## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O M B No. 3067-0077 Expires July 31, 2002

## **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1 - 7.

	<del></del>	modeceons on pages 1	· · · · · · · · · · · · · · · · · · ·	¥					
	CTION A - PROPER	TTY OWNER INFORMATION		For Insurance Company Use.					
BUILDING OWNER'S NAME B & H Enterprises	-	Policy Number							
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or BI -55 Trace Drive		Company NAIC Number							
CITY		STATE	ZIP CODE	· L					
Rogeland		MS	3515	57					
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  Lot 20 I-55 / Trace Industrial Park									
BUILDING USE (e.g., Residential, Non-residential, Addition, Accesso Commercial	BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.)								
	AL DATUM:		] GPS (Type):						
(##-##-#### or ##.#####) NAD 1927	☐ NAD 1983		USGS Quad Map	Other					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION									
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER	B2 COUN		B3.	STATE					
Ridgeland, City of 280110	Mad	18071		₩S .					
	(DEX DATE 35 4 1998 E	97. FIRM PANEL FFECTIVE/REVISED DATE April 15, 1994	B8. FLOOD ZONE(S)  AE 'Floodway  AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) ——336.0					
	a or hase flood dooth		1 2	<u> </u>					
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.  FIS Profile  Other (Describe):									
B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929									
B12. Is the building located in a Coastal Barrier Resources Sys		Otherwise Protected Area (OPA	)? Yes No D	esignation Date					
		ION INFORMATION (SURVE							
C1. Building elevations are based on: Construction Drawing	s* 🔲 Buildina	Under Construction*	Finished Construction						
*A new Elevation Certificate will be required when construction of the building is complete.									
C2. Building Diagram Number _ (Select the building diagram m			eing completed - see pages	s 6 and 7. If no diagram					
accurately represents the building, provide a sketch or phot		•	, , , , , , , , , , , , , , , , , ,	· <del>J</del> ··					
C3. 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 C3a-i below according to the building diagr	am specified in Item (	C2. State the datum used. If the	datum is different from the	datum used for the BFE in					
Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of									
Section D or Section G, as appropriate, to document the day Datum 28 Conversion/Comments + 0.1 / v	tum conversion.								
Elevation reference mark used Does the elevation r		innogran the EIDLIG FTV	YZNa						
Lievalum reference mark used Does the elevation r List a) Top of bottom floor (including basement or enclosure		appear on the FIRM? [_] Yes 337. 1 ft.(m)	/	EXN. STA					
Top of next higher floor	11 openico		sed Seal	Price PACE TO					
D c) Bottom of lowest horizontal structural member (V zon	os antal	ft.(m) ft.(m)	يُر مِنْ الْمُ	JER COLL					
d) Attached garage (top of slab)	~ ∪ ay;			27-2-21 N					
☐ d) Attached garage (top of slab) ☐ e) Lowest elevation of machinery and/or equipment									
Car of correspondent or instrument, single of colors and car of the car of th									
► 1) Lowest adjacent grade (LAG)		332 Qt.(m)	Number Signature	2					
/63-g) Highest adjacent grade (HAG)		332. ZfL(m)	ž v 💉	COF MISS					
D h) No. of permanent openings (flood vents) within 1 ft, at			License	- 354					
☐ i) Total area of all permanent openings (flood vents) in C3hsq. in. (sq. cm)									
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 in Sections A, B, and C 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.									
CERTIFIER'S NAME Jack Starr			JCENSE NUMBER 263	ži					
TITLE Survey Manager		COMPANY NAME	Banks Engineering & Sunleying	in					
ADDRESS	·····	CITY	STATE	ZIP CODE					
108 American Wax SIGNATURE		Madison DATE	MS TELEPHONE	20115					
Jah du		02-02-51		5 <u>3-23-1</u>					

IMPORTANT: In these spaces, copy the co	orresponding information from Section A	l			For Insurance Company Use
BUILDING STREET ADDRESS (Including Apt., Un			<del></del>		Policy Humber
I-55 Trace Drive					
CITY	STAT	_	ZIP	CODE	Company NAIC Number
रेक्टानाव -			EDTIEIO ATION (CO	35157 NTDNH (F.D.)	<u> </u>
	TION D - SURVEYOR, ENGINEER, OR A			NTINUEU)	
Copy both sides of this Elevation Certificate for	or (1) community official, (2) insurance agent	company, and	(3) building owner.		
COMMENTS  The Secretary of Zone AE is material without the control of the control	he lop canks of the drainage dileth along the was w	e inc same con	a no not of the null and	المستحدد المستحد المحمد المحمد	former. The lease of the lease
was reviewed and approved by Jill Hartford Flooding			Tib par di tre buildino	S.E. es with the	tocoway Te location of this topoway
		*			
				·	<del></del>
					Check here if attachment
SECTION E - BUILDING	<b>ELEVATION INFORMATION (SURVEY N</b>	OT REQUIRE	D) FOR ZONE AO	AND ZONE A	WITHOUT BFE)
For Zone AO and Zone A (without BFE), comple	ete Items E1 through E4. If the Elevation Ca	ertificate is inte	nded for use as supp	orting informatio	on for a LOMA or LOMR-F,
Section C must be completed.	# #		er		
E1. Building Diagram Number_(Select the building provide a cliebth or		which this cer	ificate is being compl	leted – see pag	es 6 and 7. If no diagram accurated
represents the building, provide a sketch or E2. The top of the bottom floor (including baserr		a) jes (com) [	Tahous or I'm hata	es (chart ann)	ha highaet adianast assists
E3. For Building Diagrams 6-8 with openings (se					
grade.	CO page 1/1 are mextragree need or exchange	ince (Cicyalu	i up or the building to	n.\(\(\text{II}\)\(\text{R}\).	(with above the takings accounting
E4. For Zone AO only: If no flood depth number	r is available, is the too of the bottom floor el	evated in acco	ordance with the com-	munity's floodol	ain management oxdinance?
	al official must certify this information in Secti		744 100 1110 1111	maraty o noccapi	an managanan arana ba:
<del></del>	TION F - PROPERTY OWNER (OR OWN		SENTATIVE) CERTI	FICATION	·
The property owner or owner's authorized repr			<del></del>		nituies and BEEL or Zone AO must
sign here.	coordinate with completes occions A, b, a		T (MID KOLE ) E POTAS	Succession Continue	inty 455000 of Cycli Zurie AO Hilusi
PROPERTY OWNER'S OR OWNER'S AUTHORIZ	ED REPRESENTATIVE'S NAME				
ADDRESS		CITY		STATE	ZIP CODE
SIGNATURE		DATE	***************************************	TELEPH	IONE
COMMENTS		<del></del>	<del></del>		
		······································			Check here if attachment
	SECTION G - COMMUNITY IN	FORMATION	(OPTIONAL)	<del></del>	
The local official who is authorized by law or ordi	<del></del>	<del></del>	· · · · · · · · · · · · · · · · · · ·	molete Cection	A D C/or E) and C of this Claus
Certificate. Complete the applicable item(s) and		an maragen	en ounance can ou	Authers Section	SA, D, C (OFE), AND G OF THIS EJEVA
G1. The information in Section C was taken:	-	ned and embr	nssed by a linensed s	urvevor enning	er or architect who is authorized h
	ermation. (Indicate the source and date of the				CI, Or CHICAL MILLOND ODDING (200 D
G2. A community official completed Section					AO.
63. The following information (Items G4-G9)				,	
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		G6. DATE CERTIFK	CATE OF COMPL	IANCE/OCCUPANCY ISSUED
G7. This permit has been issued for: \( \bar{\cut}\) New Co	•			4	B. C
68. Elevation of as-built lowest floor (including basement) of the building is: 39. BFE or (in Zone AO) depth of flooding at the building site is:				_ft.(m) ft.(=-)	Datum:
· · · · · · · · · · · · · · · · · · ·	concerning site is.			_ ft.(m)	Datum:
LOCAL OFFICIAL'S NAME		TΠ	E		
COMMUNITY NAME		TEL	EPHONE		
SIGNATURE		DAT	E		
COMMENTS					
			<u></u>		
					Check here if attachments
		······································			LI STOSTING CIT BROWNIGHT

## ADDRAL EMERGENCY MANAGEMENT JENCY NATIONAL FLOOD INSURANCE PROGRAM

## **ELEVATION CERTIFICATE**

O.M.B. No. 3067-0077 Expires July 31, 2002

Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: BUILDING OWNER'S NAME Policy Number BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 1000 POLVE STATE ZIP CODE 11/2 PROPERTY DESCRIPTION (Lot and Bigck Numbers, Tax Parcel Number, Legal Description, etc.) 20 7:55/Trace Industria BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) Connoract. LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: |\_ | GPS (Type) ( ##° - ##' - ## ##" Or ## #####°) \_| NAD 1927 | \_\_| NAD 1983 \_\_ USGS Quad Map SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME B3. STATE B4. MAP AND PANEL B7. FIRM PANEL** B8. FLOOD B9. BASE FLOOD ELEVATION(S) 85. SUFFIX B6. FIRM INDEX NUMBER EFFECTIVE/REVISED DATE ZONE(S) DATE (Zone AO, use depth of flooding) 94 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. | | FIS Profile \_\_ | Community Determined Other (Describe): | | FIRM B11. Indicate the elevation datum used for the BFE in 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: SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) I (Building Under Construction\* |X|Finished Construction \*A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) C3. 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 C3a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion. Conversion/Comments \_\_\_ Does the elevation reference mark used appear on the FIRM? | | Yes | Elevation reference mark used a) Top of bottom floor (including basement or enclosure) Q b) Top of next higher floor a c) Bottom of lowest horizontal structural member (V zones only) d) Attached garage (top of slab) a e) Lowest elevation of machinery and/or equipment servicing the building \_\_\_ . \_\_\_\_ ft.(m) f) Lowest adjacent grade (LAG) \_\_\_ . \_\_\_\_ ft.(m) g) Highest adjacent grade (HAG) h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade. ☐ i) Total area of all permanent openings (flood vents) in C3h \_\_ sq. in. (sq. cm) 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 in Sections A, B, and C 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. CERTIFIER'S NAME LICENSE NUMBER TITLE COMPANY NAME **ADDRESS** CITY ZIP CODE STATE SIGNATURE DATE TELEPHONE

EEMA F--- 04 04 AUG 00

IMPORTANT: In these spaces, copy	y the c sponding inform	ation 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
CITY	STATE	ZIP	CODE Company NAIC Number
SECTION D -	SURVEYOR, ENGINEER, C	R ARCHITECT CERTIFICATIO	N (CONTINUED)
Copy both sides of this Elevation Certi	ficate for (1) community offici	al, (2) insurance agent/company	, and (3) building owner.
			Charle bara if attaches
SECTION F - BUILDING FLEVAT	TON INFORMATION (SURVI	EY NOT REQUIRED) FOR ZON	Check here if attachment  E AO AND ZONE A (WITHOUT BFE)
For Zone AO and Zone A (without BFE) information for a LOMA or LOMR-F, See E1. Building Diagram Number (See pages 6 and 7. If no diagram at E2. The top of the bottom floor (including (check one) the highest adjacent grounds)	), complete Items E1 through ection C must be completed. Select the building diagram maccurately represents the builting basement or enclosure) of	E4. If the Elevation Certificate is ost similar to the building for which ding, provide a sketch or photographic provide a sketch or	intended for use as supporting the this certificate is being completed —
E3. For Building Diagrams 6-8 with open to the first adjacent graph.  E4. For Zone AO only: If no flood depth floodplain management ordinance?	enings (see page 7), the next l the highest adjacent grade. h number is available, is the t	op of the bottom floor elevated in	accordance with the community's
		WNER'S REPRESENTATIVE)	
The property owner or owner's authori community-issued BFE) or Zone AO mercone AO mercon	nust sign here.		one A (without a FEMA-issued or
ADDRESS	THORIZED NEI NESENTATIVE		STATE ZIP CODE
SIGNATURE		DATE	ELEPHONE
COMMENTS			
	050710N 0 001M19N3	WINDOWS TON COTTONIAL	Check here if attachment
		Y INFORMATION (OPTIONAL)	
elevation data in the Comment	evation Certificate. Complete as taken from other documen uthorized by state or local law s area below.)	the applicable item(s) and sign tation that has been signed and to certify elevation information.	below.
	s G4-G9) is provided for comi	munity floodplain management p	urposes.
G4. PERMIT NUMBER G5	. DATE PERMIT ISSUED	G6. DATE CERTIFICA	ATE OF COMPLIANCE/OCCUPANCY
7. This permit has been issued for: 8. Elevation of as-built lowest floor (inc 9. BFE or (in Zone AO) depth of floodi	cluding basement) of the build	Substantial Improvement	ft.(m) Datum: ft.(m) Datum:
LOCAL OFFICIAL'S NAME	GIT	TITLE Son (1)	Parincer
COMMUNITY NAME		TELEPHONE (20) - 2	35.3-2027
COMMENTS 1 2		1/03/1	
Despected sect	ing 154	3 , , 9	. 1
2) Charged Sec	ton (0) 400	trainstant con	istruction
.)			Check here if attachments