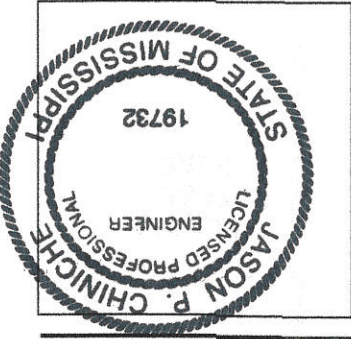


Signature *Jason Chiniche*  
 Date 05/21/15  
 Telephone (228) 467-6755  
 Address 721 OLD SPANISH TRAIL  
 City BAY ST. LOUIS State MS ZIP Code 39520  
 Title PROJECT MANAGER  
 Company Name JAMES J. CHINICHE, PA, INC.  
 Certifier's Name JASON P. CHINICHE  
 License Number P.E. 19732

Check here if attachments.  
 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

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.



**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION**

a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 21.0 feet  meters  
 b) Top of the next higher floor N/A feet  meters  
 c) Bottom of the lowest horizontal structural member (V Zones only) N/A feet  meters  
 d) Attached garage (top of slab) N/A feet  meters  
 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) N/A feet  meters  
 f) Lowest adjacent (finished) grade next to building (LAG) 14.3 feet  meters  
 g) Highest adjacent (finished) grade next to building (HAG) 14.3 feet  meters  
 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support N/A feet  meters

\*A new Elevation Certificate will be required when construction of the building is complete.  
 Construction Drawings\*  Building Under Construction\*  Finished Construction  
 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: SLV-13  
 Vertical Datum: NAVD 1988  
 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.

**SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)**

B1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction  
 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: \_\_\_\_\_

B4. Map/Panel Number 28045C0361	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) (Zone AO, use base flood depth) 20
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B1. NEIP Community Name & Community Number  
WAVELAND 285262  
 B2. County Name  
HANCOCK  
 B3. State  
MS

**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential  
 A5. Latitude/Longitude: Lat. 30-17-33.7 Long. -89-21-05.2 Horizontal Datum:  NAD 1927  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 5  
 A8. For a building with a crawlspace or enclosure(s):  
 a) Square footage of crawlspace or enclosure(s) N/A sq ft  
 b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A  
 c) Total net area of flood openings in A8 b N/A sq in  
 d) Engineered flood openings?  Yes  No  
 A9. For a building with an attached garage:  
 a) Square footage of attached garage N/A sq ft  
 b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A  
 c) Total net area of flood openings in A9 b N/A sq in  
 d) Engineered flood openings?  Yes  No

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
 LOT 2, ACADIAN BAY SUBDIVISION, WAVELAND

**SECTION A - PROPERTY INFORMATION**

A1. Building Owner's Name DANNY LEE AND BRANDON SHAW  
 Policy Number:  
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
 125 ACADIAN BAY LANE (VACANT LAND)  
 City WAVELAND  
 State MS ZIP Code 39576  
 Company NAIC Number:  
 FOR INSURANCE COMPANY USE

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

**ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1-9.

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_  
 Community Name \_\_\_\_\_ Telephone \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Comments \_\_\_\_\_  
 Check here if attachments.

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 \_\_\_\_\_

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

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

The local official who is authorized by law 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.

Property Owner's or Owner's Authorized Representative's Name \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 Comments \_\_\_\_\_  
 Check here if attachments.

**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.

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 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.

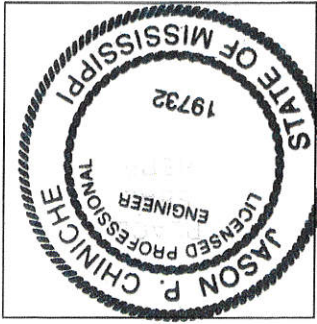
Comments NOTE:  
 THE DESCRIPTION IN A3, ABOVE IS FOR INFORMATION ONLY & NOT TO CERTIFY THE BUILDING LOCATION.  
 THE BASE FLOOD ELEVATION (BFE) IS PER MAP IN SECTION B4, RECOMMEND VERIFICATION OF (BFE) BY LOCAL BUILDING OFFICIAL. THE FLOOD ZONE IS DETERMINED BY GRAPHIC PLOTTING, CITY OF WAVELAND REQUIRES A 1 FT. FREEBOARD, TBM (TEMPORARY BENCHMARK IS A CONCRETE NAIL THRU BOTTLE CAP IN EDGE OF ASPHALT BETWEEN LOTS 2 & 3, ELEVATION 11.3 FT.)

Signature *Juan Chirle* Date 05/21/15

**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.

City WAVELAND	State MS	ZIP Code 39576	Company NAIC Number
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number	FOR INSURANCE COMPANY USE	
125 ACADIAN BAY LANE			



Signature: *Jason Chinchic*  
 Date: 09/02/15  
 Telephone: (228) 467-6755  
 Address: 412 HWY 90 Suite 11  
 City: BAY ST. LOUIS  
 State: MS  
 ZIP Code: 39520  
 Title: PROJECT MANAGER  
 Company Name: JAMES J. CHINICHE, PA, INC.  
 Certifier's Name: JASON P. CHINICHE  
 License Number: P.E. 19732

Check here if comments are provided on back of form.  
 Check here if attachments.  
 I certify that the information on this Certificate represents my best efforts to interpret the data available. Information, 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

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION**

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)  feet 23.7  
 b) Top of the next higher floor  feet N/A  
 c) Bottom of the lowest horizontal structural member (V Zones only)  feet N/A  
 d) Attached garage (top of slab)  feet N/A  
 e) Lowest elevation of machinery or equipment servicing the building  feet N/A  
 (Describe type of equipment and location in Comments)  
 f) Lowest adjacent (finished) grade next to building (LAG)  feet 14.3  
 g) Highest adjacent (finished) grade next to building (HAG)  feet 14.3  
 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support  feet N/A

Check the measurement used.

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.  
 Benchmark Utilized: SLV-13  
 Vertical Datum: NAVD 1988  
 \*A new Elevation Certificate will be required when construction of the building is complete.  
 Construction Drawings\*  Building Under Construction\*  Finished Construction  
 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.

**SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)**

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: \_\_\_\_\_  
 CBRIS  OPA

B4. Map/Panel Number 28045C0361	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) (Zone AO, use base flood depth) 20
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B1. NFIP Community Name & Community Number WAVELAND 285262	B2. County Name HANCOCK	B3. State MS
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**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): Residential  
 A5. Latitude/Longitude: Lat: 30-17-33.7 Long: -89-21-05.2 Horizontal Datum:  NAD 1927  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 5  
 A8. For a building with a crawlspace or enclosure(s):  
 a) Square footage of crawlspace or enclosure(s)  sq ft N/A  
 b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade  N/A  
 c) Total net area of flood openings in A8.b  sq ft N/A  
 d) Engineered flood openings?  Yes  No  
 A9. For a building with an attached garage:  
 a) Square footage of attached garage  sq ft N/A  
 b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade  N/A  
 c) Total net area of flood openings in A9.b  sq ft N/A  
 d) Engineered flood openings?  Yes  No

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
 LOT 2, ACADIAN BAY SUBDIVISION, WAVELAND

City: WAVELAND  
 State: MS  
 ZIP Code: 39576

A1. Building Owner's Name: DANNY LEE AND BRANDON SHAW  
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 125 ACADIAN BAY LANE  
 A3. Company NAIC Number:  
 Policy Number:  
**FOR INSURANCE COMPANY USE**

Important: Read the instructions on pages 1-9.

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

**ELEVATION CERTIFICATE**

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_ Telephone \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_ Comments \_\_\_\_\_

Check here if attachments.

- 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 \_\_\_\_\_

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

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

Property Owner's or Owner's Authorized Representative's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.

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.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

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

Signature *Juan Christie* Date 09/02/15

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.

THE DESCRIPTION IN A3, ABOVE IS FOR INFORMATION ONLY & NOT TO CERTIFY THE BUILDING LOCATION. THE BASE FLOOD ELEVATION (BFE) IS PER MAP IN SECTION B4. RECOMMEND VERIFICATION OF (BFE) BY LOCAL BUILDING OFFICIAL. THE FLOOD ZONE IS DETERMINED BY GRAPHIC PLOTTING. \* TOP OF BEAM.

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

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

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. 125 ACADIAN BAY LANE	City WAVELAND
Policy Number:	State MS ZIP Code 39576	Company NAIC Number:

Rear View

09/02/15 Front View Only



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.

FOR INSURANCE COMPANY USE	<p><b>IMPORTANT:</b> In these spaces, copy the corresponding information from Section A.</p> <p>See Instructions for Item A6.</p>
Policy Number:	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 125 ACADIAN BAY LANE
Company NAIC Number:	City WAVELAND State MS ZIP Code 39576

# Building Photographs

# 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	DANNY LEE AND BRANDON SHAW
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	125 ACADIAN BAY LANE
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	LOT 2, ACADIAN BAY SUBDIVISION, WAVELAND
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential	
A5. Latitude/Longitude: Lat. 30-17-33.7 Long. -89-21-05.2	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	5
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s)	N/A
b) Number of permanent flood openings in the crawlspace	N/A
c) Total net area of flood openings in A8.b	N/A
d) Engineered flood openings?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
A9. For a building with an attached garage:	
a) Square footage of attached garage	N/A
b) Number of permanent flood openings in the attached garage	N/A
c) Total net area of flood openings in A9.b	N/A
d) Engineered flood openings?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

City WAVELAND State MS ZIP Code 39576

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
LOT 2, ACADIAN BAY SUBDIVISION, WAVELAND

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential  
A5. Latitude/Longitude: Lat. 30-17-33.7 Long. -89-21-05.2 Horizontal Datum:  NAD 1927  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 5  
A8. For a building with a crawlspace or enclosure(s):  
a) Square footage of crawlspace or enclosure(s) N/A  
b) Number of permanent flood openings in the crawlspace N/A  
c) Total net area of flood openings in A8.b N/A  
d) Engineered flood openings?  No  Yes

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number	WAVELAND 285262
B2. County Name	HANCOCK
B3. State	MS

B4. Map/Panel Number	28045C0361
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) (Zone A0, use base flood depth)	20

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)?  No  Yes  
Designation Date: \_\_\_\_\_

## 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: SLV-13  
Vertical Datum: NAVD 1988  
Datum used for building elevations must be the same as that used for the BFE.  
Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 23.8 feet  meters  
b) Top of the next higher floor 34.4 feet  meters  
c) Bottom of the lowest horizontal structural member (V Zones only) N/A feet  meters  
d) Attached garage (top of slab) N/A feet  meters  
e) Lowest elevation of machinery or equipment servicing the building 23.7 feet  meters  
(Describe type of equipment and location in Comments)

f) Lowest adjacent (finished) grade next to building (LAG) 14.3 feet  meters  
g) Highest adjacent (finished) grade next to building (HAG) 14.7 feet  meters  
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 14.3 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 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.  
 Check here if attachments.  
Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No

Certifier's Name JASON P. CHINICHE License Number P.E. 19732

Title PROJECT MANAGER Company Name JAMES J. CHINICHE, PA, INC.

Address 721 OLD SPANISH TRAIL City BAY ST. LOUIS State MS ZIP Code 39520

Signature *Jason Chiniche* Date 02/19/16 Telephone (228) 467-6755



**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. 125 ACADIAN BAY LANE
Policy Number:	City WAVELAND
Company NAIC Number:	State MS ZIP Code 39576

**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 NOTE: THE DESCRIPTION IN A3 ABOVE IS FOR INFORMATION ONLY & NOT TO CERTIFY THE BUILDING LOCATION. THE BASE FLOOD ELEVATION (BFE) IS PER MAP IN SECTION B4, RECOMMEND VERIFICATION OF (BFE) BY LOCAL BUILDING OFFICIAL. THE FLOOD ZONE IS DETERMINED BY GRAPHIC PLOTTING. Owner is responsible for coordinating this certificate with Contractor and/or Building Official as needed. SEC.C2.a) AC CONDENSER ON ELEVATED PLATFORM.

**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 \_\_\_\_\_

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.

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.)

A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

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.

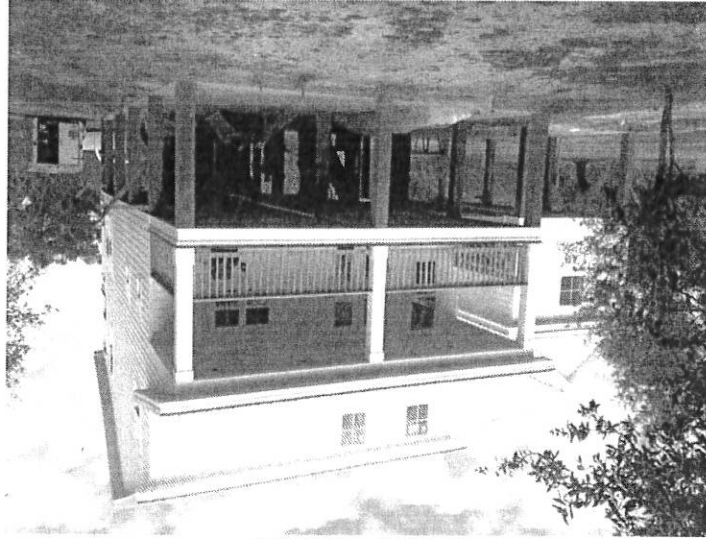
**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

FOR INSURANCE COMPANY USE	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 125 ACADIAN BAY LANE
Policy Number:	City WAVELAND State MS ZIP Code 39576
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.



02/19/16 Front View



02/19/16 Rear View



James J. Chiniche, P.A. Inc  
 412 HWY 90 Suite 11  
 Bay St. Louis, MS 39520  
 228-467-6755  
 jason@jjc-eng.com



Date	2/22/2016
Invoice #	2016-061

Bill To
Danny Lee 125 Acadian Bay Lane Waveland, MS 39576 228-342-2984
Project
Final EC

Item	Description	Serviced	Qty	Rate	Amount
Survey Services	Final Elevation Certificate	2/22/2016	1	100.00	100.00

1% Service Charge on all accounts over 30 days  
 Thank you for your business!

**Balance Due**  
 \$100.00

**Invoice**

WAVELAND

NONCONVERSION AGREEMENT

with

CITY OF WAVELAND, MISSISSIPPI

This DECLARATION made this 23<sup>rd</sup> day of February, 2016, by Brandon K. Stew + Donnell Dejean ("Owner") having an address at 125 Acadian Bay Ln.

WITNESSETH:

WHEREAS, the Owner is the record owner of all that real property located at 125 Acadian Bay Ln.

designated in the Tax Records as 161B-2-01-010.002 in the City of Waveland, Ms. in the County of Hancock,

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 11696 and under Permit Number 11696

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 20' 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 23<sup>rd</sup> day of Feb. 2016

State of Mississippi, County of Hancock  
Personally appeared before me, the undersigned authority in and for the said county and state, Brandon K. Stew + Donnell Dejean on this 23<sup>rd</sup> day of Feb., 2016, with me as witness, within my jurisdiction, the within named Brandon K. Stew + Donnell Dejean who acknowledged that me executed the above and foregoing instrument.

(Seal) \_\_\_\_\_  
Owner



By: Timothy A. Kellar  
Chancery Clerk  
DC

2016 2216  
Recorded in the Above  
Deed Book & Page  
02-23-2016 10:52:07 AM  
Timothy A Kellar  
Hancock County

My Commission Expires Dec. 31, 2019

2016 2217  
Deed Book & Page

2015 1253  
Recorded in the Above  
Deed Book & Page  
02-05-2015 10:39:03 AM  
Timothy A Keller  
Hancock County

Prepared by & return to:  
Preston J. Mautray (MSB #101131)  
Landmark Title & Escrow Co., Inc.  
521 Ulman Ave.  
Bay St. Louis, MS 39520  
Telephone: (228) 467-4675  
Facsimile: (228) 467-4656  
File No.: 1125-28613

INDEX: Lots 2, ACADIAN BAY S/D, 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,

**BRANDON K. SHAW, Grantor**  
6056 Monroe St., Bay St. Louis, MS 39520  
(228) 342-4199

do hereby sell, convey and warrant unto

**BRANDON KYLE SHAW AND DARRRELL DANIEL LEE, JR., Grantees**  
6056 Monroe St., Bay St. Louis, MS 39520  
(228) 342-4199 / (228) 342-3984

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:

**Lot 2, ACADIAN BAY SUBDIVISION, Waveland, Hancock County, Mississippi, as per the official plat of record in the land records of Hancock County, Mississippi at Plat Book 8, Page 31.**

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

2016 2218 Deed Book & Page  
2015 1254 Deed Book & Page

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 the taxes for the current year have been prorated as of this date on an

estimated basis, and that when said taxes are actually determined, if the proration as of this date is incorrect, the

parties herein agree to pay on a basis of an actual proration. All subsequent years taxes are specifically assumed by

Grantees herein.

WITNESS my signature, this the 3<sup>rd</sup> day of February, 2015.

*Brandon K Shaw*  
BRANDON K. SHAW, Grantor

State of Mississippi

County of Hancock

PERSONALLY CAME AND APPEARED before me, the undersigned authority in and for the jurisdiction

of 3<sup>rd</sup> day of February, 2015, the within named BRANDON K. SHAW, who

acknowledged that he signed and delivered the foregoing instrument of writing on the day and year therein

mentioned.

*Regina L Gieber*  
NOTARY PUBLIC



Hancock County  
I certify this instrument was filed on  
02-05-2015 10:39:03 AM  
and recorded in Deed Book  
2015 at pages 1253 - 1254  
Timothy A Kellar  
*Shelia Daniels*



Hancock County  
I certify this instrument was filed on  
02-23-2016 10:52:07 AM  
and recorded in Deed Book  
2016 at pages 2219  
Timothy A Kellar



Timothy A Kellar  
Chancery Clerk  
Hancock County, MS  
DC:

Witness my hand and seal this 23 Day of February, 2016.

I, Timothy A Kellar, 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 - 2015, AT PAGE - 1253 in said court.

\*\*\* Certified Copy Page \*\*\*

Hancock County  
Chancery Clerk  
Instrument Recording Receipt

Book: Deed

Inst: Agreement

Book/Page: 2016 / 2216

Ref: DARRELL LEE 1097

Archiver Record Management

Deed

Recording Fee

Total Fees :

\$

12.00

Total Due :

\$

12.00

Checks Paid:

\$

12.00

Total Paid :

\$

12.00

Change Due :

\$

0.00

Have a Nice Day  
Timothy A Kalliar

Term/Cashier: RM175-03-9MFOO / KATIE

Tran: 11221.155820.187782

Printed: 02-23-2016 10:52:07 AM