

CERTIFICATE OF OCCUPANCY CITY OF WAVELAND

that at the time of issuance, this structure was in compliance with the various ordinances of the City of Waveland regulating building construction or use. This Certificate is issued pursuant to the requirements of the 2012 International Codes Council certifying

Certificate #:1718802

Issued to: EHRICH ALAN & TRUDY

Building Address: 303 HOFFMAN LN

City, State, Zip: WAVELAND, MS 39576

Issued Date: 07-25-2018 Expires: End of occupancy

Occupancy Type: SFR HOME

Sprinkler System Required: NO

Special Conditions: NONE

Building Official

81.52.1

ate

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 accept(s)

13 1 9	Eloyation oci	thicate and an attachmi	01113 10	(1) community on	iciai, (¿) insurance	agent/compa	iny, and (3) building owne
		TION A - PROPERTY	INFOR	MATION		FOR INSUI	RANCE COMPANY USE
A1. Building Owne ALAN EHRICH	er's Name					Policy Num	ber:
A2, Building Street Box No. 0 HOFFMAN LANE		luding Apt., Unit, Suite,	, and/or	Bldg. No.) or P.O.	Route and	Company N	IAIC Number:
City WAVELAND	***************************************	State MS		ZIP Code 395	76		**************************************
A3. Property Desc TAX PARCEL ID #	ription (Lot a 161C-0-02-1	nd Block Numbers, Tax 86.001	(Parce	l Number, Legal De	escription, etc.)		
A4. Building Use (e.g., Residen	tial, Non-Residential, A	ddition	, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longi	tude: Lat. 30)-17-33.3 Lor	ng. 89-2	21-42.2	Horizontal Datum	n: NAD	1927 🛛 NAD 83
A6. Attach at least	2 photograph	ns of the building if the	Certific	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	sq ft			
b) Number of	permanent flo	ood openings in the cra	wispac	e or enclosure(s) w	vithin 1.0 foot above	adjacent gr	ade N/A
		enings in A8.b N/A		q in			
d) Engineered	flood openin	gs? Tyes No)				
A9. For a building	vith an attach	ed garage:					
		ed garage 441	,	sq ft			
		ood openings in the atta			ot above adjacent	rada O	
			201104 8	Market Server	ot above adjacent (jiade U	
		enings in A9.b 0	000000 1100000000000000000000000000000	sq in -			
d) Engineered	riood openin	gs? Liyes X No	0				
	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Communi		ommunity Number		B2. County			
285262 WAVELAN	D			HANCOC	K		B3. State MS
B4. Map/Panel Number 28045C0361	B5. Suffix	B6. FIRM Index Date 10/16/09	Ef Re	IRM Panel fective/ evised Date	B8. Flood Zone(s)	(Zor	ee Flood Elevation(s) ne AO, use Base od Depth)
			10/	16/09	75	19)
B10. Indicate the so	ource of the B	ase Flood Elevation (B	BFE) da	ta or base flood de	pth entered in Item	B9:	
FIS Profile		Community Determ					
B11. Indicate eleva	ition datum u	sed for BFE in Item B9	: 🗌 N	GVD 1929 🛛 NA	\VD 1988 ☐ Otl	ner/Source:	_
B12. Is the building	located in a	Coastal Barrier Resou	rces Sy	stem (CBRS) area	or Otherwise Prote	cted Area (C	DPA)? ☐ Yes K☐No
Designation D				□ ОРА	9000 USBN95598255555		
EMA Form 086-0-33	(7/15)	Da	nlaces	all previous edition	^		F D

Form Page 1 of 6

		Process and the second	Expiration Date. November 30, 20	10
IMPORTANT: In these spaces, copy the corresp	onding information from Sec	tion A.	FOR INSURANCE COMPANY US	E
Building Street Address (including Apt., Unit, Suite 0 HOFFMAN LANE	, and/or Bldg. No.) or P.O. Rou	te and Box No.	Policy Number:	
City WAVELAND	State MS ZIP	Code 39576	Company NAIC Number	
SECTION C - BUILDI	NG ELEVATION INFORMAT	ION (SURVEY RE	EQUIRED)	
 C1. Building elevations are based on: X Co *A new Elevation Certificate will be required via the complete Items C2.a—h below according to the Benchmark Utilized: USM VRS NETWORK_Indicate elevation datum used for the elevation Datum used for building elevations must be the control of the control o	BFE), VE, V1-V30, V (with Bf he building diagram specified i Vertical Datum: ons in items a) through h) below Other/Source:	ng is complete. FE), AR, AR/A, AR/ n Item A7. In Puert NAVD 88 w.	'AE, AR/A1–A30, AR/AH, AR/AO.	
a) Top of bottom floor (including basement, b) Top of the next higher floor c) Bottom of the lowest horizontal structural d) Attached garage (top of slab) e) Lowest elevation of machinery or equipm (Describe type of equipment and location f) Lowest adjacent (finished) grade next to b) Highest adjacent (finished) grade next to h) Lowest adjacent grade at lowest elevation structural support	crawlspace, or enclosure floor) member (V Zones only) ent servicing the building in Comments) building (LAG) building (HAG) n of deck or stairs, including	20.0 N/A	Check the measurement used. X feet meters feet meters Y feet meters feet meters feet meters X feet meters X feet meters Feet meters X feet meters Feet meters Feet meters	
SECTION D - SURV	EYOR, ENGINEER, OR ARC	CHITECT CERTIF	ICATION	
This certification is to be signed and sealed by a land certify that the information on this Certificate repstatement may be punishable by fine or imprison. Were latitude and longitude in Section A provided Certifier's Name	nent under 18 U.S. Code, Seci by a licensed land surveyor? License Number	nitect authorized by pret the data availation 1001. XYes No	law to certify elevation information. ble. I understand that any false Check here if attachments.	
Donald E Ried Title LAND SURVEYOR Company Name RIED & ASSOCIATES LLC Address 9526 BENESHEEWAH TRAIL	PLS 3037		E. P. Polace P. Sealon P. Here P. 3037	
City PASS CHRISTIAN	State MS	ZIP Code 39571	OF WISE	
Signature	Date 05/12/17	Telephone 228 205-4007	- Conforting	
Copy all pages of this Elevation Certificate and all at	tachments for (1) community off	icial, (2) insurance a	agent/company, and (3) building own	er.
Comments (including type of equipment and locat IS 1 FOOT ABOVE BASE FLOOD ELEVATION F SET BENCH MARK ACROSS STREET NAIL IN I	ER CITY OF WAVELAND BUI	LDING REGULATI		
FEMA Form 086-0-33 (7/15)	Penlaces all previous edition	ne	Form Page 2	

			Expiration D	ate: November 30, 2018
IMPORTANT: In these spaces, copy the correspond	ing information from	n Section A.	FOR INSUR	ANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and 0 HOFFMAN LANE	d/or Bldg. No.) or P.C	. Route and Box I	No. Policy Numb	per:
City WAVELAND	State MS	ZIP Code 39576		AIC Number
SECTION E – BUILDING EL FOR ZONI	EVATION INFORM E AO AND ZONE A	ATION (SURVEY (WITHOUT BFE	Y NOT REQUIRED	
For Zones AO and A (without BFE), complete Items E1 complete Sections A, B,and C. For Items E1–E4, use n enter meters.	–E5. If the Certificate atural grade, if availa	is intended to su ble. Check the m	pport a LOMA or LO easurement used. In	MR-F request, Puerto Rico only,
E1. Provide elevation information for the following and the highest adjacent grade (HAG) and the lowest aa) Top of bottom floor (including basement,	check the appropriate adjacent grade (LAG)	boxes to show w	whether the elevation	is above or below
crawlspace, or enclosure) is b) Top of bottom floor (including basement,	N/A,	feet [meters above	or below the HAG.
crawlspace, or enclosure) is	<u>N/A</u>	feet _	meters above	or below the LAG.
E2. For Building Diagrams 6–9 with permanent flood op the next higher floor (elevation C2.b in the diagrams) of the building is	penings provided in S			
E3. Attached garage (top of slab) is				or below the HAG.
E4. Top of platform of machinery and/or equipment	<u>N/A</u>	feet	meters above	or below the HAG.
servicing the building is		feet	meters above	or below the HAG.
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	e, is the top of the bot No Unknown.	tom floor elevated The local official	d in accordance with must certify this info	the community's ormation in Section G.
SECTION F - PROPERTY OWN	NER (OR OWNER'S	REPRESENTATI	VE) CERTIFICATION	V
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	ve who completes Sene statements in Sect	ctions A, B, and E ions A, B, and E	for Zone A (without	a FEMA-issued or it of my knowledge.
Property Owner or Owner's Authorized Representative				
Address	City		State	ZIP Code
Signature	Date		Telephone	
Comments				
				(3)
			Chec	k here if attachments.

MPORTANT: 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. 0 HOFFMAN LANE	Policy Number:
City WAVELAND State MS ZIP Code 39576	Company NAIC Number
SECTION G - COMMUNITY INFORMATION (OPTIONAL)	
The local official who is authorized by law or ordinance to administer the community's floodplain ma Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable Item(s) and sign used in Items G8–G10. In Puerto Rico only, enter meters.	nagement ordinance can complete h below. Check the measurement
G1. The information in Section C was taken from other documentation that has been signed a engineer, or architect who is authorized by law to certify elevation information. (Indicate the data in the Comments area below.)	e source and date of the elevation
G2. A community official completed Section E for a building located in Zone A (without a FEM or Zone AO.	
G3. The following information (Items G4–G10) is provided for community floodplain managem	ent purposes.
G4. Permit Number G5. Date Permit Issued G6. I	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:	t meters Datum
G9. BFE or (in Zone AO) depth of flooding at the building site: fee	t meters Datum
G10. Community's design flood elevation:	t 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.

	SECTION A - P	ROPERTY II	NFORMATION		FOR INSUF	RANCE COMPANY USE
A1. Building Owner's Na ALAN EHRICH	ame				Policy Num	ber:
A2. Building Street Addre Box No. 303 HOFFMAN LANE	ess (including Apt.	, Unit, Suite, a	and/or Bldg. No.) or P.O.	Route and	Company N	AIC Number:
City WAVELAND		State MS	ZIP Code 395	76		
A3. Property Description TAX PARCEL ID # 161C	n (Lot and Block N -0-02-186.001	umbers, Tax	Parcel Number, Legal De	escription, etc.)		
A4. Building Use (e.g., R	Residential, Non-R	esidential, Ad	ddition, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longitude:	Lat. 30-17-33.3	Lon	g. 89-21-42.2	Horizontal Datum	n: NAD 1	927 X NAD 83
A6. Attach at least 2 pho	otographs of the bu	uilding if the C	Certificate is being used to	o obtain flood insura	ance.	
A7. Building Diagram Nu	ımber 5					
A8. For a building with a	crawlspace or en	closure(s):				
 a) Square footage or 	of crawlspace or e	nclosure(s)	N/A sq ft			
b) Number of perma	anent flood openin	gs in the crav	vlspace or enclosure(s) w	vithin 1.0 foot above	adjacent gra	ade N/A
c) Total net area of t	flood openings in	48.b N/A	sq in			Hammanik (Arthorite, and Arthorite artists reason published)
d) Engineered flood	openings?	Yes X No				
A9. For a building with ar	n attached garage					2*
- 10 m T = 10 m			4			
a) Square footage o			sq ft			
b) Number of perma	anent flood openin	gs in the attac	ched garage within 1.0 fo	ot above adjacent g	grade 0	
c) Total net area of f	flood openings in A	49.b 0	sq in			
d) Engineered flood	openings?	Yes 🗓 No				S
	SECTION B -	- FLOOD IN	SURANCE RATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Community Nar 285262 WAVELAND	me & Community	Number	B2. County HANCOC			B3. State MS
B4. Map/Panel B5. S Number 28045C0361 D	Suffix B6. FIRM Date 10/16		B7. FIRM Panel Effective/ Revised Date 10/16/09	B8. Flood Zone(s)	(Zor	ee Flood Elevation(s) ne AO, use Base nd Depth)
B10. Indicate the source			FE) data or base flood de	pth entered in Item	B9:	
B11. Indicate elevation d	latum used for BF	E in Item B9:	☐ NGVD 1929 🏻 NA	\VD 1988	ner/Source:	
B12. Is the building locat	ted in a Coastal Ba	arrier Resour	ces System (CBRS) area	or Otherwise Prote	cted Area (C	PPA)? TYes KTNo
Designation Date:	N/A		BRS OPA			, 103 K_140
			i			

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corre	sponding information from Sec	tion A.	FOR INSURANCI	E COMPANY USE
Building Street Address (including Apt., Unit, Su 303 HOFFMAN LANE	ite, and/or Bldg. No.) or P.O. Rou	te and Box No.	Policy Number:	
City WAVELAND	State MS ZIP	Code 39576	Company NAIC N	lumber
SECTION C - BUIL	DING ELEVATION INFORMAT	ION (SURVEY RI	EQUIRED)	rapida care e en majo por unido mos e presional a comitación in marco de la morna y en les existe.
C1. Building elevations are based on:	onstruction Drawings* X Buil	ding Under Constru	uction* Finish	ed Construction
*A new Elevation Certificate will be require	ed when construction of the building	ng is complete.		
C2. Elevations – Zones A1–A30, AE, AH, A (v Complete Items C2.a–h below according t Benchmark Utilized: USM VRS NETWOR	to the building diagram specified i			
Indicate elevation datum used for the elev		W.		-
☐ NGVD 1929 ☒ NAVD 1988 Datum used for building elevations must b	Marine and American A	EE		
Datum used for building elevations must be	e the same as that used for the b) - L.	Check the me	asurement used.
a) Top of bottom floor (including basement	nt, crawlspace, or enclosure floor)	28.8	∑ feet	meters
b) Top of the next higher floor		N/A	feet	meters
c) Bottom of the lowest horizontal structu	ral member (V Zones only)	N/A	X feet	meters
d) Attached garage (top of slab)		N/A	feet	meters
e) Lowest elevation of machinery or equip (Describe type of equipment and locati		N/A	feet	meters
f) Lowest adjacent (finished) grade next	to building (LAG)	16.5	∑ feet	meters
g) Highest adjacent (finished) grade next	to building (HAG)	16.7	X feet	meters
 h) Lowest adjacent grade at lowest eleva structural support 	tion of deck or stairs, including	N/A	feet	meters
SECTION D - SUI	RVEYOR, ENGINEER, OR ARC	CHITECT CERTIF	ICATION	74*
This certification is to be signed and sealed by I certify that the information on this Certificate statement may be punishable by fine or impris	represents my best efforts to inter	pret the data availa	/ law to certify elevable. I understand t	ation information. hat any false
Were latitude and longitude in Section A provide			Check here	if attachments.
Certifier's Name Donald E Ried	License Number PLS 3037		AND	ERE
Title LAND SURVEYOR			A SED PR	TEST TO BE
Company Name			SUPIN	EXPA E
RIED & ASSOCIATES LLC			Along by	
Address 9526 BENESHEEWAH TRAIL			TEN PE	re contra
City PASS CHRISTIAN	State MS	ZIP Code 39571	REAL OF	MISS
Signature	Date 11/14/17	Telephone 228 205-4007		
Copy all pages of this Elevation Certificate and al	l attachments for (1) community of	ficial, (2) insurance a	agent/company, and	d (3) building owner.
Comments (including type of equipment and lo ELEVATION FROM PLANS PAGE 2 OF 8 DA' AT BOTTOM OF COLUMNS PLUS 9.0 FEET STRUCTURE MEMBER = 25.0 FEET PLUS 2 FOR PLAN ELEVATION OF 27.0 FEET. CONS SET BENCH MARK ACROSS STREET NAIL I	TED 07/07/17 SHOWING PLAN E TO BOTTOM LOWER OF LOWE: FEET TO BOTTOM FLOOR SHO STRUCTED SLAB UNDER RESII	ELEVATION OF 16 ST HORIZONTAL DWN IN C2a DENCE AT 16.85 F		

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the correspondin	g information from Sec	tion A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/o 303 HOFFMAN LANE	or Bldg. No.) or P.O. Rou	te and Box No.	Policy Number:
City WAVELAND Sta	ate MS ZIP	Code 39576	Company NAIC Number
SECTION E – BUILDING ELE FOR ZONE	VATION INFORMATIO AO AND ZONE A (WIT	N (SURVEY NOT HOUT BFE)	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. E1. Provide elevation information for the following and change the highest adjacent grade (HAG) and the lowest adjacent grade (Including basement, crawlspace, or enclosure) is E2. For Building Diagrams 6–9 with permanent flood oper the next higher floor (elevation C2.b in the diagrams) of the building is E3. Attached garage (top of slab) is E4. Top of platform of machinery and/or equipment servicing the building is E5. Zone AO only: If no flood depth number is available, floodplain management ordinance? Yes NE	E5. If the Certificate is intural grade, if available. On the content of the appropriate boxes in a cent grade (LAG). N/A N/A N/A N/A N/A N/A N/A N/	ended to support a check the measured es to show whether feet meter A Items 8 and/or feet meter feet meter feet meter feet meter or elevated in accolocal official must of	the elevation is above or below above or below the HAG. above or below the LAG. below the LAG. certify this information in Section G.
The property owner or owner's authorized representative		-	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.
community-issued BFE) or Zone AO must sign here. The	statements in Sections	A, B, and E for 20 A, B, and E are con	rect to the best of my knowledge.
Property Owner or Owner's Authorized Representative's	Name		
Address	City	Sta	ate ZIP Code
Signature	Date	Tel	ephone
Comments			

OMB No. 1660-0008

Expiration Date: November 30, 2618

City WAVELAND State MS ZIP Code 39576 SECTION G - COMMUNITY INFORMATION (OPTIONAL) The local official who is authorized by law or ordinance to administer the community's floodplain managen Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below used in Items G8-G10. In Puerto Rico only, enter meters. G1. The information in Section C was taken from other documentation that has been signed and see engineer, or architect who is authorized by law to certify elevation information. (Indicate the sour data in the Comments area below.) G2. A community official completed Section E for a building located in Zone A (without a FEMA-issu or Zone AC). G3. The following information (Items G4-G10) is provided for community floodplain management puths of the building information (Indicate the sour data in the Community of Items G4-G10) is provided for community floodplain management puths of the building information (Indicate the sour data in the Community floodplain management puths of the building information (Items G4-G10) is provided for community floodplain management puths of the building information (Indicate the sour data in the Community floodplain management puths of the building information (Items G4-G10) is provided for community floodplain management puths of the building information (Indicate the sour data in the Community floodplain management puths or Zone AO) depth of flooding at the building site:	In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE
SECTION G – COMMUNITY INFORMATION (OPTIONAL) The local official who is authorized by law or ordinance to administer the community's floodplain managem Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below used in Items G8–G10. In Puerto Rico only, enter meters. G1.	
The local official who is authorized by law or ordinance to administer the community's floodplain managem Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below used in Items G8–G10. In Puerto Rico only, enter meters. G1. The information in Section C was taken from other documentation that has been signed and see engineer, or architect who is authorized by law to certify elevation information. (Indicate the sour data in the Comments area below.) G2. A community official completed Section E for a building located in Zone A (without a FEMA-issu or Zone AO. G3. The following information (Items G4–G10) is provided for community floodplain management put or Zone AO. G4. Permit Number G5. Date Permit Issued G6. Date C Compliance G7. This permit has been issued for: New Construction Substantial Improvement G8. Elevation of as-built lowest floor (including basement) feet may feet m	State MS ZIP Code 39576 Company NAIC Number
Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below used in Items G8–G10. In Puerto Rico only, enter meters. G1. The information in Section C was taken from other documentation that has been signed and sear engineer, or architect who is authorized by law to certify elevation information. (Indicate the sour data in the Comments area below.) G2. A community official completed Section E for a building located in Zone A (without a FEMA-issu or Zone AO. G3. The following information (Items G4–G10) is provided for community floodplain management puths of the building information (Items G4–G10) is provided for community floodplain management puths. G4. Permit Number G5. Date Permit Issued G6. Date Compliance Community Islands at the building site: G9. BFE or (in Zone AO) depth of flooding at the building site: G10. Community's design flood elevation: Community Name Telephone Signature Date	SECTION G - COMMUNITY INFORMATION (OPTIONAL)
engineer, or architect who is authorized by law to certify elevation information. (Indicate the sour data in the Comments area below.) G2.	cial who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete b, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement G8–G10. In Puerto Rico only, enter meters.
G3. The following information (Items G4–G10) is provided for community floodplain management put G4. Permit Number G5. Date Permit Issued G6. Date Compli G7. This permit has been issued for: New Construction Substantial Improvement G8. Elevation of as-built lowest floor (including basement) feet management feet	e information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, ineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation a in the Comments area below.)
G4. Permit Number G5. Date Permit Issued G6. Date Compliance G7. This permit has been issued for: [Section of as-built lowest floor (including basement) of the building: [G9. BFE or (in Zone AO) depth of flooding at the building site: [G10. Community's design flood elevation: [G10. Community Name] [G10. Communit	ommunity official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) Zone AO.
G7. This permit has been issued for: New Construction Substantial Improvement G8. Elevation of as-built lowest floor (including basement) feet makes of the building: feet makes of the building: feet makes of the building at the building site: feet makes of the building feet makes of the bu	e following information (Items G4–G10) is provided for community floodplain management purposes.
G8. Elevation of as-built lowest floor (including basement) of the building: G9. BFE or (in Zone AO) depth of flooding at the building site: G10. Community's design flood elevation: Local Official's Name Title Community Name Telephone Signature Date	umber G5. Date Permit Issued G6. Date Certificate of Compliance/Occupancy Issued
of the building:	mit has been issued for: New Construction Substantial Improvement
G10. Community's design flood elevation: feetm Local Official's Name Title Community Name Telephone Signature Date	n of as-built lowest floor (including basement) uilding: feet meters meters
Local Official's Name Community Name Telephone Signature Date	in Zone AO) depth of flooding at the building site: feet meters Datum
Community Name Telephone Signature Date	
Signature Date	s Name Title
	ame Telephone
Comments (including type of equipment and location, per C2(e), if applicable)	Date
	cluding type of equipment and location, per C2(e), if applicable)

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.

SECTION A - PROPERTY INFORMA	ATION	and the second second		NCE COMPANY US
1. Building Owner's Name _AN EHRICH	o to memberite	1 100 6	Policy Number	aux sugra, ax
 Building Street Address (including Apt., Unit, Suite, and/or B Box No. HOFFMAN LANE 	Bldg. No.) or P.O. R	oute and	Company NAIC	C Number:
City WAVELAND State MS	ZIP Code 39576	3	7	
 Property Description (Lot and Block Numbers, Tax Parcel I AX PARCEL ID # 161C-0-02-186.001 	Number, Legal Des	cription, etc.)		
4. Building Use (e.g., Residential, Non-Residential, Addition,	Accessory, etc.) R			
5. Latitude/Longitude: Lat. 30-17-33.3 Long. 89-2	1-42.2	Horizontal Datum	: NAD 192	27 X NAD 83
Attach at least 2 photographs of the building if the Certifica	te is being used to	obtain flood insura	nce.	
7. Building Diagram Number 5				
For a building with a crawlspace or enclosure(s):	a Cade Alae			
a) Square footage of crawlspace or enclosure(s) N/A	sq ft			a maraalasta CASAM, Gaamemor
b) Number of permanent flood openings in the crawlspace	e or enclosure(s) wi	thin 1.0 foot above	adjacent grad	le N/A
c) Total net area of flood openings in A8.b N/A so	q in			
d) Engineered flood openings? Yes X No	and and specific		108	in the property of
A9. For a building with an attached garage:			1.0 2.0	najatin w
in thousand out against African a cover of a transfer of a second	sq ft			U of
a) Square rootage of attached garage	21.4 31 11.5	ot above adjacent	nrade 0	
b) Number of permanent flood openings in the attached g	arage within 1.0 loc	or above adjacent	grado <u>0</u>	1 1 15% 2
c) Total net area of flood openings in A9.b 0	sq in			
d) Engineered flood openings?		FIG	- g	, unjeto
SECTION B - FLOOD INSURA	NCE RATE MAP	(FIRM) INFORMA	ATION	e l'ambie
B1. NFIP Community Name & Community Number 285262 WAVELAND	B2. County HANCOC	Name	Çu-X i	B3. State MS
Number Date E	IRM Panel ffective/ evised Date /16/09	B8. Flood Zone(s	(Zon	e Flood Elevation(s) e AO, use Base d Depth)
	in a wight the start of	enth entered in Iten	n B9:	
B10. Indicate the source of the Base Flood Elevation (BFE) da	ata or base flood de		Market	equally seattly let
☐ FIS Profile ☑ FIRM☐ Community Determined	Other/Source:	WINSTER MARKET	other/Source:	op of all the
FIS Profile FIRM Community Determined B11. Indicate elevation datum used for BFE in Item B9:	Other/Source:	AVD 1988	other/Source:	DPA)? ☐ Yes ⊠I
☐ FIS Profile ☐ FIRM☐ Community Determined	Other/Source:	AVD 1988	other/Source:	DPA)? ☐ Yes ☒I

IMPORTANT: In these spaces, copy the corresponding information from Section	on A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route 303 HOFFMAN LANE	and Box No.	Policy Number:
City WAVELAND State MS ZIP Co	ode 39576	Company NAIC Number
SECTION C - BUILDING ELEVATION INFORMATION	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 BFE Complete Items C2.a–h below according to the building diagram specified in I	is Complete. is complete. i), AR, AR/A, AR/ Item A7. In Puert	Check the measurement used.
f) Lowest adjacent (finished) grade next to building (LAG) g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support SECTION D – SURVEYOR, ENGINEER, OR ARCH This certification is to be signed and sealed by a land surveyor, engineer, or archit I certify that the information on this Certificate represents my best efforts to interpre	ect authorized by	y law to certify elevation information.
statement 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?	n 1001. 	Check here if attachments.
	ZIP Code 39571	PROMING OF THE PROPERTY OF THE
	Telephone 228 205-4007	
Copy all pages of the Elevation Certificate and all attachments for (1) community officions comments (including type of equipment and location, per C2(e), if applicable) SLA RESIDENCE AT 16.85 FEET LOWEST MACHINERY (2) HEAT PUMPS AT 28.80	AB UNDER	agent/company, and (3) building owner.

	ding information from	Section A		FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, a 303 HOFFMAN LANE				Policy Number:
City WAVELAND	State MS	ZIP Code 3957	(A)	Company NAIC Number
SECTION E – BUILDING E FOR ZOI	LEVATION INFORMANE AO AND ZONE A			EQUIRED)
For Zones AO and A (without BFE), complete Items E complete Sections A, B,and C. For Items E1–E4, use enter meters.				
E1. Provide elevation information for the following and the highest adjacent grade (HAG) and the lowes a) Top of bottom floor (including basement,			whether t	ne elevation is above or below
crawlspace, or enclosure) is	N/A	feet [meters	above or below the HAG
 Top of bottom floor (including basement, crawlspace, or enclosure) is 	N/A	feet [meters	above or below the LAG.
E2. For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in the diagrams) of the building is	the state of the second			
E3. Attached garage (top of slab) is	<u>N/A</u>	∐ feet [meters □ meters	☐ above or ☐ below the HAG
E4. Top of platform of machinery and/or equipment	N/A		meters	above of below the FIAG.
servicing the building is		feet [meters	above or below the HAG
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes				rdance with the community's ertify this information in Section G.
CALC COMMENT AND SECTION F - PROPERTY ON	WNER (OR OWNER'S I	REPRESENTAT	TIVE) CEF	RTIFICATION
The property owner or owner's authorized representa community-issued BFE) or Zone AO must sign here.	ative who completes Sec	ctions A, B, and	E for Zon	e A (without a FEMA-issued or
Property Owner or Owner's Authorized Representative		Olis A, B, and E	are corre	**
Troperty Owner of Owner's Admonaced Representative	703 Name			
The arrangement of the party of the party of the party of the	1996111)			
Address	City	91 - J. 202 (98)	Stat	e ZIP Code
Address Signature	City Date	de l'Alabasa		e ZIP Code
Signature		H = 1		phone
Signature	Date	a Hacdole a m	Tele	phone
Signature Comments	Date		Tele	phone
Signature Comments Grant Gra		- She in Wagner Agrandon (f)	Tele	phone The second of the secon
Signature Comments Grand Com	Date Date	Company Adjusting the Company of the	Tele	
Signature Comments Comme	Date Date	Special Company of the control of th	Tele	phone The substitute of the s
Signature Comments Comme	Date Date	Special Company of the control of th	Tele	
Signature Comments Comme	Date Date	Construction of the constr	Tele	
Signature Comments One will be a second of the second of	Date Date	Charge	Tele	

	sponding information from	Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Su 303 HOFFMAN LANE	ite, and/or Bldg. No.) or P.O.	Route and Box No.	Policy Number:
City WAVELAND	State MS 2	ZIP Code 39576	Company NAIC Number
SECTIO	N G - COMMUNITY INFORM	ATION (OPTIONAL)	
The local official who is authorized by law or ord Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, ent	Certificate. Complete the appl	munity's floodplain ma icable item(s) and sigr	nagement ordinance can complete below. Check the measurement
G1. The information in Section C was take engineer, or architect who is authorized data in the Comments area below.)	en from other documentation t ed by law to certify elevation in	nat has been signed a lformation. (Indicate th	nd sealed by a licensed surveyor, e source and date of the elevation
G2. A community official completed Section or Zone AO.	on E for a building located in Z	one A (without a FEM	A-issued or community-issued BFE)
G3. The following information (Items G4–	G10) is provided for communit	y floodplain managem	ent purposes.
G4. Permit Number	G5. Date Permit Issued		ate Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	New Construction ☐ Substa	antial Improvement	de
G8. Elevation of as-built lowest floor (including		☐ feet	meters Datum
G9. BFE or (in Zone AO) depth of flooding at the	he building site:	feet	meters Datum
G10. Community's design flood elevation:	FÖMRE GAROMIER	feet	meters Datum
Land Officially Name	Till		-
Local Official's Name			etti, ihis ethimotor in 144, can fi
Community Name Through the American State of the Community Name Through the	Telep	hone	
Community Name	Telep	hone and the second	RONER PAR LIS R
Community Name of the second o	Telep	hone and the second	
Community Name	Telep	hone Par Land	ONAS OL TERROLLIS E
Community Name of the second supplies of the second	Telep	hone was the same	enado. La granca
Signature Comments (including type of equipment and loc	Telep Date cation, per C2(e), if applicable)	hone is a linear part of the property of the p	Tapers Lawrence
Signature Comments (including type of equipment and loc	Telep Date cation, per C2(e), if applicable)	hone is a linear part of the property of the p	
Signature Comments (including type of equipment and locations and the second s	Date cation, per C2(e), if applicable)	hone real lines.	Tapers of Table the A
Signature Comments (including type of equipment and local and the second and the	Date cation, per C2(e), if applicable)	hone was the same control of the same control	Formula on the second of the s
Signature Comments (including type of equipment and local and a second and a secon	Date cation, per C2(e), if applicable)	hone was the same to the same	Todas on The second of the sec
Signature Comments (including type of equipment and local decreases and the second decreases are second decreases and the secon	Date cation, per C2(e), if applicable)	hone The property of the prop	Topos C. Topos De de la company de la compan
Signature Comments (including type of equipment and local decreases and the second decreases are second decreases and the secon	Date cation, per C2(e), if applicable)	hone John Lines Constitution Jiego Constitut	Topos C. Topos De Porto De Por
Signature Comments (including type of equipment and local temperature) Signature Comments (including type of equipment and local temperature) Signature Comments (including type of equipment and local temperature) Signature Comments (including type of equipment and local temperature) Signature Comments (including type of equipment and local temperature) Signature Comments (including type of equipment and local temperature) Signature Comments (including type of equipment and local temperature) Signature Signature Comments (including type of equipment and local temperature) Signature Signature Signature Comments (including type of equipment and local temperature)	Telepont Date cation, per C2(e), if applicable)	hone John Lines Constitution Jiego Constitut	Topos C. Topos De Porto De Por
Signature Comments (including type of equipment and local and the company of the	Telepontal Date	hone Theer Theat Theer Theat Theer Theat Theer Theat The thea	Topos of the second of the sec
Signature Comments (including type of equipment and local and the state of the sta	Telepole Date cation, per C2(e), if applicable)	hone Jeen Linear	ASCURSEN

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

	hese spaces, copy the conditional dress (including Apt., Unit ANE	FOR INSURANCE COMPANY USE 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.



FRONT 02/20/18



REAR 02/20/18



NON-CONVERSION AGREEMENT

with

CITY OF WAVELAND, MISSISSIPPI

	ECLARATION made this an or Trudy Ehrich	_ day of _	March 20_18 , (OWNER) having an address at 303 Hoffman Lane, Waveland, MS 39576	
WHER In the WHER elevation	City of Waveland, MS, in the County REAS, the Owner has applied for a pe	of Hanco rmit to pla requiren	at real property located at 303 Hoffman Lane, Waveland, MS 39576 ook, designated in the Tax Records as parcel #:161C-0-02-186.001. Indice a structure on that property that has an enclosed area below the base flood ments of Article No. 5, Section "B" paragraph 5 of Waveland Floodplain termit Number 1718802.	
restrict	tions are placed on the affected proper	rty as a co	ARATION and certifies and declares that the following covenants, conditions an condition of granting the Permit, and affects rights and obligations of the Owner al representatives, successors, future owners, and assigns.	
UPON	THE TERMS AND SUBJECT TO T	HE CON	NDITIONS, as follows:	
1.	The structure or part thereof to which	ch these c	conditions apply is:	
2.	At this site, the Base Flood Elevation	on is1	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 belo shown on the Permit.	ow the Ba	ase Flood Elevation shall be equipped and remain equipped with openings as	
5.	The jurisdiction issuing the Permit a violation. Any alterations or change flood insurance.	and enforces from the	reing the Ordinance may take any appropriate legal action to correct any these conditions also may render the structure uninsurable or increase the cost for	
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 notic 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 witn	ess whereof the undersigned set their	hands and	day of Feb 20 18. ARY PUS S ID # 107390 O D HEATHER WES (Print)	
-//le	OWNER (Sig	nature)	E.Commission Expires . Tark West (Signature	
111	OWINER		WITNESS	