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

National Flood Insurance Program

OMB No. 1660-0008

Expiration Date: November 30, 2022

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 INFORMATION					FOR INSUR	ANCE COMPANY USE
A1. Building Owner's Name Kingston 2019-345					Policy Numb	per:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 414 Edwards St					Company N	AIC Number:
City Waveland	State			ZIP Code 39576		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 3 and part of Lot 4, Alba Subdivision, City of Waveland, MS. Tax parcel 161C-0-02-109.001						
A4. Building Use (e.g., F	Residential, Non-Residential, A	Addition,	Accessory, e	etc.) Residential		
A5. Latitude/Longitude:	Lat. 30-17-35	Long. 89	9-22-04	Horizontal	Datum: NAD 1	927 🗵 NAD 1983
A6. Attach at least 2 pho	otographs of the building if the	Certific	ate is being u	sed to obtain flood	insurance.	
A7. Building Diagram Nu	ımber <u>1B</u>					
A8. For a building with a	crawlspace or enclosure(s):					
a) Square footage o	of crawlspace or enclosure(s)			0.00 sq ft		
b) Number of perma	nent flood openings in the cra	wlspace	or enclosure	e(s) within 1.0 foot	above adjacent gra	de <u>0</u>
c) Total net area of	flood openings in A8.b		0.00 sq in			
d) Engineered flood	openings? Yes X N	0				
A9. For a building with an attached garage:						
a) Square footage of attached garage 480.00 sq ft						
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0						
c) Total net area of flood openings in A9.b 0.00 sq in						
d) Engineered flood openings? Yes No						
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Na City of Waveland 285262	me & Community Number 2		B2. County Hancock	Name		B3. State Mississippi
B4. Map/Panel B5. Number	Suffix B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
28045C0361 D	10-16-2009	10-16-2		AE	18.0	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:						
☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other/Source:						
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🗵 No						
Designation Date: CBRS OPA						

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ELEVATION CERTIFICATE Expiration Date: November 30, 2022 IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE Policy Number: Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 414 Edwards St ZIP Code Company NAIC Number City State Waveland Mississippi 39576 SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) ☐ Construction Drawings* ☐ Building Under Construction* C1. Building elevations are based on: *A new Elevation Certificate will be required when construction of the building is complete. C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: GPS Derived Vertical Datum: NAVD88 Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 🔀 NAVD 1988 ☐ Other/Source: Datum used for building elevations must be the same as that used for the BFE. Check the measurement used. 19.7 x feet □ meters a) Top of bottom floor (including basement, crawlspace, or enclosure floor) N/A feet meters b) Top of the next higher floor N/A feet meters c) Bottom of the lowest horizontal structural member (V Zones only) 19.0 x feet meters d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building 20.1 x feet meters (Describe type of equipment and location in Comments) 16.7 x feet meters f) Lowest adjacent (finished) grade next to building (LAG) 16.8 x feet meters g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs, including N/A ☐ feet meters structural support 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. Were latitude and longitude in Section A provided by a licensed land surveyor?

Yes
No X Check here if attachments. Harrist Branch CHIA License Number Certifier's Name P.E. 19732 Jason P. Chiniche Title Project Manager Company Name Chiniche Engineering & Surveying Address 407 Hwy 90 ZIP Code City State Bay Saint Louis Mississippi 39520 Telephone Ext. Date Signature (228) 467-6755 Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner. Comments (including type of equipment and location, per C2(e), if applicable) NOTE: The description in A3 above is for information only & not to certify the building location. The base flood elevation (BFE) is per Map Section B4. Recommend verification of (BFE) by local building official. The flood zone is determined by graphic plotting, owner is responsible for coordinating this certificate with contractor and/or building official as needed. TBM is a MAG nail set 1.0' from edge of asphalt near the southernmost prop. cor. EL: 15.9' See Firmette dated 12/05/2019 for reference. Waveland freeboard = 1.0'

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OMB No. 1660-0008 Expiration Date: November 30, 2022

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Building Street Address (including Apt., Unit, Suite, and 414 Edwards St	Policy Number:					
,	State ZIP Mississippi 395	Code 76	Company NAIC Number			
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 b) Top of bottom floor (including basement,		feet meter				
crawlspace, or enclosure) is E2. For Building Diagrams 6–9 with permanent flood of	nenings provided in Section	feet meter	95-00-1877 - 195-00-187			
the next higher floor (elevation C2.b in the diagrams) of the building is		feet meter				
E3. Attached garage (top of slab) is		☐ feet ☐ meter	s above or below the HAG.			
E4. Top of platform of machinery and/or equipment servicing the building is		☐ feet ☐ meter				
E5. Zone AO only: If no flood depth number is availab floodplain management ordinance? Yes	le, is the top of the bottom No Unknown. The	floor elevated in ac e local official must	cordance with the community's certify this information in Section G.			
SECTION F - PROPERTY OW	NER (OR OWNER'S REP	RESENTATIVE) CE	ERTIFICATION			
The property owner or owner's authorized representati community-issued BFE) or Zone AO must sign here. T	ve who completes Section he statements in Sections	s A, B, and E for Zo 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	Te	lephone			
Comments						
			Check here if attachments.			

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, S 414 Edwards St	Policy Number:			
City State ZIP Code Vaveland Mississippi 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 management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.				
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 Sect or Zone AO.	ion E for a building located in Zone A (with	out a FEMA	A-issued or community-issued BFE)	
G3. The following information (Items G4-	-G10) is provided for community floodplain	manageme	ent purposes.	
G4. Permit Number	it Number G5. Date Permit Issued G6.		Date Certificate of Compliance/Occupancy Issued	
G7. This permit has been issued for:	New Construction Substantial Improv	vement		
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:	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 lo	cation, per C2(e), if applicable)			
			Check here if attachments.	

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2022

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 414 Edwards St			Policy Number:	
City	State	ZIP Code	Company NAIC Number	
Waveland	Mississippi	39576		

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.



Photo One

Photo One Caption FRONT VIEW

Clear Photo One



Photo Two Caption REAR VIEW

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2022

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. Policy Number: 414 Edwards St ZIP Code City State Company NAIC Number Waveland Mississippi 39576

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. 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.



Photo Three Caption MNS TBM EL = 15.9'

Clear Photo Three



Photo Four Caption SIDE VIEW

Clear Photo Four