

ELEVATION CERTIFICATE

Act # 510
 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 States Electric	Policy Number	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	156 Ridgeland Plaza	Company NAIC Number	
City Ridgeland State MS ZIP Code 39157			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 8, Ridgeland Plaza			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Non-Residential</u>			
A5. Latitude/Longitude: Lat. <u>32°25'00"</u> Long. <u>90°08'04"</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>1</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>N/A</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>N/A</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>N/A</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 City of Ridgeland, Mississippi 280110		B2. County Name Madison		B3. State MS	
B4. Map/Panel Number 28089C 0320	B5. Suffix D	B6. FIRM Index Date 04/15/94	B7. FIRM Panel Effective/Revised Date 04/15/94	B8. Flood Zone(s) X/AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 330.4
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: 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 RM263 Vertical Datum NGVD29
 Conversion/Comments N/A

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor), 338.3 feet meters (Puerto Rico only)

b) Top of the next higher floor N/A 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) N/A feet meters (Puerto Rico only)

f) Lowest adjacent (finished) grade (LAG) 332.4 feet meters (Puerto Rico only)

g) Highest adjacent (finished) grade (HAG) 337.0 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	Dewey Knight	License Number	1567
Title	Registered Professional Land Surveyor	Company Name	Dewey Knight and Associates, Inc.
Address	640 Cedar Springs Dr.	City	Jackson
State	MS	ZIP Code	39212
Signature	<i>Dewey Knight</i>	Date	12/01/2008
Telephone	601-373-3989		

