

A

U.S. DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
National Flood Insurance Program

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name	GULF PALM VILLAS	Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	1453 E. BEACH BLVD.	Company NAIC Number
City	Pass Christian	State
State	MS	ZIP Code
39571		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) GULF PALM VILLAS REPLAT, (BUILDING "A") Harrison County, Ms. Tax Parcel #0512M-01-005.001 THRU -005.050		

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL

A5. Latitude/Longitude: Lat. 30° 19.815' Long. 089° 11.739' Horizontal Datum: ☐ NAD 1927 ☒ 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 6

A8. For a building with a crawl space or enclosure(s), provide

a) Square footage of crawl space or enclosure(s)	<u>278</u> sq ft	A9. For a building with an attached garage, provide:
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade	<u>16</u>	a) Square footage of attached garage
c) Total net area of flood openings in A8.b	<u>326</u> sq in	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade
		c) Total net area of flood openings in A9.b

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number PASS CHRISTIAN 285261		B2. County Name HARRISON		B3. State MS	
B4. Map/Panel Number 0003	B5. Suffix C	B6. FIRM Index Date 8/19/87	B7. FIRM Panel Effective/Revised Date 8/19/87	B8. Flood Zone(s) A11	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 13

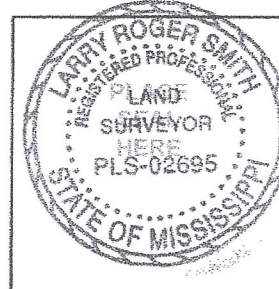
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in item B9.
☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other (Describe) _____

B11. Indicate elevation datum used for BFE in item B9: ☒ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe) _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No
 Designation Date _____ ☐ CBRS ☐ OPA

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-g below according to the building diagram specified in item A7. Benchmark Utilized <u>RM #31</u> Vertical Datum <u>NGVD29</u> Conversion/Comments <u>N/A</u>	
Check the measurement used.	
a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<u>11.25</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>23.25</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>N/A</u> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>N/A</u> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	<u>47.85</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<u>10.8</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<u>11.0</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.	
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.	
Certifier's Name : LARRY SMITH	License Number : MS PLS 02695
Title OWNER	Company Name : LARRY SMITH LAND SURVEYING
Address 105 NORTH KERN DRIVE	City : GULFPORT State MS ZIP Code 39503
Signature <i>Larry R. Smith</i>	Date 10/01/08 Telephone (228) 832-9643



B

U.S. DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
National Flood Insurance Program

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name <u>GULF PALM VILLAS</u>		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>1453 E. BEACH BLVD.</u>		Company NAIC Number
City <u>Pass Christian</u> State <u>MS</u> ZIP Code <u>39571</u>		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>GULF PALM VILLAS REPLAT. (BUILDING "B") Harrison County, Ms. Tax Parcel #0512M-01-005.001 THRU -005.050</u>		

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL

A5. Latitude/Longitude: Lat. 30° 19.835' Long. 089° 11.739' Horizontal Datum: ☐ NAD 1927 ☒ 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 6

A8. For a building with a crawl space or enclosure(s), provide

a) Square footage of crawl space or enclosure(s)	<u>556</u> sq ft	A9. For a building with an attached garage, provide:
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade	<u>32</u>	a) Square footage of attached garage
c) Total net area of flood openings in A8.b	<u>652</u> sq in	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade
		c) Total net area of flood openings in A9.b

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <u>PASS CHRISTIAN 285261</u>		B2. County Name <u>HARRISON</u>		B3. State <u>MS</u>	
B4. Map/Panel Number <u>0003</u>	B5. Suffix <u>C</u>	B6. FIRM Index Date <u>8/19/87</u>	B7. FIRM Panel Effective/Revised Date <u>8/19/87</u>	B8. Flood Zone(s) <u>A11</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>13</u>

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 (Describe) _____

B11. Indicate elevation datum used for BFE in Item B9: ☒ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe) _____

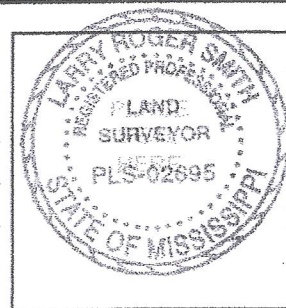
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No
Designation Date _____ ☐ CBRS ☐ OPA

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-g below according to the building diagram specified in Item A7. Benchmark Utilized <u>RM #31</u> Vertical Datum <u>NGVD29</u> Conversion/Comments <u>N/A</u>	

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<u>11.28</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>23.28</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>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	<u>47.8</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<u>10.7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<u>11.0</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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.			
Certifier's Name : <u>LARRY SMITH</u>		License Number : <u>MS PLS 02695</u>	
Title <u>OWNER</u>		Company Name : <u>LARRY SMITH LAND SURVEYING</u>	
Address <u>105 NORTH KERN DRIVE</u>		City <u>GULFPORT</u> State <u>MS</u> ZIP Code <u>39503</u>	
Signature <u>[Signature]</u>		Date <u>10/01/08</u> Telephone <u>(228) 832-9643</u>	



ELEVATION CERTIFICATE

OMB No. 1660-0008
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SECTION A - PROPERTY INFORMATION		For Insurance Company Use:			
A1. Building Owner's Name	GULF PALM VILLAS	Policy Number			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	1453 E. BEACH BLVD.	Company NAIC Number			
City	Pass Christian	State	MS	ZIP Code	39571
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) GULF PALM VILLAS REPLAT, (BUILDING "C") Harrison County, Ms. Tax Parcel #0512M-01-005.001 THRU -005.050					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>30° 19.851'</u> Long. <u>089° 11.740'</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 crawl space or enclosure(s), provide			A9. For a building with an attached garage, provide:		
a) Square footage of crawl space or enclosure(s) <u>417</u> sq ft			a) Square footage of attached garage <u>N/A</u> sq ft		
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <u>24</u>			b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <u>N/A</u>		
c) Total net area of flood openings in A8.b <u>489</u> sq in			c) Total net area of flood openings in A9.b <u>N/A</u> sq in		

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number PASS CHRISTIAN 285261		B2. County Name HARRISON		B3. State MS	
B4. Map/Panel Number 0003	B5. Suffix C	B6. FIRM Index Date 8/19/87	B7. FIRM Panel Effective/Revised Date 8/19/87	B8. Flood Zone(s) A11	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 13

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 (Describe) _____

B11. Indicate elevation datum used for BFE in Item B9: ☒ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe) _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No
Designation Date _____ ☐ CBRS ☐ 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-g below according to the building diagram specified in Item A7.
Benchmark Utilized RM #31 Vertical Datum NGVD29
Conversion/Comments _____

Check the measurement used.

- | | | |
|---|--------------|---|
| a) Top of bottom floor (including basement, crawl space, or enclosure floor) | <u>11.27</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| b) Top of the next higher floor | <u>23.27</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>N/A</u> | <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| d) Attached garage (top of slab) | <u>N/A</u> | <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) | <u>47.8</u> | <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| f) Lowest adjacent (finished) grade (LAG) | <u>10.8</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| g) Highest adjacent (finished) grade (HAG) | <u>11.0</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.

Certifier's Name : LARRY SMITH License Number : MS PLS 02695

Title OWNER Company Name : LARRY SMITH LAND SURVEYING

Address 105 NORTH KERN DRIVE City : GULFPORT State MS ZIP Code 39503

Signature [Signature] Date 10/01/08 Telephone (228) 832-9643



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OMB No. 1660-0008
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A1. Building Owner's Name	GULF PALM VILLAS	Policy Number
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City Pass Christian State MS ZIP Code 39571		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) GULF PALM VILLAS REPLAT. (BUILDING "D") Harrison County, Ms. Tax Parcel #0512M-01-005.001 THRU -005.050		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>		
A5. Latitude/Longitude: Lat. <u>30° 19.863'</u> Long. <u>089° 11.749'</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 crawl space or enclosure(s), provide: a) Square footage of crawl space or enclosure(s) <u>276</u> sq ft b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <u>16</u> c) Total net area of flood openings in A8.b <u>326</u> sq in		A9. For a building with an attached garage, provide: a) Square footage of attached garage <u>N/A</u> sq ft b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <u>N/A</u> c) Total net area of flood openings in A9.b <u>N/A</u> sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number PASS CHRISTIAN 285261		B2. County Name HARRISON		B3. State MS	
B4. Map/Panel Number 0003	B5. Suffix C	B6. FIRM Index Date 8/19/87	B7. FIRM Panel Effective/Revised Date 8/19/87	B8. Flood Zone(s) A11	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 13

- 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 (Describe) _____
- B11. Indicate elevation datum used for BFE in Item B9: ☒ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe) _____
- B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No
Designation Date _____ ☐ CBRS ☐ OPA

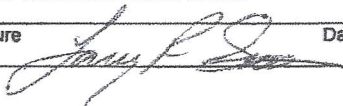
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

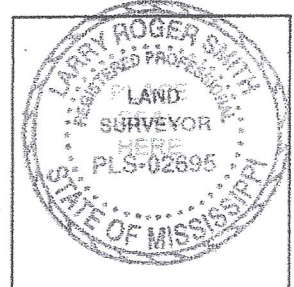
- C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.
- C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete items C2.a-g below according to the building diagram specified in Item A7.
Benchmark Utilized RM #31 Vertical Datum NGVD29
Conversion/Comments _____
- Check the measurement used.
- | | | |
|---|--------------|---|
| a) Top of bottom floor (including basement, crawl space, or enclosure floor). | <u>11.30</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| b) Top of the next higher floor | <u>23.30</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>N/A</u> | <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| d) Attached garage (top of slab) | <u>N/A</u> | <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) | <u>47.6</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| f) Lowest adjacent (finished) grade (LAG) | <u>10.8</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| g) Highest adjacent (finished) grade (HAG) | <u>11.0</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |

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Address 105 NORTH KERN DRIVE	City : GULFPORT State MS ZIP Code 39503
Signature 	Date 10/01/08 Telephone (228) 832-9643



E

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City Pass Christian State MS ZIP Code 39571		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) GULF PALM VILLAS REPLAT, (BUILDING "E"). Harrison County, Ms. Tax Parcel #0512M-01-005.001 THRU -005.050		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL		
A5. Latitude/Longitude: Lat. 30° 19.850' Long. 089° 11.745'		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 6		
A8. For a building with a crawl space or enclosure(s), provide: a) Square footage of crawl space or enclosure(s) 834 sq ft b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade 48 c) Total net area of flood openings in A8.b 978 sq in		A9. For a building with an attached garage, provide: a) Square footage of attached garage N/A sq ft b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade N/A c) Total net area of flood openings in A9.b N/A sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number PASS CHRISTIAN 285261		B2. County Name HARRISON		B3. State MS	
B4. Map/Panel Number 0003	B5. Suffix C	B6. FIRM Index Date 8/19/87	B7. FIRM Panel Effective/Revised Date 8/19/87	B8. Flood Zone(s) A11	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 13

- 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 (Describe) _____
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- B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No
 Designation Date _____ ☐ CBRS ☐ OPA

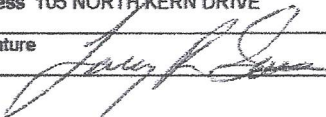
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

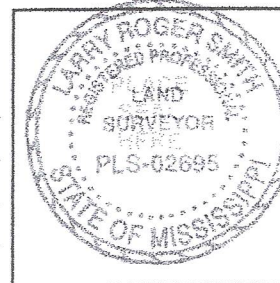
- C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.
- C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-g below according to the building diagram specified in Item A7.
 Benchmark Utilized **RM #31** Vertical Datum **NGVD29**
 Conversion/Comments _____
- Check the measurement used.
- a) Top of bottom floor (including basement, crawl space, or enclosure floor) **11.26** ☒ feet ☐ meters (Puerto Rico only)
 b) Top of the next higher floor **23.26** ☒ feet ☐ meters (Puerto Rico only)
 c) Bottom of the lowest horizontal structural member (V Zones only) **N/A** ☐ feet ☐ meters (Puerto Rico only)
 d) Attached garage (top of slab) **N/A** ☐ feet ☐ meters (Puerto Rico only)
 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) **47.8** ☐ feet ☐ meters (Puerto Rico only)
 f) Lowest adjacent (finished) grade (LAG) **10.8** ☒ feet ☐ meters (Puerto Rico only)
 g) Highest adjacent (finished) grade (HAG) **11.0** ☒ feet ☐ 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.

Certifier's Name : LARRY SMITH		License Number : MS PLS 02695	
Title OWNER		Company Name : LARRY SMITH LAND SURVEYING	
Address 105 NORTH KERN DRIVE		City : GULFPORT State MS ZIP Code 39503	
Signature 	Date 10/01/08	Telephone (228) 832-9643	



F

U.S. DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
National Flood Insurance Program

ELEVATION CERTIFICATE

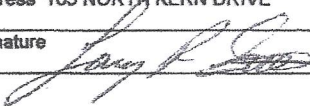
OMB No. 1660-0008
Expires February 28, 2009

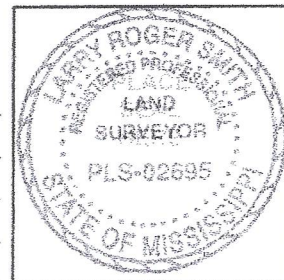
Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name GULF PALM VILLAS		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1453 E. BEACH BLVD.		Company NAIC Number
City Pass Christian State MS ZIP Code 39571		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) GULF PALM VILLAS REPLAT, (BUILDING "F") Harrison County, Ms. Tax Parcel #0512M-01-005.001 THRU -005.050		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL		
A5. Latitude/Longitude: Lat. 30° 19.823' Long. 089° 11.745'		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 6		
A8. For a building with a crawl space or enclosure(s), provide: a) Square footage of crawl space or enclosure(s) 556 sq ft b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade 32 c) Total net area of flood openings in A8.b 652 sq in		A9. For a building with an attached garage, provide: a) Square footage of attached garage N/A sq ft b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade N/A c) Total net area of flood openings in A9.b N/A sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number PASS CHRISTIAN 285261		B2. County Name HARRISON		B3. State MS	
B4. Map/Panel Number 0003	B5. Suffix C	B6. FIRM Index Date 8/19/87	B7. FIRM Panel Effective/Revised Date 8/19/87	B8. Flood Zone(s) A11	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 13
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 checked="" type="checkbox"/> NGVD 1929 <input 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 _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-g below according to the building diagram specified in item A7. Benchmark Utilized RM #31 Vertical Datum NGVD29 Conversion/Comments _____	
Check the measurement used.	
a) Top of bottom floor (including basement, crawl space, or enclosure floor)	11.31 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	23.31 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	N/A <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	47.8 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	10.8 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	11.1 <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.	
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.	
Certifier's Name : LARRY SMITH	License Number : MS PLS 02695
Title OWNER	Company Name : LARRY SMITH LAND SURVEYING
Address 105 NORTH KERN DRIVE	City GULFPORT State MS ZIP Code 39503
Signature 	Date 10/01/08 Telephone (228) 832-9643



G

U.S. DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
National Flood Insurance Program

ELEVATION CERTIFICATE

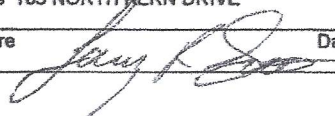
OMB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name	GULF PALM VILLAS	Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	1453 E. BEACH BLVD.	Company NAIC Number
City Pass Christian State MS ZIP Code 39571		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) GULF PALM VILLAS REPLAT, (BUILDING "G") Harrison County, Ms. Tax Parcel #0512M-01-005.001 THRU -005.050		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>		
A5. Latitude/Longitude: Lat. <u>30° 19.807'</u> Long. <u>089° 11.749'</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 crawl space or enclosure(s), provide		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s)	<u>278</u> sq ft	a) Square footage of attached garage
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade	<u>16</u>	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade
c) Total net area of flood openings in A8.b	<u>326</u> sq in	c) Total net area of flood openings in A9.b

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number PASS CHRISTIAN 285261		B2. County Name HARRISON		B3. State MS	
B4. Map/Panel Number 0003	B5. Suffix C	B6. FIRM Index Date 8/19/87	B7. FIRM Panel Effective/Revised Date 8/19/87	B8. Flood Zone(s) A11	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 13
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 checked="" type="checkbox"/> NGVD 1929 <input 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 _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-g below according to the building diagram specified in item A7. Benchmark Utilized <u>RM #31</u> Vertical Datum <u>NGVD29</u> Conversion/Comments _____	
Check the measurement used.	
a) Top of bottom floor (including basement, crawl space, or enclosure floor).	<u>11.20</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>23.20</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>N/A</u> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>N/A</u> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	<u>47.8</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<u>10.8</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<u>11.0</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.	
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.	
Certifier's Name : LARRY SMITH	License Number : MS PLS 02695
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