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

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

# **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<br>LESLIE HOMES  |  |   |                                       |                      |               |   |
| A2. Building Street Address (Box No. 1117 11TH S   | ncluding Apt., Unit, Suite   | luding Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and  Company NAIC Number: |                                       |                      |               |   |
| <sup>City</sup> GRETNA   | City GRETNA State LOUISIANA 70053  |   |                                       |                      |               | 0053  |
|  | A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 11, SQUARE 28, NEW MECHANICKHAM |   |                                       |                      |               |   |
| A4. Building Use (e.g., Resid  | ential, Non-Residential, A   | Addition  | , Accessory, etc.)                    | RESIDENTIAL          |               |   |
| A5. Latitude/Longitude: Lat.   | 29°54'31.0"N I   | Long. 9   | 0°03'48.0"W                           | Horizontal Datur     | n: NAD 1      | 927 X NAD 1983  |
| A6. Attach at least 2 photogr  | aphs of the building if the  | Certific  | ate is being used to                  | obtain flood insur   | ance.         |   |
| A7. Building Diagram Numbe   | r <u>1B</u>  |   |                                       |                      |               |   |
| A8. For a building with a crav   | /Ispace or enclosure(s):   |   |                                       |                      |               |   |
| a) Square footage of cra   | wlspace or enclosure(s)  |   | N/A sq ft                             |                      |               |   |
| b) Number of permanent   | flood openings in the cra  | wlspac  | e or enclosure(s) w                   | ithin 1.0 foot above | e adjacent gr | adeN/A  |
| c) Total net area of flood   | openings in A8.b N/  | As  | sq in                                 |                      |               |   |
| d) Engineered flood ope  | nings? 🗌 Yes 🔲 No  | 0   |                                       |                      |               |   |
| A9. For a building with an atta  | iched garage:  |   |                                       |                      |               |   |
| a) Square footage of atta  |  |   | sq ft                                 |                      |               |   |
| b) Number of permanen  |  |   | •                                     | nt above adjacent    | grade         | N/A   |
| c) Total net area of flood   |  | uonou (<br>I/A  | sq in                                 | ot above adjacom     |               | 1 47 7 4  |
|  |  |   | - 34 111                              |                      |               |   |
| d) Engineered flood openings?  |  |   |                                       |                      |               |   |
| SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION  |  |   |                                       |                      |               |   |
| B1. NFIP Community Name & Community Number B2. County Name B3. State   |  |   |                                       |                      | 1             |   |
| CITY OF GRETNA - 225198 JEFFERSON PARISH Louisiana   |  |   |                                       |                      |               |   |
| B4. Map/Panel B5. Suffi Number   | x B6. FIRM Index<br>Date   | E   | IRM Panel<br>ffective/<br>evised Date | B8. Flood Zone(s     | (Zo           | se Flood Elevation(s)<br>ne AO, use Base<br>od Depth) |
| 22051C F   | 02/02/2018   | 02/02   | //2018                                |                      |               |   |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:                      |  |   |                                       |                      |               |   |
| FIS Profile X FIRM Community Determined Other/Source:  |  |   |                                       |                      |               |   |
| B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X 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   |  |   |                                       |                      |               |   |
|  |  |   |                                       |                      |               |   |

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| IMPORTANT: In these spaces, copy the corresponding information from Section A.  |                             |                         |                   | FOR INSURANCE COMPANY USE               |                      |  |        |
|---|-----------------------------|-------------------------|-------------------|---|----------------------|--|--------|
| 1117 11TH STREET  |                             |                         |                   | Policy Number:                          |                      |  |        |
| City State ZIP Code CRETNA LOUISIANA 70053  |                             |                         | 1                 | Company NAIC Number                     |                      |  |        |
| SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)  |                             |                         |                   |   |                      |  |        |
| C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction   |                             |                         |                   |   | n                    |  |        |
| *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: GPS OBSERVATIONS GEOID12B Vertical Datum: NAVD88 |                             |                         |                   |   |                      |  |        |
| Indicate elevation datum used for the elevations in it  ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/S  Datum used for building elevations must be the sam   | Source:                     |                         |                   | 122100000000000000000000000000000000000 |                      |  | _      |
| a) Top of bottom floor (including basement, crawlsp   | sace or enclosure floor\    | 3                       | 7                 |   | the mea<br>feet      | asurement use                                    | d.     |
| b) Top of the next higher floor   | ade, or enclosure moory     |                         |                   |   |                      | ☐ meters   |        |
| c) Bottom of the lowest horizontal structural member  | er (V Zones only)           | N/A                     |                   |   | feet                 | meters   |        |
| d) Attached garage (top of slab)  | w (v zamos amy)             |                         |                   |   | feet                 | meters   |        |
| e) Lowest elevation of machinery or equipment services (Describe type of equipment and location in Com-   | vicing the building iments) | 3                       | 7                 | 🗵                                       |                      | meters   |        |
| f) Lowest adjacent (finished) grade next to building  | (LAG)                       | 1.                      | 6                 | ×                                       | feet                 | meters   |        |
| g) Highest adjacent (finished) grade next to building   | (HAG)                       | 1.                      | 9                 | 🗵                                       | feet                 | meters   |        |
| <ul> <li>h) Lowest adjacent grade at lowest elevation of dec<br/>structural support</li> </ul>  | ck or stairs, including     | 1.                      | 6                 | 🗵                                       | feet                 | meters   |        |
| SECTION D - SURVEYOR,   | ENGINEER, OR ARC            | HITECT CE               | RTIFIC            | CATION                                  |                      |  |        |
| This certification is to be signed and sealed by a land sur<br>I certify that the information on this Certificate represents<br>statement may be punishable by fine or imprisonment un  | my best efforts to inter-   | oret the data           | zed by<br>availab | law to certi<br>ble. I under            | fy eleva<br>stand ti | ation information<br>hat any false               | n.     |
| Were latitude and longitude in Section A provided by a lie  | censed land surveyor?       | ⊠Yes □                  | ] No              | Che                                     | ck here              | if attachments                                   | S.     |
| Certifier's Name  | License Number              |                         |                   |   | min                  | Milling .  |        |
| Tildon J. Dufrene Jr.   | 04563                       |                         |                   | 13                                      | ALE OF               | LOUISIAN JUL                                     |        |
| LAND SURVEYOR   |                             |                         |                   | Thin:                                   | i h                  | SOUR IR  | 111111 |
| Company Name DUFRENE SURVEYING & ENGINEERING INC.   |                             |                         |                   | TIL.                                    | DON J.               | DUFRENE, JR.<br>No.04563<br>ISTERED<br>FESSIONAL | иши    |
| Address<br>1624 MANHATTAN BLVD  |                             |                         |                   |   | NO NO                | ESSIGNAL   | THE .  |
| City<br>HARVEY  | State<br>Louisiana          | ZIP Code<br>70058       |                   | 1/21                                    | /201                 | 0 045  | 33     |
| Signature   | Date<br>01/28/2020          | Telephone<br>504-368-63 | 90                | 1/2                                     |                      |  |        |
| Copy all pages of this Elevation Certificate and all attachme   | ents for (1) community of   | ficial, (2) insu        | rance a           | gent/compa                              | iny, and             | d (3) building ov                                | vner.  |
| Comments (including type of equipment and location, per CENTER OF STREET ELEVATION = 0.4' NAVD C2e: A/C PAD   | C2(e), if applicable)       |                         |                   |   |                      | 8  |        |
|   |                             |                         |                   |   |                      |  |        |

## **ELEVATION CERTIFICATE**

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| 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. 1117 11TH STREET  | Policy Number:   |  |  |  |
| City State ZIP Code LOUISIANA 70053   | Company NAIC Number  |  |  |  |
| SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)   |  |  |  |  |
| For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to suppor complete Sections A, B,and C. For Items E1–E4, use natural grade, if available. Check the measu enter meters.  E1. Provide elevation information for the following and check the appropriate boxes to show whether the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).  a) Top of bottom floor (including basement, crawlspace, or enclosure) is | rement used. In Puerto Rico only, her the elevation is above or below  ers  above or below the HAG. hers  below the LAG. hor 9 (see pages 1–2 of Instructions), hers  below the HAG. |  |  |  |
| SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE)  |  |  |  |  |
| The property owner or owner's authorized representative who completes Sections A, B, and E for community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are c  | Zone A (without a FEMA-issued or orrect to the best of my knowledge.   |  |  |  |
| Property Owner or Owner's Authorized Representative's Name  |  |  |  |  |
| Address City  | State ZIP Code   |  |  |  |
| Signature Date  | Felephone  |  |  |  |
| Comments  |  |  |  |  |
|   |  |  |  |  |
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| IMPORTANT: In these spaces, copy the corre   | FOR INSURANCE COMPANY USE  |  |  |  |
|--|--|--|--|--|
| Building Street Address (including Apt., Unit, St 1117 11TH STREET   | lo. Policy Number:   |  |  |  |
| City<br>GRETNA   | Company NAIC Number  |  |  |  |
| SECTIO   | ON G - COMMUNITY INFORMATION (OPTIO  | NAL)   |  |  |
| The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters. |  |  |  |  |
| G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)  | en from other documentation that has been sig<br>led by law to certify elevation information. (India | ned and sealed by a licensed surveyor, cate the source and date of the elevation |  |  |
| G2. A community official completed Sect or Zone AO.  | ion E for a building located in Zone A (without a  | a FEMA-issued or community-issued BFE)   |  |  |
| G3. The following information (Items G4-   | -G10) is provided for community floodplain mar   | nagement purposes.   |  |  |
| G4. Permit Number  | G5. Date Permit Issued   | G6. Date Certificate of Compliance/Occupancy Issued                              |  |  |
| G7. This permit has been issued for:   | ]New Construction  | ent  |  |  |
| G8. Elevation of as-built lowest floor (including of the building:   | g basement)  | x feet meters Datum  |  |  |
| G9. BFE or (in Zone AO) depth of flooding at   | the building site:   | feet meters Datum  |  |  |
| G10. Community's design flood elevation:   |  | x feet ☐ meters Datum  |  |  |
| Local Official's Name  | Title  |  |  |  |
| Community Name   | Telephone  |  |  |  |
| Signature  | Signature Date   |  |  |  |
| Comments (including type of equipment and lo   | cation, per C2(e), if applicable)  |  |  |  |
|  |  |  |  |  |
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|  |  |  |  |  |
|  |  | Check here if attachments.   |  |  |

#### **BUILDING PHOTOGRAPHS**

## **ELEVATION CERTIFICATE**

See Instructions for Item A6.

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|                                      | Control of the contro |                     |
|--------------------------------------|--|---------------------|
| IMPORTANT: In these spaces, co       | FOR INSURANCE COMPANY USE  |                     |
| Building Street Address (including A | Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.   | Policy Number:      |
| GRETNA                               | State ZIP Code<br>LOUISIANA 70053  | 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 FRONT VIEW

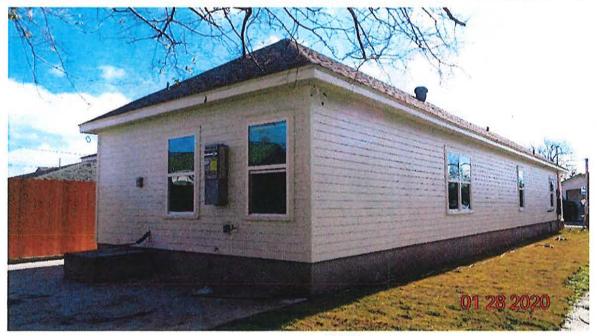


Photo Two

## **BUILDING PHOTOGRAPHS**

## **ELEVATION CERTIFICATE**

Continuation Page

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| IMPORTANT: In these spaces, cop                       | FOR INSURANCE COMPANY USE                                     |                     |
|---|---|---------------------|
| Building Street Address (including A 1117 11TH STREET | pt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. | Policy Number:      |
| <sup>City</sup> GRETNA                                | State ZIP Code<br>LOUISIANA 70053                             | 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 FRONT VIEW

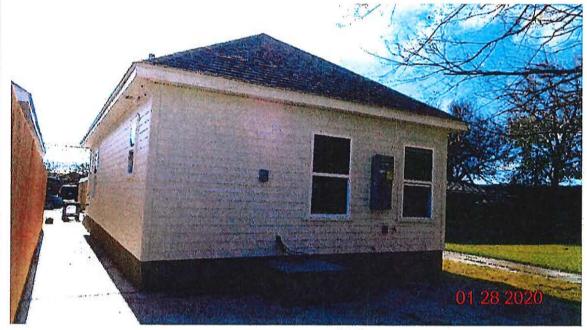


Photo Two