U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1–9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

		- PROPERTY IN		N	FOR INSURAN	ICE COMPANY USE
A1. Building Owner's Name The Hous	ing Authority of the C	ity of Wavelan	d		Policy Number:	
A2. Building Street Address (including Ap 504 Camille Circle	t., Unit, Suite, and/or Bldg				Company NAIC	
^{City} Waveland		Stat	^e MS	Z	IP Code 395	76
A3. Property Description (Lot and Block I Part of Tax Parcel #162H-0-03-	018.00 (building 7)					
 A4. Building Use (e.g., Residential, Non-FA5. Latitude/Longitude: Lat. 30d17'14 A6. Attach at least 2 photographs of the A7. Building Diagram Number 1A A8. For a building with a crawlspace or ea) Square footage of crawlspace or b) Number of permanent flood open or enclosure(s) within 1.0 foot ab c) Total net area of flood openings: [4" Lor building if the Certificate in closure(s): enclosure(s) ngs in the crawlspace ove adjacent grade	g. <u>89d22'46.0"</u> s being used to ob a sq ft	A9. For a bua) Squab) Numwith	irance. iilding with an atta are footage of atta	ached garage : flood opening adjacent grad openings in /	na sq ft gs in the attached garage e na sq in
SEC	TION B - FLOOD INS	JRANCE RATE I	/AP (FIRM	INFORMATIO	N	
B1. NFIP Community Name & Community		B2. County Nam		, •	Т	B3. State
City of Waveland 285262 B4. Map/Panel Number B5. Suffix	B6. FIRM Index Date	Hancock B7. FIRM Panel I	-ffaatius /	B8. Flood Zone(s)	DO D	Ms
28045C0342 D	10/16/2009	Revised Date 10/16/20	e ′	AE		Flood Elevation(s) (Zone se base flood depth) 18
B10. Indicate the source of the Base Floor ☐ FIS Profile ☐ FIRM ☐ Comm			tered in Item	B9:		
☐ FIS Profile ☐ FIRM ☐ Comm B11.Indicate elevation datum used for BF B12.Is the building located in a Coastal B Designation Date:/	in Item B9: NGVI	AC 000000000000000000000000000000000000		☐ Other/Source: ed Area (OPA)?		No
SECTI	ON C – BUILDING ELE	VATION INFORM	IATION (SU	RVEY REQUIR	ED)	
 C1. Building elevations are based on: *A new Elevation Certificate will be recipied. C2. Elevations – Zones A1–A30, AE, AH, AC2.a–h below according to the building Benchmark Utilized: GPS RTK-Trir 	(with BFE), VE, V1–V30, Ving diagram specified in Ite	of the building is o (with BFE), AR, AR m A7. In Puerto Ric	/A, AR/AE, AI	R/A1–A30, AR/AH meters.	☑ Finished Co	
Indicate elevation datum used for the Datum used for building elevations m	elevations in items a) thre	ough h) below.	NGVD 1929	NAVD 1988 Check the me		
a) Top of bottom floor (including base	ment, crawlspace, or encl	osure floor)	<u>19</u> . <u>7</u>		☐ meters	
b) Top of the next higher floorc) Bottom of the lowest horizontal st	ructural member (V Zenes	only)	na . na .	_ ☐ feet _ ☐ feet	meters	
d) Attached garage (top of slab)	detaral member (v zones	Offiy)	na .	_ ☐ feet	☐ meters	
e) Lowest elevation of machinery or e (Describe type of equipment and let)		ilding	19 . 1	_ ⊠ feet	meters	
f) Lowest adjacent (finished) grade n	ext to building (LAG)	11	<u>18</u> . <u>8</u>	_ I feet	☐ meters	
g) Highest adjacent (finished) grade rh) Lowest adjacent grade at lowest e structural support		including	<u>19</u> . <u>4</u> na .	_ ⊠ feet _ ☐ feet	☐ meters ☐ meters	
SECT	ION D – SURVEYOR, I	NGINEER OR A	RCHITECT	CERTIFICATIO	N.	
This certification is to be signed and sealed information. I certify that the information on I understand that any false statement may be Check here if comments are provided on Check here if attachments.	by a land surveyor, engine this Certificate represents a punishable by fine or imp back of form. Were la	eer, or architect aut my best efforts to in	horized by law hterpret the da 3 U.S. Code, S de in Section	to certify elevation ata available. ection 1001.		SURVEYOR
Certifier's Name Paul A. Liles			License Num	ber		POLACE V
Title Professional Surveyor	Mach	any Name ado Patano		TELES	S	05/10/2016 PS-3174
Address 1641 Popps Ferry Road, Suite A-4	City Biloxi		State MS	ZIP Code 39532	T.	See Se
Signature Laul a. Lo	Date 05/09	/2016	Telephone (228) 388-1	•	and the state of t	OF MISSISSISSISSISSISSISSISSISSISSISSISSISS

IMPORTANT: In these spaces, copy the corresponding information from Sect	on A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Ro 504 Camille Circle	ute and Box No.	Policy Number:
ity State Waveland MS	ZIP Code 39576	Company NAIC Number:
SECTION D - SURVEYOR, ENGINEER, OR A	ARCHITECT CERTIFICAT	TON (CONTINUED)
copy both sides of this Elevation Certificate for (1) community official, (2) insur	ance agent/company, and (3	b) building owner.
comments C2a= building slab elevation. C2e= air conditioner pad. C2	f and g)=existing grades	
		· · · · · · · · · · · · · · · · · · ·
ignature 40.101	Data	
Tall in Co	Date 05/09/2016	
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY)		
or Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is in or Items E1–E4, use natural grade, if available. Check the measurement used	In Puerto Rico only, enter m	eters.
 Provide elevation information for the following and check the appropriate be grade (HAG) and the lowest adjacent grade (LAG). 	xes to show whether the ele	
		meters above or below the HAG.
		meters above or below the LAG.
 For Building Diagrams 6–9 with permanent flood openings provided in Secti the next higher floor (elevation C2.b in the diagrams) of the building is 		
B. Attached garage (top of slab) is		☐ meters ☐ above or ☐ below the HAG. ☐ meters ☐ above or ☐ below the HAG.
Top of platform of machinery and/or equipment servicing the building is		☐ meters ☐ above or ☐ below the HAG.
i. Zone AO only: If no flood depth number is available, is the top of the bottom ordinance? ☐ Yes ☐ No ☐ Unknown. The local official must certify the	floor elevated in accordance	
SECTION F - PROPERTY OWNER (OR OWN	IER'S REPRESENTATIVE	E) CERTIFICATION
ne property owner or owner's authorized representative who completes Section one AO must sign here. The statements in Sections A, B, and E are correct to	ns A, B, and E for Zone A (wit the best of my knowledge.	hout a FEMA-issued or community-issued BFE) o
operty Owner or Owner's Authorized Representative's Name		4)
Idress	City	State ZIP Code
gnature	Date	Telephone
omments		3
		Check here if attachments.
SECTION G - COMMUNITY	NFORMATION (OPTION	AL)
e local official who is authorized by law or ordinance to administer the communi of this Elevation Certificate. Complete the applicable item(s) and sign below. Ch	ty's floodplain management o eck the measurement used ir	rdinance can complete Sections A, B, C (or E), an n Items G8–G10. In Puerto Rico only, enter meters
1. The information in Section C was taken from other documentation that	t has been signed and seal	ed by a licensed surveyor, engineer, or archited
who is authorized by law to certify elevation information. (Indicate the 2. A community official completed Section E for a building located in Zone		
3. ☐ The following information (Items G4–G10) is provided for community f		
4. Permit Number G5. Date Permit Issued	G6. Date Certif	icate Of Compliance/Occupancy Issued
7. This permit has been issued for: New Construction Substantion	al Improvement	
3. Elevation of as-built lowest floor (including basement) of the building:	🗆 feet	meters Datum
BFE or (in Zone AO) depth of flooding at the building site:		meters Datum
O.Community's design flood elevation:	🗆 feet	meters Datum
cal Official's Name	Title	
ommunity Name	Telephone	
gnature	Date	
omments		
	·	
		Check here if attachments

ELEVATION CERTIFICATE, page 3

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

IMPORTANT: In these spaces, copy th	ection A.	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., 504 Camille Circle	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 view 05/09/2016



ELEVATION CERTIFICATE, page 4

BUILDING PHOTOGRAPHS

Continuation Page

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt. 504 Camille Circle	Policy Number:	
City Waveland	State ZIP Code MS 39576	Company NAIC Number:

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.

Rear view 05/09/2016



U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

National Flood Insurance Program

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

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

	SECTION A – PROPERTY INFORMATION						FOR INSURANCE COMPANY USE			
A1.	Building Owner's Nar	^{ne} The Housir	ng Authority of	the Ci	ity of Wav	eland			Policy Numb	er:
A2.	Building Street Addre 504 Camille	ess (including Apt Circle	., Unit, Suite, and,	or Bldg.	. No.) or PO.).	Company NA	
	^{City} Waveland					State MS			ZIP Code 3	9576
АЗ.	Property Description Part of Tax Parce	(Lot and Block Ni I #162H-0-03-0	umbers, Tax Parce 18.00 (building	l Numbe 7)	er, Legal Des	cription, et	c.)			
A7.	Attach at least 2 pho	Lat, <u>30d17'14.4</u> stographs of the b mber <u>1A</u>	uilding if the Cert	Long	. 89d22'4	6.0" to obtain f	lood in	Horizontal surance.	Datum: ttached gara	
	a) Square footage of			na	<u>1</u> S	q ft	100	uare footage of a	_	
	b) Number of perma or enclosure(s) wi	ithin 1.0 foot abo	ve adjacent grade	na na			b) Nu wit	mber of permane hin 1.0 foot abov	nt flood oper e adjacent g	nings in the attached garag rade <u>na</u>
	c) Total net area of fd) Engineered flood			na	SI SI	q in		al net area of flo		
	u) Engineered 11000							gineered flood or		Yes 🛮 No
D4	NEID Committee No		TION B - FLOO	D INSU			(FIRI	И) INFORMATI	ON	
BI.	NFIP Community Nam City of Waveland 2		lumber		B2. County Hancock					B3. State Ms
B4.	Map/Panel Number	B5. Suffix	B6. FIRM Index		B7. FIRM F	Panel Effect ed Date	tive/	B8. Flood Zone		se Flood Elevation(s) (Zone use base flood depth)
	28045C0342	D	10/16/200			16/2009		AE		18
B10	. Indicate the source o ☐ FIS Profile		Elevation (BFE) da unity Determined		se flood der her/Source:		in Iten	n B9:		
	. Indicate elevation dat			☐ NGVD		X NAVD 19		Other/Source		
B12	. Is the building located					or Otherwise	e Prote	cted Area (OPA)?	☐ Yes	⊠ No
	Designation Date:				☐ OPA					
		SECTIO	N C – BUILDIN	G ELE	ATION IN	FORMATI	ON (S	URVEY REQUI	RED)	
C1.	Building elevations ar *A new Elevation Cert	e based on:	Construction	Drawing	s* 🗵	Building Ur	nder Co	enstruction*	Finished	Construction
C2.	Elevations – Zones A. C2.a–h below accordi Benchmark Utilized:	1–A30, AE, AH, A ng to the building	(with BFE), VE, V1 diagram specifie	–V30, V d in Item	(with BFE), An A7. In Puer	AR, AR/A, A	R/AE, y, ente	r meters.	AH, AR/AO. C	complete Items
	Indicate elevation dat Datum used for buildi	um used for the	elevations in items	s a) thro	ugh h) belov	v. 🗌 NGVI			Other/S	ource:
						19	6	Arabas attraction and a second	neasurement	
	a) Top of bottom floorb) Top of the next high		nent, crawispace,	or endo	sure noor)			⊠ fee		
	c) Bottom of the lower	S 100000 10 10	ctural member (V	Zones o	only)	na				
	d) Attached garage (to		ζ.	201100	, <u>,</u> ,	na		fee		
	e) Lowest elevation of (Describe type of e	of machinery or ec			lding	19	5	See		
	f) Lowest adjacent (fi			1.5		19	0	I fee	t mete	rs
	g) Highest adjacent (f			Ø		19	2	See		
	 h) Lowest adjacent grant structural support 	rade at lowest ele	vation of deck or	stairs, ii	ncluding	<u>na</u> .	-	fee	t 🗌 mete	rs
		SECTI	ON D - SURVE	YOR, E	NGINEER.	OR ARCI	HITEC	T CERTIFICAT	ION	
nform	ertification is to be signation. I certify that the erstand that any false s	ned and sealed be information on the	y a land surveyor, nis Certificate repr	enginee	er, or archite	ct authorize	ed by la	aw to certify eleva		William Contraction
Che	eck here if comments a eck here if attachment	are provided on b	ack of form.	Were la		ongitude in		A provided by a	.1110	PROFESSION
	ier's Name A. Liles					Lice 31	ense Nu 74	mber	Till the same of t	POLAL
Title Profe	essional Surveyor	The state of the s			ny Name ado Patano)		SAME	WHAT I	02/98/2016
Addre		, Suite A-4		City	ado Fatant	State MS	e	ZIP Code 39532	1888	PS-3174 PS-317
Signa		0		Date 02/15/	2016	Telep	ohone 3) 388	-1950		OF MISSISSIPPI
52 1/2 20 1/2										2000000000

ELEVATION CERTIFICATE, page 2

FEMA Form 086-0-33 (Revised 7/12)

,				Name and the second	
IMPORTANT: In these spaces, copy the corr				FOR INSURANCE CO	MPANY USE
Building Street Address (including Apt., Unit, 504 Camille Circle				Policy Number:	
City Waveland	State MS	ZIP Code 39576		Company NAIC Number	:
	SURVEYOR, ENGINEER, OR A				
Copy both sides of this Elevation Certificate f	or (1) community official, (2) insura	ince agent/compa	any, and (3) buildin	g owner.	
Comments C2a= building slab elevation.	C2e= proposed air conditione	r pad. C2f and g	g)=existing grade	es	
AM ST	1			And the second	
Circulus A M				3,000	
Signature Faul a. St		Date 02/15/20			***
SECTION E – BUILDING ELEVATIO		The Contract of the Contract o			
For Zones AO and A (without BFE), complete I For Items E1–E4, use natural grade, if availab	le. Check the measurement used.	In Puerto Rico on	ly, enter meters.		
E1. Provide elevation information for the follow grade (HAG) and the lowest adjacent grad	e (LAG).			A	
a) Top of bottom floor (including basemen			feet met		
b) Top of bottom floor (including basemen	A 18 1822 184		☐ feet ☐ mete	1.0.1.	below the LAG.
E2. For Building Diagrams 6–9 with permanen		n A Items 8 and/	The state of the s	THE STATE SHADOW CONTRACTOR STATES	
the next higher floor (elevation C2.b in the E3. Attached garage (top of slab) is			☐ feet ☐ mete		
E4. Top of platform of machinery and/or equipments			Alan III III II		
E5. Zone AO only: If no flood depth number is		floor elevated in s	feet mete		
	n. The local official must certify this			ie community's 1100apia	ain management
	ROPERTY OWNER (OR OWN				
The property owner or owner's authorized repr Zone AO must sign here. The statements In S	esentative who completes Section ections A, B, and E are correct to t	s A, B, and E for Z he best of my kno	Zone A (without a F owledge.	EMA-issued or commu	nity-issued BFE) or
Property Owner or Owner's Authorized Represe					
Address		City	Sta	ate ZIP Code	376 474
Signature		Date	Te	lephone	
Comments					
		****		Check her	e if attachments.
	SECTION G - COMMUNITY II	NFORMATION ((OPTIONAL)		
The local official who is authorized by law or ord G of this Elevation Certificate. Complete the ap	linance to administer the community plicable item(s) and sign below. Che	y's floodplain mana	agement ordinance ent used in Items (can complete Sections G8–G10. In Puerto Rico	A, B, C (or E), and only, enter meters.
G1. The information in Section C was take who is authorized by law to certify el	sen from other documentation that evation information, (Indicate the	t has been signed source and date (d and sealed by a of the elevation da	licensed surveyor, eng ata in the Comments a	ineer, or architect irea below.)
G2. A community official completed Section	on E for a building located in Zone	A (without a FEMA	A-issued or commu		
G3. The following information (Items G4-	-G10) is provided for community fl	oodplain manage	ment purposes.		
G4. Permit Number	G5. Date Permit Issued	G6. 0	Date Certificate Of	Compliance/Occupand	cy Issued
TOTAL STATE OF THE CONTROL OF THE CO		I Improvement			
G8. Elevation of as-built lowest floor (includin			feet mete	11000-0	
G9. BFE or (In Zone AO) depth of flooding at t	the building site:		feet mete		
G10.Community's design flood elevation:			☐ feet ☐ mete	rs Datum	
Local Official's Name		Title			***************************************
Community Name		Telephone			
Signature		Date	18		
Comments					
				∐ Check her	e if attachments.

Replaces all previous editions.

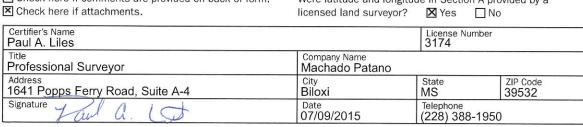
U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

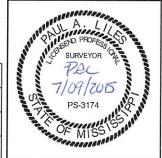
ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

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

50	4 Camule Circle SECTION A - PROPERTY INFORMATION						FOR INSURANCE O	COMPANY USE
A1.	Building Owner's Nar	^{me} The Housi	ng Authority of the C	ity of Wavel	and		Policy Number:	
A2.		ess (including Ap Court, Buildir	t., Unit, Suite, and/or Bldg ng No.7			No.	Company NAIC Numb	per:
	^{City} Waveland			S	tate MS	Z	IP Code 39576	
АЗ.	Property Description Part of Tax Parce		lumbers, Tax Parcel Numbe 018.00	er, Legal Descri	otion, etc.)			
A4.			esidential, Addition, Acces					
A5.	Latitude/Longitude:			g. <u>89d22'46.0</u>			Datum: NAD 19	927 × NAD 1983
A6.			building if the Certificate is	s being used to	obtain flood	insurance.		
	For a building with a		closure(s):		A9. For a	a building with an att	ached garage:	
	a) Square footage o		,	sq f		Square footage of att		na sq ft
	b) Number of perma	nent flood openi	ngs in the crawlspace na	ì				the attached garage
	c) Total net area of		10.0	a sq ir		vithin 1.0 foot above otal net area of flood		na sq in
	d) Engineered flood	and the second s				Engineered flood ope	1987 - 1987 - 1988 - 1988 - 1988 - 1988 - 1988 - 1988 - 1988 - 1988 - 1988 - 1988 - 1988 - 1988 - 1988 - 1988 -	⊠ No
		SEC	TION B – FLOOD INSU	RANCE RAT	F MAP (FIE	RM) INFORMATIO	N	W/58
B1.	NFIP Community Nam			B2. County N		tin, iti ottinario		State
	City of Waveland 2		T== ==:	Hancock			Ms	
В4.	Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Par Revised (B8. Flood Zone(s		d Elevation(s) (Zone se flood depth)
·	28045C0342	D	10/16/2009	10/16	/2009	AE	,	18
B10			Elevation (BFE) data or ba		entered in Ite	em B9:		
D44	☐ FIS Profile ☐ F		AND IN THE PROPERTY OF THE PRO	her/Source:	111/2 1000			
	.Indicate elevation da				NAVD 1988	Other/Source:		
DIZ	Designation Date:		arrier Resources System (C	DRS) area or C □ OPA	tnerwise Pro	tected Area (OPA)?	☐ Yes 🔀 No	
			ON C - BUILDING ELEV		RMATION (SURVEY REQUIR	ED)	
C1.	Building elevations ar *A new Elevation Cer	re based on:	Construction Drawing	s* ПВи	ilding Under (Finished Constr	uction
C2.	C2.a-h below accord	ing to the buildin	(with BFE), VE, V1–V30, V g diagram specified in Iten	n A7. In Puerto	Rico only, ent	ter meters.	H, AR/AO. Complete	e Items
	Benchmark Utilized: _	GPS RTK-Trim	ble VRS Network	Vertic	al Datum: <u>N</u>	AVD 1988		
	Indicate elevation dat Datum used for build	tum used for the ing elevations mu	elevations in items a) thro ust be the same as that us	ugh h) below. sed for the BFE	☐ NGVD 192			
	a) Top of bottom floo	r (including base	ment, crawlspace, or enclo	sure floor)	<u> 19</u> . <u>5</u>	Check the me	easurement used. meters	
	b) Top of the next his		ment, drawiopade, or endo	Surc 11001)	na .	Section 1	☐ meters	
			uctural member (V Zones o	only)	na .		☐ meters	
	d) Attached garage (t	top of slab)		_	na .	feet	☐ meters	
			quipment servicing the bui cation in Comments)	lding _	<u>19</u> . <u>5</u>	X feet	☐ meters	
	f) Lowest adjacent (f	finished) grade ne	ext to building (LAG)	2	<u>17</u> . <u>5</u>	feet	meters	
	g) Highest adjacent (finished) grade n	ext to building (HAG)	<u> </u>	<u>17</u> . <u>8</u>	X feet	☐ meters	
	h) Lowest adjacent g structural support		evation of deck or stairs, i	ncluding <u> </u>	<u>na</u>	feet	☐ meters	
		SECT	ION D – SURVEYOR, E	NGINEER, O	RARCHITE	CT CERTIFICATION)N	A A CONTRACTOR OF THE STATE OF
This c	ertification is to be sig		by a land surveyor, engine					
inform	nation. I certify that the	e information on t	this Certificate represents n	ny best efforts t	o interpret th	e data available.		*******
110-010-017			e punishable by fine or improack of form. Were la				3888	A LIVER LA





IMPORTANT: In these spaces, copy the	corresponding information from Section	n A.		FOR INSURANCE COMPANY USE
Building Street Address (including Apt., U 500 Camille Court, Building No.		te and Box No.		Policy Number:
City Waveland	State MS	ZIP Code 39576		Company NAIC Number:
SECTION D	- SURVEYOR, ENGINEER, OR A	RCHITECT CE	RTIFICATION (C	ONTINUED)
Copy both sides of this Elevation Certifica		nce agent/comp	any, and (3) buildin	g owner.
Comments C2e= proposed air conditi	oner pad			
C2f and g)=existing grade				
Signature Faul a. Con		Date 07/09/2	015	
SECTION E - BUILDING ELEVA	TION INFORMATION (SURVEY NO	OT REQUIRED) FOR ZONE AO	AND ZONE A (WITHOUT BFE)
For Zones AO and A (without BFE), comple For Items E1–E4, use natural grade, if ava				F request, complete Sections A, B,and
 Provide elevation information for the f grade (HAG) and the lowest adjacent ε 		es to show whet	ner the elevation is	above or below the highest adjacent
a) Top of bottom floor (including baser	5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.		feet mete	
b) Top of bottom floor (including baser			☐ feet ☐ mete	
2. For Building Diagrams 6–9 with perma	, , ,	n A Items 8 and		Name
the next higher floor (elevation C2.b in	the diagrams) of the building is	·	feet mete	
3. Attached garage (top of slab) is			☐ feet ☐ mete	
4. Top of platform of machinery and/or e			☐ feet ☐ mete	
 Zone AO only: If no flood depth number ordinance? ☐ Yes ☐ No ☐ Unknown 	er is available, is the top of the bottom f nown. The local official must certify this			e community's floodplain management
SECTION F	- PROPERTY OWNER (OR OWNE	R'S REPRES	ENTATIVE) CER	TIFICATION
he property owner or owner's authorized one AO must sign here. The statements				EMA-issued or community-issued BFE)
Property Owner or Owner's Authorized Rep	resentative's Name			
ddress		City	Sta	ate ZIP Code
ignature		Date	Tel	ephone
omments				
				Check here if attachments
	SECTION G – COMMUNITY IN	FORMATION	(OPTIONAL)	
he local official who is authorized by law o of this Elevation Certificate. Complete the				
 The information in Section C was who is authorized by law to certif 	s taken from other documentation that fy elevation information. (Indicate the s	has been signe source and date	d and sealed by a of the elevation da	licensed surveyor, engineer, or archite ata in the Comments area below.)
A community official completed SThe following information (Items		200 April 100		nity-issued BFE) or Zone AO.
4. Permit Number	G5. Date Permit Issued	G6.	Date Certificate Of	Compliance/Occupancy Issued
7. This permit has been issued for:	☐ New Construction ☐ Substantial	I Improvement		
8. Elevation of as-built lowest floor (incl	uding basement) of the building:		☐ feet ☐ mete	rs Datum
9. BFE or (in Zone AO) depth of flooding	at the building site:	·	☐ feet ☐ mete	
10. Community's design flood elevation:			☐ feet ☐ mete	rs Datum
ocal Official's Name		Title		
ommunity Name		Telephone		
ignature		Date		
Comments			-10-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
				Check here if attachments