### 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 BRISKERS, LLC.							ber:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1400 STUMPF BOULEVARD						Company NAIC Number:	
City GRETNA State LOUISIANA						IP Code 7	0053
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 10A, SQUARE L, SUBURBAN PARK							
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) NON-RESIDENTIAL							
A5. Latitude/Longitude: Lat. 29°54'48.0"N Long. 090°02'44.0"W Horizontal Datum: NAD 1927 X NAD 1983							
A6. Attach at least	2 photograph	s of the building if the	Certific	ate is being used to	obtain flood insura	nce.	
A7. Building Diagra	m Number _	1A					
A8. For a building v	vith a crawlsp	ace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) N/A sq ft							
b) Number of p	ermanent flo	od openings in the cra	wlspac	e or enclosure(s) wi	thin 1.0 foot above	adjacent gr	ade N/A
c) Total net area of flood openings in A8.b N/A sq in							
d) Engineered flood openings?							
A9. For a building with an attached garage:							
a) Square foot	age of attach	ed garage N/A		sq ft			
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A							
c) Total net area of flood openings in A9.b N/A sq in							
d) Engineered flood openings?							
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1 NEIP Communi				B2. County Name			B3. State
				FERSON PARISH		Louisiana	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E	IRM Panel ffective/ evised Date	B8. Flood Zone(s)	(Zo	se Flood Elevation(s) ne AO, use Base od Depth)
22051C 0220	F	02/02/2018	1	/2018	AE		-1.0
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 X No							
Designation Date: CBRS DPA							

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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. 1400 STUMPF BOULEVARD	Policy Number:					
City State ZIP Code	Company NAIC Number					
GRETNA LOUISIANA 70053						
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY RE	EQUIRED)					
C1. Building elevations are based on:  Construction Drawings* Building Under Construction  *A new Elevation Certificate will be required when construction of the building is complete.	ction* X Finished Construction					
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/A Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Benchmark Utilized: GPS OBSERVATIONS GEOID12B Vertical Datum: NAVD88	AE, AR/A1–A30, AR/AH, AR/AO.  Rico only, enter meters.					
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)0.	X feet meters					
b) Top of the next higher floor N/A.						
c) Bottom of the lowest horizontal structural member (V Zones only)N/A	X feet  meters					
d) Attached garage (top of slab)N/A	X feet meters					
e) Lowest elevation of machinery or equipment servicing the building0.	X feet meters					
f) Lowest adjacent (finished) grade next to building (LAG)1. 9	X feet  meters					
g) Highest adjacent (finished) grade next to building (HAG)	X feet meters					
h) Lowest adjacent grade at lowest elevation of deck or stairs, includingN/Astructural support	X feet meters					
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFIC	CATION					
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by I certify that the information on this Certificate represents my best efforts to interpret the data available statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.	ble. I understand that any false					
Were latitude and longitude in Section A provided by a licensed land surveyor?   ☐ Yes ☐ No	Check here if attachments.					
Certifier's Name License Number  JONATHAN P DUFRENE 5158	STATE OF LOUISIANAILE					
Title	S S S S S S S S S S S S S S S S S S S					
LAND SURVEYOR	=					
Title LAND SURVEYOR  Company Name DUFRENE SURVEYING & ENGINEERING INC.	JONATHAN P. DUFRENE License No. 5158					
Address 1624 MANHATTAN BLVD	PROFESSIONAL OR INTERPRETATION OF THE PROFESSIONAL					
City State ZIP Code HARVEY Louisiana 70058	JONATHAN P. DUFRENE License No. 5158 PROFESSIONAL  12-5-19  5 158					
Signature Date Telephone 12/5/2019 504-368-6390						
Copy all pages of this Elevation Conficate 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)  NOTE: CENTER OF STREET ELEVATION= -3.0' NAVD						
C2e: A/C PAD						

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Rou 1400 STUMPF BOULEVARD	l	olicy Number:				
City GRETNA State ZIP LOUISIANA 7		ompany 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 support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.						
E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).  a) Top of bottom floor (including basement,						
crawlspace, or enclosure) is  b) Top of bottom floor (including basement,	⊠ feet □	meters	above or below the HAG.			
crawlspace, or enclosure) is	⊠ feet □		above or below the LAG.			
E2. For Building Diagrams 6–9 with permanent flood openings provided in Section the next higher floor (elevation C2.b in						
the diagrams) of the building is			□ above or □ below the HAG. □ above or □ below the HAG.			
E3. Attached garage (top of slab) is  E4. Top of platform of machinery and/or equipment	X feet ☐	meters				
servicing the building is	⊠ feet □		above or below the HAG.			
E5. Zone AO only: If no flood depth number is available, is the top of the bottom floodplain management ordinance?   Yes  No Unknown. The	n floor elevated e local official	in accord must cert	dance with the community's ify this information in Section G.			
SECTION F - PROPERTY OWNER (OR OWNER'S REP	RESENTATIV	/E) CERT	IFICATION			
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.						
The property owner or owner's authorized representative who completes Section community-issued BFE) or Zone AO must sign here. The statements in Sections	is A, B, and E a, A, B, and E a	re correct	A (without a FEMA-issued or to the best of my knowledge.			
The property owner or owner's authorized representative who completes Section community-issued BFE) or Zone AO must sign here. The statements in Sections  Property Owner or Owner's Authorized Representative's Name	is A, B, and E a A, B, and E a ————————————————————————————————————	re correct	A (without a FEMA-issued or to the best of my knowledge.			
community-issued BFE) or Zone AO must sign here. The statements in Sections	is A, B, and E	State	t to the best of my knowledge.			
community-issued BFE) or Zone AO must sign here. The statements in Sections  Property Owner or Owner's Authorized Representative's Name	is A, B, and E a	are correct	t to the best of my knowledge.  ZIP Code			
community-issued BFE) or Zone AO must sign here. The statements in Sections  Property Owner or Owner's Authorized Representative's Name  Address City	is A, B, and E a	State	t to the best of my knowledge.  ZIP Code			
Community-issued BFE) or Zone AO must sign here. The statements in Sections  Property Owner or Owner's Authorized Representative's Name  Address City  Signature Date	is A, B, and E a	State	t to the best of my knowledge.  ZIP Code			
Community-issued BFE) or Zone AO must sign here. The statements in Sections  Property Owner or Owner's Authorized Representative's Name  Address City  Signature Date	is A, B, and E	State	t to the best of my knowledge.  ZIP Code			
Community-issued BFE) or Zone AO must sign here. The statements in Sections  Property Owner or Owner's Authorized Representative's Name  Address City  Signature Date	is A, B, and E	State	t to the best of my knowledge.  ZIP Code			
Community-issued BFE) or Zone AO must sign here. The statements in Sections  Property Owner or Owner's Authorized Representative's Name  Address City  Signature Date	is A, B, and E	State	t to the best of my knowledge.  ZIP Code			
Community-issued BFE) or Zone AO must sign here. The statements in Sections  Property Owner or Owner's Authorized Representative's Name  Address City  Signature Date	is A, B, and E	State	t to the best of my knowledge.  ZIP Code			
Community-issued BFE) or Zone AO must sign here. The statements in Sections  Property Owner or Owner's Authorized Representative's Name  Address City  Signature Date	is A, B, and E	State	t to the best of my knowledge.  ZIP Code			
Community-issued BFE) or Zone AO must sign here. The statements in Sections  Property Owner or Owner's Authorized Representative's Name  Address City  Signature Date	is A, B, and E	State	t to the best of my knowledge.  ZIP Code			
Community-issued BFE) or Zone AO must sign here. The statements in Sections  Property Owner or Owner's Authorized Representative's Name  Address City  Signature Date	is A, B, and E	State	t to the best of my knowledge.  ZIP Code			
Community-issued BFE) or Zone AO must sign here. The statements in Sections  Property Owner or Owner's Authorized Representative's Name  Address City  Signature Date	is A, B, and E	State	t to the best of my knowledge.  ZIP Code			
Community-issued BFE) or Zone AO must sign here. The statements in Sections  Property Owner or Owner's Authorized Representative's Name  Address City  Signature Date	is A, B, and E	State	t to the best of my knowledge.  ZIP Code			

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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. Policy Number: 1400 STUMPF BOULEVARD ZIP Code State Company NAIC Number **GRETNA** LOUISIANA 70053 SECTION G - COMMUNITY INFORMATION (OPTIONAL) 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. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.) A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO. G3. The following information (Items G4–G10) is provided for community floodplain management purposes. G4. Permit Number G5. Date Permit Issued G6. Date Certificate of Compliance/Occupancy Issued G7. This permit has been issued for: □ New Construction □ Substantial Improvement
 Elevation of as-built lowest floor (including basement) 🕱 feet 🗌 meters Datum of the building: G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_\_\_\_ Datum G10. Community's design flood elevation: Datum Local Official's Name Title Community Name Telephone Signature Date Comments (including type of equipment and location, per C2(e), if applicable) Check here if attachments.

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See Instructions for Item A6.

Company NAIC Number	State ZIP Code LOUISIANA 70053	City ANT JAD
Policy Number:	nit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Building Street Address (including Apt., U
FOR INSURANCE COMPANY USE	corresponding information from Section A.	IMPORTANT: In these spaces, copy the

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 "Left Side View." When applicable, photographs finantial in this page, use the Continuation Page.

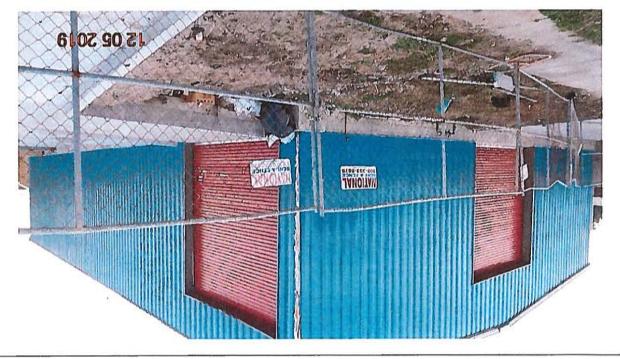


Photo One

Photo One Caption FRONT VIEW



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Continuation Page

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IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No.

State

City

Company NAIC Number:

Company NAIC Number

State

Company NAIC Number

State

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 REAR VIEW



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