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

OMB No. 1660-0008
Expiration Date: November 30

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

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

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	SECT	ION A - PROPERTY	INFOR	NOITAN		FOR INSU	RANCE COMPANY USE
A1. Building Owne JONATHAN AMICO						Policy Num	ber:
A2. Building Street Box No. 217 FAVRE ST	Address (incl	uding Apt., Unit, Suite	e, and/or	Bldg. No.) or P.O.	Route and	Company N	NAIC Number:
City WAVELAND		***************************************		State MS		ZIP Code 3	9576
A3. Property Desc TAX PARCEL # 16	•	nd Block Numbers, Ta 001	x Parcel	Number, Legal De	escription, etc.		
A4. Building Use (e.g., Residen	tial, Non-Residential,	Addition,	Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longit	tude: Lat. <u>30</u>	9-16-59.2		ong. 89-22-32.6	Horizontal Datur	n: NAD	1927 🔀 NAD 83
A6. Attach at least	2 photograph	ns of the building if the	e Certifica	ate is being used to	o obtain flood insur	ance.	
A7. Building Diagra	am Number	5					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawls	space or enclosure(s)	N/A s	sq ft			
b) Number of	permanent flo	ood openings in the cr	awlspace	e or enclosure(s) v	vithin 1.0 foot above	adjacent gr	ade N/A
c) Total net ar	ea of flood op	enings in A8.b N/A	s	q in			
d) Engineered	flood openin	gs? Yes X N	lo				
A9. For a building v	with an attach	ed garage:					
a) Square foot	tage of attach	ed garage N/A		sq ft			
b) Number of	permanent flo	ood openings in the at	tached g	arage within 1.0 fo	oot above adjacent	grade N/A	
c) Total net an	ea of flood op	enings in A9.b N/A		sq in		<u> </u>	
d) Engineered				. '			
		_		NOT DATE MAD	(FIDAN INFORMA	TION	
D4 NED Commun		CTION B - FLOOD I	NSUKA			ATION	
B1. NFIP Commun 285262 WAVELAN	_	ommunity Number		B2. County HANCOC			B3. State MS
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date		RM Panel fective/	B8. Flood Zone (·	se Flood Elevation(s)
28045C0342	D	10/16/09	Re	evised Date 16/09	AE	Depth)	AO, use Base 19 SEE MMENTS
B10. Indicate the so	ource of the E	lase Flood Elevation ((BFE) da	ta or base flood de	epth entered in Item	B9:	
FIS Profile	FIRM	Community Deter	mined [Other/Source:			
B11. Indicate eleva	ation datum u	sed for BFE in Item B	9: 🔲 N	GVD 1929 🛛 N	AVD 1988 🔲 O	her/Source:	
B12. Is the building	g located in a	Coastal Barrier Reso	urces Sy	stem (CBRS) area	a or Otherwise Prot	ected Area (OPA)? Yes X No
Designation [- Date: N/A		CBRS	☐ OPA		·	
							
Ī							

OMB No. 1660-0008

MPORTANT: In these spaces, copy the corresponding infor	mation from Sect	ion A.	FOR INSURANC	E COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. 17 FAVRE ST	No.) or P.O. Rout	e and Box 5097	Policy Number:	
City WAVELAND State MS	ZIP (Code 39576	Company NAIC N	lumber ein ic zapaci ii yo
SECTION C - BUILDING ELEVAT	ION INFORMAT	ON (SURVEY RE	QUIRED)	
 C1. Building elevations are based on: X Construction Dra *A new Elevation Certificate will be required when constru C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V Complete Items C2.a–h below according to the building di 	ction of the buildin 1–V30, V (with BF agram specified ir	E), AR, AR/A, AR/A Item A7. In Puerto	AE, AR/A1–A30, <i>A</i>	
Benchmark Utilized: VRS NETWORK\ Indicate elevation datum used for the elevations in items a	-	NAVD 88		
NGVD 1929 X NAVD 1988 Other/Source		slock Numr ers, I's		
Datum used for building elevations must be the same as the	hat used for the Bl	FE.	Check the me	asurement used.
a) Top of bottom floor (including basement, crawlspace, o	or enclosure floor)	20.0	[X] feet	meters
b) Top of the next higher floor	Long 89-2	N/A . 5 98-2	feet in	meters
c) Bottom of the lowest horizontal structural member (V Z	ones only)	N/A .	X feet	meters
d) Attached garage (top of slab)	Centing is a pain	N/A .	feet	meters
e) Lowest elevation of machinery or equipment servicing (Describe type of equipment and location in Comments)		N/A	X_feet	meters
f) Lowest adjacent (finished) grade next to building (LAG	N/A soft (14.6	feet	meters
g) Highest adjacent (finished) grade next to building (HAC	wispace or enc (E	a_15.1	X feet	meters
 h) Lowest adjacent grade at lowest elevation of deck or st structural support 	tairs, including	N/A	X feet	meters
SECTION D – SURVEYOR, ENG	INEER, OR ARC	HITECT CERTIFI	CATION	a) Pagineere
This certification is to be signed and sealed by a land surveyor I certify that the information on this Certificate represents my be statement may be punishable by fine or imprisonment under 18	est efforts to interp 8 U.S. Code, Secti	ret the data availa	law to certify elev	ation information. that any false
Were latitude and longitude in Section A provided by a licensed	d land surveyor?	XYes ☐ No	Check here	e if attachments.
	ense Number 3 3037	AM G.GA ni egni	n eo beeltik	No.
Title LAND SURVEYOR	OI.	X 83V	MILLONALI OREO P	ROFES
Company Name RIED & ASSOCIATES LLC	19	menth vumber		ade Carlyda II
Address 9526 BENESHEEWAH TRAIL	E. FIRM Page	is FIRM index	PS PS	3047
52 St. 62 L. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Effectivel at Revised Da	ZIP Code 39571	M.O.	VISSISON
Signature Date 06/2	e 11/18	Telephone 228 205-4007		
Copy all pages of this Elevation Certificate and all attachments for	(1) community offi	cial, (2) insurance a	gent/company, an	d (3) building owne
Comments (including type of equipment and location, per C2(e SHOWN IN C2a IS ONE FOOT ABOVE THE BASE FLOOD EL BUILDING CODE. BENCH MARK IS NAIL IN POWER POLE WITH ORANGE FLAGGING AT THE NORTHWEST CORNER	LVATION PER CIT AT 15.67 FEET EL	Y OF WAVELAND		RT1 Inducate ris
	CBRS OPA			

OMB No. 1660-0008

IMPORTANT: In these spaces, copy the corresponding	g information from Se	ection A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/o 217 FAVRE ST	or Bldg. No.) or P.O. Ro	ute and Box No	Policy Number:
City WAVELAND Sta	ate MS ZIP	² Code 39576	Company NAIC Number
SECTION E – BUILDING ELE FOR ZONE	VATION INFORMATION OF A CONTROL OF THE CONTROL OF T		REQUIRED)
For Zones AO and A (without BFE), complete Items E1–I complete Sections A, B,and C. For Items E1–E4, use nat enter meters.	E5. If the Certificate is in ural grade, if available.	ntended to support a Check the measure	LOMA or LOMR-F request, ment used. In Puerto Rico only,
E1. Provide elevation information for the following and che the highest adjacent grade (HAG) and the lowest adjacent grade (HAG).		xes to show whethe	the elevation is above or below
crawlspace, or enclosure) is	N/A	feet mete	rs above or below the HAG.
 Top of bottom floor (including basement, crawlspace, or enclosure) is 	<u>N/A</u>	feet mete	rs above or below the LAG.
E2. For Building Diagrams 6-9 with permanent flood ope	nings provided in Section	on A Items 8 and/or	9 (see pages 1–2 of Instructions),
the next higher floor (elevation C2.b in the diagrams) of the building is	<u>N/A</u>	feet mete	rs above or below the HAG.
E3. Attached garage (top of slab) is	. <u>N/A</u>	feet mete	rs above or below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is	N/A 	feet meter	rs above or below the HAG.
E5. Zone AO only: If no flood depth number is available, floodplain management ordinance? Yes 1			cordance with the community's certify this information in Section G.
	R (OR OWNER'S REP	PRESENTATIVE) CI	ERTIFICATION
SECTION F PROPERTY OWNE	(- ,		
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	who completes Section	ns A, B, and E for Zo s A, B, and E are cor	one A (without a FEMA-issued or rect to the best of my knowledge.
The property owner or owner's authorized representative	who completes Section statements in Sections	ns A, B, and E for Zo s A, B, and E are cor	one A (without a FEMA-issued or rect to the best of my knowledge.
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	who completes Section statements in Sections	ns A, B, and E for Zo s A, B, and E are cor	one A (without a FEMA-issued or rect to the best of my knowledge.
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	who completes Section statements in Sections	s A, B, and E are cor	one A (without a FEMA-issued or rect to the best of my knowledge.
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The Property Owner or Owner's Authorized Representative's	who completes Section statements in Sections Name	s A, B, and E are cor	rect to the best of my knowledge.
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The Property Owner or Owner's Authorized Representative's Address	who completes Sections statements in Sections Name City	s A, B, and E are cor	ate ZIP Code
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The Property Owner or Owner's Authorized Representative's Address Signature	who completes Sections statements in Sections Name City	s A, B, and E are cor	ate ZIP Code
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The Property Owner or Owner's Authorized Representative's Address Signature	who completes Sections statements in Sections Name City	s A, B, and E are cor	ate ZIP Code
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The Property Owner or Owner's Authorized Representative's Address Signature	who completes Sections statements in Sections Name City	s A, B, and E are cor	ate ZIP Code
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The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The Property Owner or Owner's Authorized Representative's Address Signature	who completes Sections statements in Sections Name City	s A, B, and E are cor	ate ZIP Code
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The Property Owner or Owner's Authorized Representative's Address Signature	who completes Sections statements in Sections Name City	s A, B, and E are cor	ate ZIP Code
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The Property Owner or Owner's Authorized Representative's Address Signature	who completes Sections statements in Sections Name City	s A, B, and E are cor	ate ZIP Code
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The Property Owner or Owner's Authorized Representative's Address Signature	who completes Sections statements in Sections Name City	s A, B, and E are cor	ate ZIP Code
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The Property Owner or Owner's Authorized Representative's Address Signature	who completes Sections statements in Sections Name City	s A, B, and E are cor	ate ZIP Code
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The Property Owner or Owner's Authorized Representative's Address Signature	who completes Sections statements in Sections Name City	s A, B, and E are cor	ate ZIP Code
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The Property Owner or Owner's Authorized Representative's Address Signature	who completes Sections statements in Sections Name City	s A, B, and E are cor	ate ZIP Code
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The Property Owner or Owner's Authorized Representative's Address Signature	who completes Sections statements in Sections Name City	s A, B, and E are cor	ate ZIP Code
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The Property Owner or Owner's Authorized Representative's Address Signature	who completes Sections statements in Sections Name City	s A, B, and E are cor	ate ZIP Code

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 217 FAVRE ST	No. Policy Number:
City WAVELAND State MS ZIP Code 3957	Company NAIC Number
SECTION G - COMMUNITY INFORMATION (OPTI	ONAL)
The local official who is authorized by law or ordinance to administer the community's floody Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) used in Items G8–G10. In Puerto Rico only, enter meters.	
G1. The information in Section C was taken from other documentation that has been sengineer, or architect who is authorized by law to certify elevation information. (Induction data in the Comments area below.)	igned and sealed by a licensed surveyor, dicate the source and date of the elevation
G2. A community official completed Section E for a building located in Zone A (withou or Zone AO.	
G3. The following information (Items G4–G10) is provided for community floodplain m	anagement 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 Improver	nent
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 (including type of equipment and location, per C2(e), if applicable)	
	Check here if attachments.

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

National Flood Insurance Program

OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

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

	SECT	ION A - PROPERTY	NFORMATION]		FOR INSUF	RANCE COMPANY USE
A1. Building Owner JONATHAN AMICO						Policy Num	ber:
A2. Building Street Box No. 217 FAVRE ST	Address (incl	uding Apt., Unit. Suite,	and/or Bldg. N	o.) or P.O.	Route and	Company N	AIC Number:
City WAVELAND			Sta	te MS		ZIP Code 3	9576
A3. Property Desc TAX PARCEL # 16		nd Block Numbers, Tax 001	Parcel Numbe	r, Legal De	scription, etc.		
A4. Building Use (e.g., Residen	tial, Non-Residential, A	ddition, Access	ory, etc.)	RESIDENTIAL		
A5. Latitude/Longi	tude: Lat. <u>30</u>	-16-59.2	Long. 89	9-22-32.6	Horizontal Datum	ı: NAD 1	927 🛛 NAD 83
A6. Attach at least	2 photograph	as of the building if the	Certificate is be	ing used to	o obtain flood insura	ince.	
A7. Building Diagra	am Number	5					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawls	space or enclosure(s)	N/A sq ft				
b) Number of	permanent flo	ood openings in the cra	wispace or end	losure(s) w	vithin 1.0 foot above	adjacent gr	ade N/A
c) Total net ar	ea of flood op	enings in A8.b N/A	sq in				
d) Engineered	flood openin	gs? Tyes X No)				
A9. For a building	with an attach	ed garage:					
a) Square foo	tage of attach	ed garage N/A	sq ft				
b) Number of	permanent flo	od openings in the atta	ached garage w	rithin 1.0 fo	ot above adjacent g	rade N/A	
c) Total net ar	ea of flood op	enings in A9.b N/A	sq in			p-symmetry that Maddle	
d) Engineered	•		0				
	SE	CTION B - FLOOD IN	ISURANCE R	ATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Commun	ity Name & C	ommunity Number		B2. County	Name		
285262 WAVELAN	ID			HANCOC	K		B3. State MS
84. Map/Panel	B5. Suffix	B6. FIRM Index	B7. FIRM Par	iel	B8. Flood Zone (s) B9. Bas	se Flood Elevation(s)
Number 28045C0342		Date 10/16/09	Effective/ Revised D	Date	A.E.	1 `	AO, use Base 19 SEE
	D		10/16/09		AE		MMENTS
810 Indicate the s	ource of the F	Base Flood Elevation (E	BFE) data or ba	se flood de	oth entered in Item	B 9:	
☐ FIS Profile		Community Determ					
B11. Indicate elev	ation datum u	sed for BFE in Item B9	: NGVD 19	29 🛚 NA	VD 1988 ☐ Oti	ner/Source:	
B12. Is the building	a located in a	Coastal Barrier Resou	rces System (C	:BRS) area	or Otherwise Prote	cted Area (0	OPA)? TYes XINo
Designation (BRS OP/				·
<u> </u>			LI				

IMPORTANT: In these spaces, copy the corresponding information from Section 1	ion A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route 217 FAVRE ST	Policy Number:	
City WAVELAND State MS ZIP C	Company NAIC Number	
SECTION C - BUILDING ELEVATION INFORMATI	ON (SURVEY R	EQUIRED)
C1. Building elevations are based on: Construction Drawings* Building *A new Elevation Certificate will be required when construction of the building C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFI Complete Items C2.a–h below according to the building diagram specified in Benchmark Utilized: VRS NETWORK Vertical Datum: 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 BF a) Top of bottom floor (including basement, crawlspace, or enclosure floor) b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (HAG)	ing Under Construg is complete. E), AR, AR/A, AR/A, Item A7. In Puert NAVD 88 EE. 29.0 N/A N/A N/A 14.6 15.1	AE, AR/A1–A30, AR/AH, AR/AO.
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	N/A	☆ feet meters
SECTION D – SURVEYOR, ENGINEER, OR ARCI	HITECT CERTIF	ICATION
This certification is to be signed and sealed by a land surveyor, engineer, or architectify that the information on this Certificate represents my best efforts to interpretatement may be punishable by fine or imprisonment under 18 U.S. Code, Section Were latitude and longitude in Section A provided by a licensed land surveyor?	itect authorized by pret the data availa on 1001.	law to certify elevation information.
Certifier's Name License Number Donald E Ried PLS 3037		The state of the s
PASS CHRISTIAN MS Signature Date	E ELEVATION Y OF WAVELAN)

IMPORTANT: In these spaces, copy the corresponding	g information from Se	ection A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/o 217 FAVRE ST	or Bldg. No.) or P.O. Ro	oute and Box No	Policy Number:
City WAVELAND St	ate MS ZIF	² Code 39576	Company NAIC Number
SECTION E – BUILDING ELE FOR ZONE	VATION INFORMATI AO AND ZONE A (W		REQUIRED)
For Zones AO and A (without BFE), complete Items E1–complete Sections A, B, and C. For Items E1–E4, use narenter meters.	E5. If the Certificate is i tural grade, if available.	ntended to support a Check the measure	LOMA or LOMR-F request, ment used. In Puerto Rico only,
E1. Provide elevation information for the following and che the highest adjacent grade (HAG) and the lowest ad a) Top of bottom floor (including basement,		xes to show whether	the elevation is above or below
crawlspace, or enclosure) is	N/A	feet mete	rs above or below the HAG.
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet meter	rs above or below the LAG.
E2. For Building Diagrams 6-9 with permanent flood ope	nings provided in Secti	on A Items 8 and/or	9 (see pages 1–2 of Instructions),
the next higher floor (elevation C2.b in the diagrams) of the building is	<u>N/A</u>	feet meter	rs above or below the HAG.
E3. Attached garage (top of slab) is	<u>N/A</u>	feet meter	rs above or below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is	N/A	feet meter	rs above or below the HAG.
E5. Zone AO only: If no flood depth number is available, floodplain management ordinance? Yes	is the top of the bottom No Unknown. Th	floor elevated in acc le local official must	cordance with the community's certify this information in Section G.
SECTION F - PROPERTY OWN	ER (OR OWNER'S REF	PRESENTATIVE) CE	ERTIFICATION
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	who completes Sections statements in Sections	ns A, B, and E for Zo s A, B, and E are cor	one A (without a FEMA-issued or rect to the best of my knowledge.
Property Owner or Owner's Authorized Representative's	Name		
Address	City	St	ate ZIP Code
Signature	Date	Те	lephone
Comments		ALL TO SERVICE AND ADDRESS OF THE PARTY OF T	
			:

IMPORTANT: In these spaces, copy the corre	sponding information from Section A.	FOR INS	SURANCE COMPANY USE
Building Street Address (including Apt., Unit, St 217 FAVRE ST	uite, and/or Bldg. No.) or P.O. Route and Bo	No. Policy N	umber: ³
City WAVELAND	State MS ZIP Code 395		y NAIC Number
SECTIO	N G - COMMUNITY INFORMATION (OPT	DNAL)	
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete the applicable item(s)	lain management and sign below. Cl	ordinance can complete heck the measurement
G1. The information in Section C was takengineer, or architect who is authorized that in the Comments area below.)	en from other documentation that has been a ed by law to certify elevation information. (In	gned and sealed icate the source a	by a licensed surveyor, and date of the elevation
or Zone AO.	on E for a building located in Zone A (withou		
G3. The following information (Items G4–	G10) is provided for community floodplain m	inagement purpos	ses.
G4. Permit Number	G5. Date Permit Issued	G6. Date Certifi Compliance	cate of e/Occupancy Issued
G7. This permit has been issued for:	New Construction Substantial Improve	nent	
G8. Elevation of as-built lowest floor (including of the building:	basement)	feet mete	rs Datum
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	feet mete	rs Datum
G10. Community's design flood elevation:		feet mete	rs Datum
Local Official's Name	Title		
Community Name	Telephone		
Signature	Date		
Comments (including type of equipment and loc	cation, per C2(e), if applicable)		
			Check here if attachments.

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

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

important: Follow the instructions on pages 1-9.

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

	SECT	ION A - PROPERTY I	INFORI	MATION		FOR INSU	RANCE COMPANY USE
A1. Building Owner JONATHAN AMICO						Policy Num	ber:
A2. Building Street A Box No. 217 FAVRE ST	Address (incl	uding Apt., Unit, Suite,	and/or	Bldg. No.) or P.O.	Route and	Company N	AIC Number:
City WAVELAND				State MS		ZIP Code 3	9576
A3. Property Descr TAX PARCEL # 16		id Block Numbers, Tax 001	Parcel	Number, Legal De	scription, etc.		
A4. Building Use (e	e.g., Resident	ial, Non-Residential, A	ddition,	Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longit	ude: Lat. <u>30</u>	-16-59.2	_!	ong. 89-22-32.6	Horizontal Datum	i: NAD 1	1927 🛛 NAD 83
A6. Attach at least	2 photograph	s of the building if the	Certifica	ate is being used to	obtain flood insura	nce.	
A7. Building Diagra	m Number	5					
A8. For a building v	vith a crawlsp	pace or enclosure(s):					
a) Square foot	age of crawls	pace or enclosure(s)	N/A s	sq ft			
b) Number of p	ermanent flo	od openings in the cra	wispace	e or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade N/A
c) Total net are	ea of flood op	enings in A8.b N/A	s	q in			
d) Engineered	flood opening	gs? Yes X No)				
A9. For a building v	vith an attach	ed garage:					
a) Square foot	age of attach	ed garage N/A	5	sq ft			
b) Number of p	permanent flo	od openings in the atta	ached g	arage within 1.0 fo	ot above adjacent ç	rade N/A	
c) Total net are	ea of flood op	enings in A9.b N/A		sq in			
d) Engineered	flood openin	gs? Yes X No	0				
	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Communi 285262 WAVELAN	-	ommunity Number		B2. County HANCOC			B3. State MS
B4. Map/Panel	B5. Suffix	B6. FIRM Index		RM Panel	B8. Flood Zone (s) B9. Ba	se Flood Elevation(s)
Number 28045C0342	_	Date 10/16/09	1	fective/ evised Date		1 '	NO, use Base
2501055012	D	, 0, 10, 0	10/	16/09	AÉ	Depth) CO	SEE MMENTS
B10. Indicate the so	ource of the E	lase Flood Elevation (E	3FE) da	ta or base flood de	pth entered in Item	B9:	
☐ FIS Profile	FIRM	Community Determ	ined [Other/Source:			
B11. Indicate eleva	ition datum u	sed for BFE in Item B9	: N	GVD 1929 🗓 NA	\VD 1988	ner/Source:	
B12. Is the building	located in a	Coastal Barrier Resou	rces Sy	stem (CBRS) area	or Otherwise Prote	cted Area (OPA)? Yes XNo
Designation [Date: N/A		CBRS	☐ OPA			
ļ					s		

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onding information from Sec	tion A.	FOR INSURANCE COMPANY USE
e, and/or Bldg. No.) or P.O. Rou	te and Box 5097	Policy Number:
State MS	Code 39576	Company NAIC Number
ING ELEVATION INFORMAT	TION (SURVEY R	EQUIRED)
		uction*
		(AE AD(A4 A20 AD(AH AD(AC)
the building diagram specified i	n Item A7. In Puer	
PM steril		VAVELAND
	W.	
	RFF	TAX PARCEL # TETLE-0 SET.007
the same as that used for the L	,, L.	Check the measurement used.
crawlspace, or enclosure floor)	29.0	feet meters
	N/A .	feet meters meters
member (V Zones only)	N/A .	
	N/A	feet meters
nent servicing the building n in Comments)	28.7	meters
building (LAG)	14.6	feet meters
building (HAG)	15.1 spans	feet meters
n of deck or stairs, including	15.2	★ feet meters
FYOR ENGINEER OR ARC	CHITECT CERTIE	ICATION
presents my best efforts to inter ment under 18 U.S. Code, Sec	pret the data availation 1001.	able. I understand that any false
d by a licensed land surveyor?	LXYes ∐ No	Check here if attachments.
License Number PLS 3037	AB1 CBANIS	go tago by a constantulo!" (a
ALCOHOL COLEAN STRANGO COLEANIA	ON 96 254	WHALD E. P.
B2. Corny hame	anity Nutriber	Plate Seal
State MS	ZIP Code 39571	S Marie
Date 10/02/18	Telephone 228 205-4007	MISSI MISSI
ttachments for (1) community of	ficial, (2) insurance	agent/company, and (3) building owner.
tion, per C2(e), if applicable) TI	HE ELEVATION	(A) M(1) A) A) A) A) A) A) A)
	State MS ING ELEVATION INFORMAT Instruction Drawings*	ING ELEVATION INFORMATION (SURVEY Restruction Drawings* Building Under Construction of the building is complete. In BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR the building diagram specified in Item A7. In Puer Vertical Datum: NAVD 88 ions in items a) through h) below. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as that used for the BFE. Other/Source: the same as the

IMPORTANT: In these spaces, copy the correspondin	ng information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/o 217 FAVRE ST	or Bldg. No.) or P.O. Route and Box No	Policy Number:
City WAVELAND St	tate MS ZIP Code 39576	Company NAIC Number
	VATION INFORMATION (SURVEY N AO AND ZONE A (WITHOUT BFE)	OT REQUIRED)
For Zones AO and A (without BFE), complete Items E1–complete Sections A, B,and C. For Items E1–E4, use nate enter meters.	E5. If the Certificate is intended to supportural grade, if available. Check the meas	ort a LOMA or LOMR-F request, urement used. In Puerto Rico only,
E1. Provide elevation information for the following and change the highest adjacent grade (HAG) and the lowest ad a) Top of bottom floor (including basement,		ther the elevation is above or below
crawlspace, or enclosure) is	N/A feet m	eters above or below the HAG.
 Top of bottom floor (including basement, crawlspace, or enclosure) is 	<u>N/A</u> feet m	eters
E2. For Building Diagrams 6–9 with permanent flood ope the next higher floor (elevation C2.b in the diagrams) of the building is		/or 9 (see pages 1–2 of Instructions), eters □ above or □ below the HAG.
E3. Attached garage (top of slab) is		eters ☐ above or ☐ below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is	N/A	
E5. Zone AO only: If no flood depth number is available, floodplain management ordinance? Yes I	is the top of the bottom floor elevated in	eters above or below the HAG. accordance with the community's ust certify this information in Section G.
SECTION F - PROPERTY OWNE	ER (OR OWNER'S REPRESENTATIVE	CERTIFICATION
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	who completes Sections A, B, and E fo	r Zone A (without a FEMA-issued or
Property Owner or Owner's Authorized Representative's	Name	
Address	City	State ZIP Code
Signature	Date	Telephone
Comments		
		•
		4
		•
		<u>;</u>

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engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the 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-issor Zone AO.	complete urement urveyor, elevation sued BFE)
SECTION G – COMMUNITY INFORMATION (OPTIONAL) The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measured in Items G8–G10. In Puerto Rico only, enter meters. G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed sure engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the 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 or Zone AO.	complete urement urveyor, elevation sued BFE)
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measured in Items G8–G10. In Puerto Rico only, enter meters. G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed seen engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the 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-issor Zone AO.	urveyor, elevation sued BFE)
Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measured in Items G8–G10. In Puerto Rico only, enter meters. G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed segment of a commentation information. (Indicate the source and date of the 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 or Zone AO.	urveyor, elevation sued BFE)
engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the 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-issor Zone AO.	elevation sued BFE)
or Zone AO.	
G3. The following information (Items G4–G10) is provided for community floodplain management purposes.	sued
	sued
G4. Permit Number G5. Date Permit Issued G6. Date Certificate of Compliance/Occupancy Is	l.
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	
G10. Community's design flood elevation: feet meters Datum	v
Local Official's Name Title	
Community Name Telephone	:
Signature Date	
Comments (including type of equipment and location, per C2(e), if applicable) ☐ Check here if a	

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Expiration Date: November 30, 2018

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. 217 FAVRE STREET			Policy Number:
City State WAVELAND	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.



FRONT 10/02/18



REAR 10/02/18



NON-CONVERSION AGREEMENT with CITY OF WAVELAND, MISSISSIPPI

This DECLARATION made this 10 day of 0 Ctobor 2018. By 500 than Mark Arange (OWNER) having an address at 217 Favre Street, Waveland, MS 39576
WITNESSETH: WHEREAS, the Owner is the record owner of all that real property located at _217 Favre Street, Waveland, MS 39576 In the City of Waveland, MS, in the County of Hancock, designated in the Tax Records as _161E-0-02-357.001 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 Waveland Floodplain Management Ordinance of Number 342 and under Permit NumberTBD
WHEREAS, the Owner agrees to record this DECLARATION and certifies and declares that the following covenants, conditions are 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 19 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 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 notion 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 10 day of 0 thus 20 18
Jonathan Mark Amico (Print) Parit And Pont of (Print) OWNER (Signature) Terresonan Parit Amico (Signature) Terresonan Parit Amico (Signature)