



The Hospitality City

CERTIFICATE OF OCCUPANCY

CITY OF WAVELAND

This Certificate is issued pursuant to the requirements of the 2012 International Codes Council certifying 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.

Certificate #: 1800112

Issued to: WILLIAM BOURGEOIS

Building Address: 900 S BEACH BLVD

City, State, Zip: WAVELAND, MS 39576

Issued Date: 08-24-2018

Expires: END OF OCCUPANCY

Occupancy Type: Single Family Residential

Sprinkler System Required: No

Special Conditions: NONE



Building Official



Date

2018 9787
Recorded in the Above
Deed Book & Page
08-09-2018 09:11:28 AM
Timothy A Kellar
Hancock County

WAVELAND

NON-CONVERSION AGREEMENT with CITY OF WAVELAND, MISSISSIPPI

This DECLARATION made this 9 day of August 2018
By William P. Bourgeois (OWNER) having an address at 900 S. Beach Blvd.

WITNESSETH:

WHEREAS, the Owner is the record owner of all that real property located at 900 S. Beach Blvd.
In the City of Waveland, MS, in the County of Hancock, designated in the Tax Records as Parcel 165B-0-15-014.000
WHEREAS, the Owner has applied for a permit to place a structure on that property that has an enclosed area below the base flood elevation constructed in accordance with the requirements of Article No. 5, Section "B" paragraph 5 of Waveland Floodplain Management Ordinance of Number 342 and under Permit Number 1800112.

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 22 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 9th day of August 2018.

William P. Bourgeois (Print) _____ (Print)

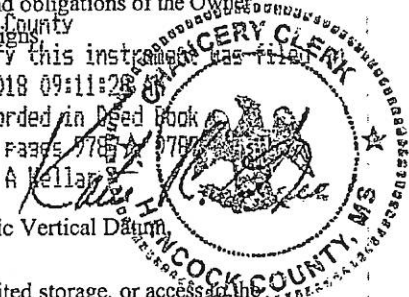
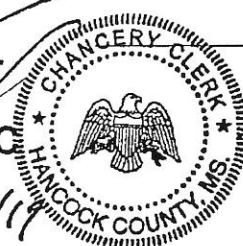
William P. Bourgeois (Signature) _____ (Signature)

State of Mississippi, County of Hancock
Personally appeared before me, the undersigned authority in and for the said county and state, on this 9 day of August, 2018, with my jurisdiction, the within named William P. Bourgeois who acknowledged that he executed the above and foregoing instrument.

Timothy A. Kellar
Chancery Clerk

By: _____ DC

WITNESS

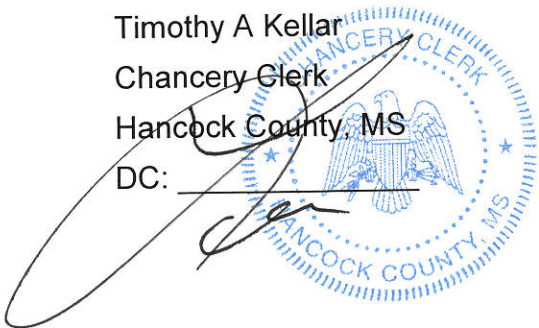


*** Certified Copy Page ***

I, Timothy A Kellar, Chancery Clerk, do hereby certify that the foregoing is a FULL, TRUE and CORRECT copy of the Instruments(s) herewith set out as same appears of record in: Deed BOOK - 2018, AT PAGE - 9787 in said court.

Witness my hand and seal this 9 Day of August, 2018.

Timothy A Kellar
Chancery Clerk
Hancock County, MS
DC: _____



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 INSURANCE COMPANY USE	
A1. Building Owner's Name BILL BOURGEOIS				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 900 S. BEACH BLVD				Company NAIC Number:	
City WAVELAND	State Mississippi	ZIP Code 39576			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL # (165B-20-15-014.000)					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>N 30-16-0</u> Long. <u>W 89-23-14</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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):					
a) Square footage of crawlspace or enclosure(s) <u>240</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>2</u>					
c) Total net area of flood openings in A8.b <u>0</u> sq in					
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>0</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>					
c) Total net area of flood openings in A9.b <u>0</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input 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 Mississippi
B4. Map/Panel Number 28045C-0344	B5. Suffix D	B6. FIRM Index Date 10/16/2009	B7. FIRM Panel Effective/ Revised Date 10/16/2009	B8. Flood Zone(s) VE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 22
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/Source: _____					
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/Source: _____					
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: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 900 S. BEACH BLVD			Policy Number:
City WAVELAND	State Mississippi	ZIP Code 39576	Company NAIC Number

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. In Puerto Rico only, enter meters.

Benchmark Utilized: USM NETWORK Vertical Datum: NAVD 1988

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.

- | | | | | |
|--|-------|-------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) _____ | 13. 9 | _____ | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor _____ | 27. 5 | _____ | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) _____ | 26. 3 | _____ | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab) _____ | N/A | _____ | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) _____ | 27. 7 | _____ | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) _____ | 12. 8 | _____ | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) _____ | 13. 3 | _____ | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____ | 13. 1 | _____ | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |

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 Check here if attachments.

Certifier's Name DUKE LEVY	License Number 01722	
Title SURVEYOR		
Company Name DUKE LEVY & ASSOCIATES		
Address 4412 LIESURE TIME DRIVE		
City DIAMONDHEAD	State Mississippi	
Signature 	Date 08/10/2018	Telephone (228) 467-5212

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)
 WO # 18-17-241-1
 BENCHMARK - PK NAIL W/DISK SET IN THE CENTERLINE OF S.BEACH BLVD AT THE PROPERTY AND A CONCRETE DRIVE AT EL = 5.39' FEET.
 AN A/C UNIT IS THE LOWEST MACHINERY SERVICING THE HOUSE AND IT IS LOCATED ON THE WEST SIDE.
 THE ENCLOSURE HAS 2 EA. ENGINEERED VENTS INSTALLED.EACH VENT COVERS 200 SQ. FT..

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

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. 900 S. BEACH BLVD			Policy Number:
City WAVELAND	State Mississippi	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.



Photo One

Photo One Caption



Photo Two

Photo Two Caption

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 900 S. BEACH BLVD			Policy Number:
City WAVELAND	State Mississippi	ZIP Code 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.



Photo One

Photo One Caption

Photo Two

Photo Two

Photo Two Caption

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 INSURANCE COMPANY USE
A1. Building Owner's Name BILL BOURGEOIS		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 900 S. BEACH BLVD		Company NAIC Number:
City WAVELAND	State Mississippi	ZIP Code 39576
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL # (165B-20-15-014.000)		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>		
A5. Latitude/Longitude: Lat. <u>N 30-16-0</u> Long. <u>W 89-23-14</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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):		
a) Square footage of crawlspace or enclosure(s) <u>0</u> sq ft		
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u>		
c) Total net area of flood openings in A8.b <u>0</u> sq in		
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		
A9. For a building with an attached garage:		
a) Square footage of attached garage <u>0</u> sq ft		
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>		
c) Total net area of flood openings in A9.b <u>0</u> sq in		
d) Engineered flood openings? <input type="checkbox"/> Yes <input 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 Mississippi
B4. Map/Panel Number 28045C-0344	B5. Suffix D	B6. FIRM Index Date 10/16/2009	B7. FIRM Panel Effective/ Revised Date 10/16/2009	B8. Flood Zone(s) VE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 22

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

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 900 S. BEACH BLVD			Policy Number:
City WAVELAND	State Mississippi	ZIP Code 39576	Company NAIC Number

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Benchmark Utilized: USM NETWORK Vertical Datum: NAVD 1988

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.

- | | | | |
|---|------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) | 27.5 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | 26.3 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab) | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building
(Describe type of equipment and location in Comments) | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | 12.7 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | 13.1 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support | N/A | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |

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 Check here if attachments.

Certifier's Name DUKE LEVY	License Number 01722	
Title SURVEYOR		
Company Name DUKE LEVY & ASSOCIATES		
Address 1711 WAVELAND AVE		
City WAVELAND	State Mississippi	
Signature 	Date 04/20/2018	Telephone (228) 467-5212

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)
WO # 18-17-241
BENCHMARK - PK NAIL W/DISK SET IN THE CENTERLINE OF S.BEACH BLVD AT THE PROPERTY AND A CONCRETE DRIVE AT EL = 5.39' FEET.

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 INSURANCE COMPANY USE
A1. Building Owner's Name BILL BOURGEOIS		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 900 S. BEACH BLVD		Company NAIC Number:
City WAVELAND	State Mississippi	ZIP Code 39576
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL # (165B-20-15-014.000)		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>		
A5. Latitude/Longitude: Lat. <u>N 30-16-0</u> Long. <u>W 89-23-14</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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):		
a) Square footage of crawlspace or enclosure(s) _____ sq ft		
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		
c) Total net area of flood openings in A8.b _____ sq in		
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		
A9. For a building with an attached garage:		
a) Square footage of attached garage _____ sq ft		
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____		
c) Total net area of flood openings in A9.b _____ sq in		
d) Engineered flood openings? <input type="checkbox"/> Yes <input 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 Mississippi
B4. Map/Panel Number 28045C-0344	B5. Suffix D	B6. FIRM Index Date 10/16/2009	B7. FIRM Panel Effective/ Revised Date 10/16/2009	B8. Flood Zone(s) VE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 22

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

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 900 S. BEACH BLVD			Policy Number:
City WAVELAND	State Mississippi	ZIP Code 39576	Company NAIC Number

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. In Puerto Rico only, enter meters.

Benchmark Utilized: LOCAL Vertical Datum: NAVD 1988

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.

- | | | | |
|---|-------------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) | <u>25.5</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor | _____ | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | <u>24.0</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab) | _____ | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building
(Describe type of equipment and location in Comments) | _____ | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | <u>12.7</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | <u>13.1</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support | _____ | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |

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 Check here if attachments.

Certifier's Name DUKE LEVY	License Number 01722
Title SURVEYOR	
Company Name DUKE LEVY & ASSOCIATES	
Address 1711 WAVELAND AVE	
City WAVELAND	State Mississippi
	ZIP Code 39576
Signature 	Date 09/27/2017
	Telephone (228) 467-5212



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)

WO # 17-241
TBM - PK NAIL W/DISK SET IN THE CENTERLINE OF S. BEACH BLVD AT THE PROPERTY AND A CONCRETE DRIVE AT EL = 5.39' FEET

V-ZONE CERTIFICATE

Name: Bill Bourgeois
Building Address or
Other Description: 900 S. Beach Blvd
City: Waveland

Policy Number (*Insurance Co. Use*):

State: Mississippi

Zip Code: 39576

SECTION I: Flood Insurance Rate Map (FIRM) Information

Community Number: 285262 Panel Number: 28045C0344 Suffix: D Date of FIRM Index 10/16/09 FIRM Zone: VE 22

SECTION II: Elevation Information

Note: This Certificate does not substitute for an Elevation Certificate

1. Elevation of the Bottom of Lowest Horizontal Structural Member..... 25.0 * feet (NAVD)
2. Base Flood Elevation (BFE)..... 22.0 feet (NAVD)
3. Elevation of Lowest Adjacent Grade..... 12.7 feet (NAVD)
4. Approximate Depth of Anticipated Scour/Erosion used for Foundation Design..... 1.0 feet
5. Embedment Depth of Pilings or Foundation Below Lowest Adjacent Grade..... 7.0 feet

SECTION III: V-Zone Certification Statement

Note: This section must be certified by a registered engineer or architect

I certify that I have developed or reviewed the structural design, plans, and specifications for construction and that the design and methods of construction to be used are in accordance with accepted standard 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; and
- 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 Certification Statement

Note: This section must be certified by a registered engineer or architect

When breakaway walls exceed a design safe loading resistance of 20 pounds per square foot

I certify that I have developed or reviewed the structural design, plans, and specifications for construction and that the design and methods of construction to be used for the breakaway walls 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; and
- 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 (wind and water loading values to be used are defined in Section III).

SECTION V: Certification

Signature below certifies: X Section III; Section IV

Certifiers Name: Stuart Williamson, P.E., C.F.M.

Title: Civil Engineer

Compass Floodplain Consultants, LLC

Address: P.O. Box 3145

City: Bay St Louis

Company Name:

License Number: 13199

State: Mississippi

Zip Code: 39521

Signature: 

FS No. 5 – V-Zone Design and Construction Certification

Date: 01/22/18 Telephone Number: (228) 243-4066

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