U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 8-15

OMB Control Number: 1660-0008 Expiration: 11/30/2018

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 DANIEL SAULS, JR. | | | | | Policy Number: | | | | | |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 114 CIENA DRIVE Company NAIC Number: | | | | | | | | | | |
| City GRETNA State LA | | | | | 4 | | Zip Code 2 | 70053 | | |
| A3. Property Description | | lock Numbers, Tax Parc BERLANE ESTATES | el Nu | ımber, Legal De | escription, | etc.) | | | | |
| A4. Building Use (e.g., | A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL | | | | | | | | | |
| A5. Latitude/Longitude: Lat. 29d53'35.7"N Long. 90d02'21.1"W Horizontal Datum: C NAD 1927 © NAD 1983 | | | | | | | | | | |
| A6. Attach at least 2 ph | otographs of | the building if the Certifi | icate | is being used to | obtain fl | ood ii | nsurance. | | | |
| A7. Building Diagram N | lumber 1B | | 1, | · . · | | | · | | *** ** | |
| A8. For a building with | a crawlspace | or enclosure(s): | | A9 | . For a b | uildin | g with an attact | ned garage: | | |
| | | or enclosure(s) N/A | | | | _ | e of attached g | | | sq ft |
| b) Number of perma crawlspace or en above adjacent g | closure(s) wi | 🗸 | | • | | ached | manent flood o I garage within t grade | | | _ |
| c) Total net area of | lood opening | gs in A8.b N/A | | — sqin c) | Total net | area | of flood opening | gs in A9.b 80 | 0 | sq in |
| d) Engineered flood | | C Yes © No | | • | | | od openings? | | ∩No | . 34 111 |
| | | ECTION B - FLOOD INS | URA | | | | | | | No. Continue and Assessment Assessment Assessment Assessment Assessment Assessment Assessment Assessment Asses |
| B1. NFIP Community N | ame & Comr | | | B2. County N | ame | | | | B3. State | |
| CITY OF GRETNA 22519 B4. Map/Panel Number | | B6 FIPM Index Date | B7 | FIRM Panel Ef | | DQ I | Flood Zono(s) | PO Poss Fla | LA Floration | |
| D4. Map/i and Number | Bo. Guiix | DO. FIRM INGEX Date | 67. | Revised Date | rective/ | DO. 1 | lood Zone(s) | B9. Base Flo (Zone AC depth |), use base | |
| 22051C 0145 | E | 03-23-95 | | 03-23-95 | | | AE | | -1.50 | |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: CFIS Profile © FIRM Community Determined Cother/Source: | | | | | | | | | | |
| | | | | | D 4000 0 | ~ ~" | | | | |
| | | or BFE in Item B9: N | | _ | | | _ | | | |
| B12. Is the building locati Designation Date: | ed in a Coas | tal Barrier Resources Sy CBRS | stem OP/ | | r Otherwi | ise Pr | otected Area (0 | DPA)? (⊖Yi | es (© No | } |
| | SECT | ION C - BUILDING ELE | VAT | ION INFORMA | TION (SU | JRVE | Y REQUIRED) | THE RESERVE COLUMN TO THE PARTY OF THE PARTY | | |
| | | Construction Drawin | | C Building | | onstru | iction* | Finished Con | struction | |
| C2. Elevations: Zones A1 | -A30, AE, A | H, A (with BFE), VE, V1- ouilding diagram specifie | V30, | V (with BFE), A | AR, AR/A, | | | , AR/AH, AR// | AO. Comple | te |
| Benchmark Utilized: GPS | OBSERVATI | ONS | | Vertical | Datum: N | IAVD | 38 (2009.55) GE | OID12B | | |
| ndicate elevation datum | used for the | elevations in items a) thr | | | _ | | | | | |
| | C Other/ | Source: | 2.00 | | | | | | | : |
| Datum used for building e | elevations mu | ust be the same as that u | used | for the BFE. | | | | Check the me | asurement | used. |
| a) Top of bottom floor (in | cluding base | ment, crawlspace, or en | closu | re floor) | | 0,2 | | ⊚ feet | C meter | s |
|) Top of the next higher | floor | | | _ | | | | • feet | C meter | s |
| c) Bottom of the lowest horizontal structural member (V Zones only) | | | <i>'</i>) _ | | | | (feet | C meter | s | |
| d) Attached garage (top of slab) | | | | | | | • feet | C meter | s | |
| Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) | | | | ng — | | 0.6 | | (® feet | C meter | s |
|) Lowest adjacent (finished) grade next to building (LAG) | | | | | - | 1.5 | | • feet | C meter | s |
| j) Highest adjacent (finished) grade next to building (HAG) | | | | | | 1.4 | | • feet | C meter | s |
| Lowest adjacent grade at lowest elevation of deck or stairs, including structural support - | | | | | | | | ⊚ feet | C meter | s |
| | | | | | | | | | | |

ELEVATION CERTIFICATE, page 2

OMB Control Number: 1660-0008 Expiration: 11/30/2018

| IMPORTANT: In these spaces, copy the cor | FOR INSURANCE COMPANY USE | | | | | |
|--|--|-------------------------------------|---|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. | | | | | | |
| 114 CIENA DRIVE | | | Tolley Number. | | | |
| City GRETNA | State LA | Zip Code 70053 | Company NAIC Number: | | | |
| | 17.00 % | ER, OR ARCHITECT CER | - CA 6888 8 | | | |
| This certification is to be signed and sealed by a | | | | | | |
| that the information on this Certificate represent | The state of the s | PERSON AS AND INCIDENCE TO A PERSON | | | | |
| punishable by fine or imprisonment under 18 U. | | | | | | |
| Check here if attachments. | Were latitude and lon provided by a license | | TILDON JEALOAS63 REGISTERED REGISTERED REGISTERED REGISTERED REGISTERED | | | |
| Certifier's Name | | ense Number | THE WANTER | | | |
| Tilden J. Outrene Ji | Lice | 4563 | STACEDENE JR | | | |
| Title | Company Name | 7300 | TILDON SEALO4563 | | | |
| LAND SURVEYOR | DUFRENE SURVEYING | & ENGINEERING, INC. | REGISTERED REGISTERED | | | |
| Address | City | State Zip Code | PROFESSION | | | |
| 1624 MANHATTAN BLVD | HARVEY | LA 70058 | Of the formation | | | |
| Signature | Date | Telephone | 1 .1. | | | |
| delle | 05/24/2016 | 504-368-6390 | 5/24/16 04563 | | | |
| Copy all pages of this Elevation Certificate for (1 |) community official, (2) | insurance agent/company | , and (3) building owner. | | | |
| Comments (including type of equipment and loc | | icable) | | | | |
| C2a-h: ELEVATIONS HAVE BEEN AJUSTED BY 0.3 NOTE: CENTER OF STREET ELEVATION= -4.2' NO | | | | | | |
| | NT MODEL 1540-520 R | ATED AT 200sf EACH | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 2/2-1 | - | | | | | |
| Signature | | | Date 05/24/2016 | | | |
| SECTION E - BUILDING ELEVATION INFO | ORMATION (SURVEY | NOT REQUIRED) FOR ZO | ONE AO AND ZONE A (WITHOUT BFE) | | | |
| For Zones AO and A (without BFE), complete Ite Sections A, B, and C. For Items E1-E4, use natu | | | | | | |
| 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 @ feet _ meters above or below the HA | | | | | | |
| b) Top of bottom floor (including basement, crawlspace, above or below the LAG. | | | | | | |
| or enclosure) is | | | | | | |
| 22. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next igher floor (elevation C2.b in the diagrams) of the building is @ feet meters above or below the HAG. | | | | | | |
| 3. Attached garage (top of slab) is @ feet | | | | | | |
| 4. Top of platform of machinery and /or equipment envicing the building is @ feet C meters above or below the HAG. | | | | | | |
| E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain | | | | | | |
| The same of the sa | and the control of the control | icial must certify this inform | | | | |
| SECTION F - PROPER | TY OWNER (OR OWN | IER'S REPRESENTATIVE | CERTIFICATION | | | |
| The property owner or owner's authorized repres | | | | | | |
| community-issued BFE) or Zone AO must sign h | | | | | | |
| Property Owner or Owner's Authorized Represe | ntative's Name | | | | | |
| Address | City | State | ZIP Code | | | |
| Signature | Date | Telephone | | | | |
| Comments | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | D 05-1-1-1-2-1 | | | |
| | | | Check here if attachments. | | | |

ELEVATION CERTIFICATE, page 3

OMB Control Number: 1660-000

| IMPORTANT: In these spaces, copy the | corresponding informati | on from Soution A | | Expiration: 11/30/20 |
|---|---|---|----------------------------|---|
| Building Street Address (including Apt., U | | | | FOR INSURANCE COMPANY USE |
| 114 CIENA DRIVE | | | DON 110. | Policy Number: |
| City GRETNA | State LA | Zip Code | | Company NAIC |
| | SECTION G - COMMUNITY | 70053 | | Number: |
| The local official who is authorized by law of Sections A, B, C (or E), and G of this Eleval Items G8-G10. In Puerto Rico only, enter n | or ordinance to administer the strong or ordinance to administer the strong or ordinate. Complete the transfer of the strong of the strong or ordinate the strong or ordinate the strong or | e community's flood e applicable item(s ation that has been | dplain mana) and sign l | agement ordinance can complete below. Check the measurement used in |
| Comments area below.) G2 | | | | |
| or Zone AO. | 34 C40) in available for a | | | |
| G3. The following information (Items C) G4. Permit Number | G5. Date Permit Issu | | | t purposes. te of Compliance/Occupancy Issued |
| O I, V O/IMC/Vallipor | Co. Date i comit 1990 | 00. Da | ite Gertilica | te of Compliance/Occupancy Issued |
| G7. This permit has been issued for: No | ew Construction C Substa | intial Improvement | | |
| G8. Elevation of as-built lowest floor (included of the building: | ding basement) | (feet | Cmeters | Datum |
| G9. BFE or (in Zone AO) depth of flooding building site: | at the | ① feet | Cmeters | Datum |
| G10, Community's design flood elevation: | | | Cmeters | Datum |
| Local Official's Name | | Title | | |
| Community Name | | Telephone | | |
| Signature | | Date | | V |
| | | | | |
| | | | | ☐ Check here if attachments, |

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE, page 4

See instructions for Item A6.

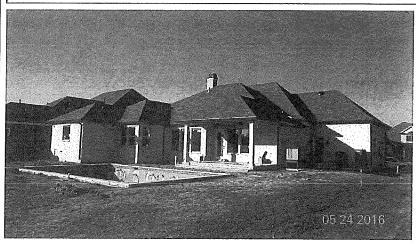
OMB Control Number: 1660-0008 Expiration: 11/30/2018 DR INSURANCE COMPANY USE

| IMPORTANT: In these spaces, copy the corre | FOR INSURANCE COMPANY USE | | | |
|--|---------------------------|---------------------------|-------------------------|--|
| Building Street Address (including Apt., Unit, Suit 114 CIENA DRIVE | e, and/or Bldg. No.) o | or P.O. Route and Box No. | Policy Number: | |
| City GRETNA | State LA | Zip Code 7005 3 | Company NAIC Number: | |

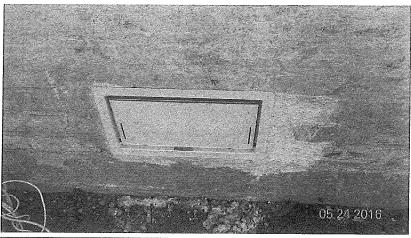
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front view" and Rear view"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs 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.



FRONT VIEW



REAR VIEW



VENT



INSULATED SERIES

This series of vents is ideal for areas requiring flood venting protection but no natural air ventilation.

The flood door contains a 2" Styrofoam core that has an R-value of 8.34 and the vent frame is lined with felt weather stripping, helping to keep the enclosure as insulated from the elements as possible.

IDEAL FOR:

- Garages
- · Full height enclosures (e.g. walkouts)
- Conditioned crawlspaces
- Storage facilities
- Metal buildings
- Foyers

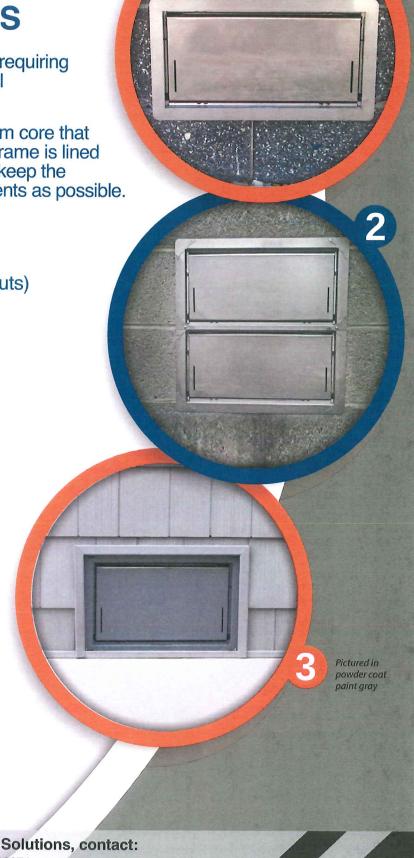
Flood Vent

Stacker 1540-521

Stacker Models are twice as efficient as a single unit and are a great solution for large amounts of square footage, and in situations where there is not enough wall space to fit in single units.

Wood Wall 1540-570

Wood Wall Models are designed to fit between studs spaced at 16" on center. Pre-drilled slots in the four corners on the vent flange make for an easy installation.



For more information on Flood Protection Solutions, contact:

Smart Vent 430 Andbro Drive, Unit 1 • Pitman, NJ 08071
Website: www.smartvent.com Tel: (877) 441-8368 Email: info@smartvent.com



| MODEL NUMBER | FLOOD COVERAGE | VENT SIZE | ROUGH OPENING |
|--------------|----------------|---|---|
| 1540-520 | 200 sq. ft. | 16"w x 8"h x 3"D | 16 \frac{1}{4} in x 8 \frac{1}{4} in |
| 1540-521 | 400 sq. ft. | 16"w x 16"H x 3"D | 16 \frac{1}{4} \text{ in x 16 } \frac{3}{8} in |
| 1540-570 | 200 sq. ft. | $14\frac{1}{2}$ "W x 8 $\frac{1}{2}$ "H x 3"D | 14 ½ in x 8 ¾ in |



For more information on Flood Protection Solutions, contact:

Smart Vent 430 Andbro Drive, Unit 1 • Pitman, NJ 08071 Website: www.smartvent.com Tel: (877) 441-8368 Ema

Email: info@smartvent.com

