

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name KEARNY ROBERT		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 404 S BEACH BLVD		Company NAIC Number
City WAVELAND State MS ZIP Code 39576		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL # (161M-0-11-138.001)		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL		
A5. Latitude/Longitude: Lat. N 30-16-31 Long. W 89-22-34		Horizontal Datum: <input checked="" type="checkbox"/> NAD 1927 <input 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):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) NA sq ft		a) Square footage of attached garage NA sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade NA		b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade NA
c) Total net area of flood openings in A8.b NA sq in		c) Total net area of flood openings in A9.b NA sq in
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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 280045C-0344	B5. Suffix D	B6. FIRM Index Date 10-16-09	B7. FIRM Panel Effective/Revised Date 10-16-09	B8. Flood Zone(s) VE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 21
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date NA <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

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. Use the same datum as the BFE.
 Benchmark Utilized **LOCAL** Vertical Datum **NAVD1988**
 Conversion/Comments **NA**

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 23.0	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor NA	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only) 22.0	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab) NA	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) NA	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG) 12.7	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG) 13.4	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support NA	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I 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. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Certifier's Name Duke Levy	License Number 01722
Title Surveyor	Company Name Duke Levy and Associates, P.A.
Address 1711 Waveland Ave	City WAVELAND State MS ZIP Code 39576
Signature	Date 2-20-13 Telephone 228-467-5212



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. 404 S BEACH BLVD	Policy Number
City WAVELAND State MS ZIP Code 39576	Company NAIC Number

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

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

Comments WO # 12-05-377
TBM = NAIL IN POWER POLE W/ DISK SET @ PROP @ DRIVE @ EL = 12.65' FEET

Signature Date 2-20-13 Check here if attachments

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

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

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, 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 _____	
Comments _____			

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9.

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.
- | | | |
|-------------------------|------------------------------|---|
| G4. Permit Number _____ | G5. Date Permit Issued _____ | G6. Date Certificate Of Compliance/Occupancy Issued _____ |
|-------------------------|------------------------------|---|
- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters (PR) Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____
- G10. Community's design flood elevation _____ feet meters (PR) Datum _____

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

Check here if attachments

Note: The V Zone design certificate is not a substitute for the NFIP Elevation Certificate (see Fact Sheet No. 1.4, *Lowest Floor Elevation*), which is required to certify as-built elevations needed for flood insurance rating.

V ZONE DESIGN CERTIFICATE

Name Kearny Robertt Policy Number (Insurance Co. Use) _____
 Building Address or Other Description 404 S. BEACH BLVD.
 Permit No. _____ City WAVELAND State MS Zip Code 39576

SECTION I: Flood Insurance Rate Map (FIRM) Information

Community No. _____ Panel No. _____ Suffix _____ FIRM Date _____ FIRM Zone(s) _____

SECTION II: Elevation Information Used for Design

[NOTE: This section documents the elevations/depths used or specified in the design - it does not document surveyed elevations and is not equivalent to the as-built elevations required to be submitted during or after construction.]

- | | | |
|---|-------------|-------|
| 1. FIRM Base Flood Elevation (BFE)..... | <u>21</u> | feet* |
| 2. Community's Design Flood Elevation (DFE) | <u>22</u> | feet* |
| 3. Elevation of the Bottom of Lowest Horizontal Structural Member | <u>23.5</u> | feet* |
| 4. Elevation of Lowest Adjacent Grade | <u>12.7</u> | feet* |
| 5. Depth of Anticipated Scour/Erosion used for Foundation Design..... | <u>12.1</u> | feet |
| 6. Embedment Depth of Pilings or Foundation Below Lowest Adjacent Grade | <u>11.1</u> | feet |
- * Indicate elevation datum used in 1-4: NGVD29 NAVD88 Other _____

SECTION III: V Zone Design Certification Statement

I certify that: (1) I have developed or reviewed the structural design, plans, and specifications for construction of the above-referenced building and (2) that the design and methods of construction specified to be used are in accordance with accepted standards of practice** for meeting the following provisions:

- The bottom of the lowest horizontal structural member of the lowest floor (excluding piles and columns) is elevated to or above the BFE.
- The pile and column foundation and structure attached thereto is anchored to resist flotation, collapse, and lateral movement due to the effects of the wind and water loads acting simultaneously on all building components. Water loading values used are those associated with the base flood***. Wind loading values used are those required by the applicable State or local building code. The potential for scour and erosion at the foundation has been anticipated for conditions associated with the base flood, including wave action.

SECTION IV: Breakaway Wall Design Certification Statement

NOTE. This section must be certified by a registered engineer or architect when breakaway walls are designed to have a resistance of more than 20 psf (0.96 kN/m2) determined using allowable stress design]

I certify that: (1) I have developed or reviewed the structural design, plans, and specifications for construction of breakaway walls to be constructed under the above-referenced building and (2) that the design and methods of construction specified to be used are in accordance with accepted standards of practice** for meeting the following provisions:

- Breakaway wall collapse shall result from a water load less than that which would occur during the base flood***.
- The elevated portion of the building and supporting foundation system shall not be subject to collapse, displacement, or other structural damage due to the effects of wind and water loads acting simultaneously on all building components (see Section III).

SECTION V: Certification and Seal

This certification is to be signed and sealed by a registered professional engineer or architect authorized by law to certify structural designs. I certify the V Zone Design Certification Statement (Section III) and _____ the Breakaway Wall Design Certification Statement (Section IV, check if applicable).

Certifier's Name JEREMY DEVILLE License Number 18082
 Title _____ Company Name _____
 Address 29072 KRENTEL RD.
 City LACOMBE State LA Zip Code 70445
 Signature Jeremy W. Deville Date 4/10/13 Telephone 985-882-8001



GENERAL

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name <u>KEARNY ROBERT</u>		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>404 S BEACH BLVD</u> City <u>WAVELAND</u> State <u>MS</u> ZIP Code <u>39576</u>		Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL # (161M-0-11-138.001)		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>		
A5. Latitude/Longitude: Lat. <u>N 30-16-31</u> Long. <u>W 89-22-34</u>		Horizontal Datum: <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>5</u>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <u>NA</u> sq ft		a) Square footage of attached garage <u>NA</u> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>NA</u>		b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>NA</u>
c) Total net area of flood openings in A8.b <u>NA</u> sq in		c) Total net area of flood openings in A9.b <u>NA</u> sq in
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <u>Waveland 285262</u>		B2. County Name <u>HANCOCK</u>	B3. State <u>MS</u>
B4. Map/Panel Number <u>280045C-0344</u>	B5. Suffix <u>D</u>	B6. FIRM Index Date <u>10-16-09</u>	B7. FIRM Panel Effective/Revised Date <u>10-16-09</u>
		B8. Flood Zone(s) <u>VE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>21</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____			
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____			
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date <u>NA</u> <input type="checkbox"/> CBRS <input type="checkbox"/> OPA			

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. Use the same datum as the BFE.
Benchmark Utilized LOCAL Vertical Datum NAVD1988
Conversion/Comments NA

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <u>25.2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor <u>NA</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only) <u>23.7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab) <u>NA</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <u>NA</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG) <u>12.7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG) <u>13.4</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support <u>NA</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I 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. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Certifier's Name <u>Duke Levy</u>	License Number <u>01722</u>
Title <u>Surveyor</u>	Company Name <u>Duke Levy and Associates, P.A.</u>
Address <u>1711 Waveland Ave</u>	City <u>WAVELAND</u> State <u>MS</u> ZIP Code <u>39576</u>
Signature	Date <u>6-11-13</u> Telephone <u>228-467-5212</u>




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. 404 S BEACH BLVD	Policy Number
City WAVELAND State MS ZIP Code 39576	Company NAIC Number

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

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

Comments WO # 12-05-377-U
TBM = NAIL IN POWER POLE W/ DISK SET @ PROP @ DRIVE @ EL = 12.65' FEET

Signature  Date 6-11-13 Check here if attachments

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

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

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, 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 _____

Comments _____

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9.

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

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

- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters (PR) Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____
- G10. Community's design flood elevation _____ feet meters (PR) Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments _____

Check here if attachments

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name <u>KEARNY ROBERT</u>		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>404 S BEACH BLVD</u>		Company NAIC Number
City <u>WAVELAND</u> State <u>MS</u> ZIP Code <u>39576</u>		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>TAX PARCEL # (161M-0-11-138.001)</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>		
A5. Latitude/Longitude: Lat. <u>N 30-16-31</u> Long. <u>W 89-22-34</u>		Horizontal Datum: <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>6</u>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <u>281</u> sq ft		a) Square footage of attached garage <u>NA</u> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>*</u>		b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>NA</u>
c) Total net area of flood openings in A8.b <u>NA</u> sq in		c) Total net area of flood openings in A9.b <u>NA</u> sq in
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <u>Waveland 285262</u>		B2. County Name <u>HANCOCK</u>		B3. State <u>MS</u>	
B4. Map/Panel Number <u>280045C-0344</u>	B5. Suffix <u>D</u>	B6. FIRM Index Date <u>10-16-09</u>	B7. FIRM Panel Effective/Revised Date <u>10-16-09</u>	B8. Flood Zone(s) <u>VE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>21</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date <u>NA</u> <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

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. Use the same datum as the BFE.
Benchmark Utilized LOCAL Vertical Datum NAVD1988
Conversion/Comments NA

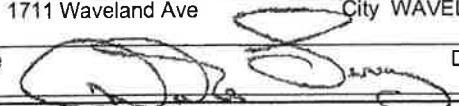
Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <u>13.6</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor <u>25.2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only) <u>23.7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab) <u>NA</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <u>24.7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG) <u>12.7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG) <u>13.6</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support <u>13.6</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. *I 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. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Certifier's Name <u>Duke Levy</u>		License Number <u>01722</u>	
Title <u>Surveyor</u>		Company Name <u>Duke Levy and Associates, P.A.</u>	
Address <u>1711 Waveland Ave</u>	City <u>WAVELAND</u>	State <u>MS</u>	ZIP Code <u>39576</u>
Signature 	Date <u>9-12-13</u>	Telephone <u>228-467-5212</u>	




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. 404 S BEACH BLVD	Policy Number
City WAVELAND State MS ZIP Code 39576	Company NAIC Number

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

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

Comments WO # 12-05-377-U
 TBM = NAIL IN POWER POLE W/ DISK SET @ PROP @ DRIVE @ EL = 12.65' FEET
 A/C IS LOWEST MACHINERY
 *ENCLOSURE IS CONSTRUCTED WITH BREAK-A-WAY WALLS -VENTS NOT REQUIRED

Signature  Date 9-12-13 Check here if attachments

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

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

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
 a) Top of bottom floor (including basement, 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 _____	
Comments _____			

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9.

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

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

- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters (PR) Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____
- G10. Community's design flood elevation _____ feet meters (PR) Datum _____

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

Check here if attachments

Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 404 S. BEACH	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 two 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." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.



WAVELAND NONCONVERSION AGREEMENT
with
CITY OF WAVELAND, MISSISSIPPI

This DECLARATION made this 22nd day of January, 20 14
by Robert Kearney ("Owner") having an address at
404 So Beach Blvd

WITNESSETH:

WHEREAS, the Owner is the record owner of all that real property located at
404 So Beach Blvd City of Waveland, Ms. in the County of Hancock,
designated in the Tax Records as 161M-0-11-138.001

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 the Waveland Floodplain Management Ordinance of Number
325 and under Permit Number 16743.

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 7-1 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 22nd day of January, 20 14

[Signature]
Owner

State of Mississippi, County of Hancock
Personally appeared before me, the undersigned (Seal)
authority in and for the said county and state,
on this 22nd day of January, 20 14, within
my jurisdiction, the within named Robert Kearney
who acknowledged that He executed the
above and foregoing instrument. Timothy A. Kellar
Chancery Clerk



My Commission Expires Dec. 31, 2015

2014 703
~~Deed Book & Page~~
2013 2717
Recorded in the Above
Deed Book & Page
03-01-2013 10:15:17 AM
Timothy A Kellar
Hancock County

STATE OF LOUISIANA
PARISH OF JEFFERSON

WARRANTY DEED

FOR AND IN CONSIDERATION of the sum of Ten Dollars (\$10.00), cash in hand paid, and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, we, KEARNY QUINN ROBERT, JR., and wife, SUSAN HANCKES ROBERT, Grantors, do hereby grant, bargain, sell, convey and warrant unto KEARNY QUINN ROBERT, III, and wife, KATHLEEN VOGT ROBERT, Grantees, fee simple title in and to the interest in the following described real property located and situated in Hancock County, Mississippi:

All that certain part of LOT 42, THIRD WARD, CITY OF WAVELAND, County of Hancock, State of Mississippi, as recorded in the Office of the Chancery Clerk of said county, being more particularly identified as follows:

Commencing at the intersection of the Southwest line of Farrar Street, with the Southeast line of Fell Street; thence along said Southwest line, South 45 degrees East 790 feet to the Southeasterly line of Robert, as described in Deed Book Q-7, page 572, in the Office of the Chancery Clerk of said county; thence along the Southeasterly line of Robert, South 45 degrees West 74.72 feet to the point of beginning; thence parallel with Farrar Street, South 45 degrees East 389.76 feet to the Westerly right of way of Beach Boulevard; thence along said right of way, South 37 degrees 33 minutes West 78.88 feet to the Northeasterly line of Lot 44 of said Third Ward; thence along said line, North 44 degrees 30 minutes West 400 feet to the Southeasterly line of Robert; thence along said line, North 45 degrees East 74.72 feet to the POINT OF BEGINNING, said parcel being a portion of the property described in Assumption Deed recorded at File Book AA59 at Page 442 in the Office of the Chancery Clerk of Hancock County, Mississippi.

AND ALSO, that portion of the "water lot" located directly South of the hereinabove described property, being part of Lot 41, Third Ward, Town of Waveland, Hancock County, Mississippi, the sidelines of which are the extension of the sidelines of the property set out hereinabove.

Together with all improvements situated thereon and all appurtenances thereunto belonging.

Real estate taxes for the current year are assumed by the Grantees herein, who also execute this document.

KQ
KUR
SHR
KQRD

Witness the signatures of the undersigned Grantors and Grantees this the 13TH day of
January, 2013.



Hancock County
I certify this instrument was filed on
01-22-2014 02:12:19 PM
and recorded in Deed Book
2014 at pages 702 - 704
Timothy A Kellar

Shelia Daniels

Kearny Quinn Robert, Jr.

KEARNY QUINN ROBERT, JR., Grantor

Susan Hanckes Robert

SUSAN HANCKES ROBERT, Grantor

Kearny Quinn Robert, III

KEARNY QUINN ROBERT, III, Grantee

Kathleen V Robert

KATHLEEN VOGT ROBERT, Grantee

STATE OF LOUISIANA

PARISH OF JEFFERSON

The aforesaid Grantors and Grantees personally appeared before me, the undersigned authority in and for the State and Parish aforesaid, on this 16th day of January, 2013, who acknowledge that they executed the above and foregoing instrument as their free act and deed.

[Signature of Steven K. Faulkner, Jr.]

STEVEN K. FAULKNER, JR.,
NOTARY PUBLIC, Bar Roll No. 5471
Commissioned For Life

GRANTORS:
KEARNY QUINN ROBERT, JR.
SUSAN HANCKES ROBERT
81 Dove Street
New Orleans LA 70124
(504)284-3462

GRANTEES:
KEARNY QUINN ROBERT, III
KATHLEEN VOGT ROBERT
210 West Oakridge Park
Metairie LA 70005
(504)838-7746

Hancock County
I certify this instrument was filed on
03-01-2013 10:15:17 AM
and recorded in Deed Book
2013 at pages 2717 - 2718
Timothy A Kellar

PREPARED BY STEVEN K. FAULKNER, JR.
Attorney at Law (State of Louisiana)
2021 Hickory Avenue
Harahan LA 70123



Shelia Daniels

JAR
KR *KOR*
KWR