U.S. DEPARTMENT OF HOMELAND SECURITY FEL: FRAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program Important: Read the instructions on pages 1–9.			OMB No. 1660-0008 Expiration Date: July 31, 2015	
National Flood Insurance Program Imp				
	FOR INSURANCE COMPANY USE			
A1. Building Owner's Name AUTOZONE	Policy Number:			
A2. Building Street Address (including Apt., Unit, S 91 WESTBANK EXPRESSWAY <u>よんしょ</u> 100	Suite, and/or Bldg. No.) or P.O. Rou	ute and Box No.	Company NAIC Number:	
City GRETNA	State LA	ZIP Code 70053		
A3. Property Description (Lot and Block Numbers, BROOKLYN PASTURES-CITY OF GRETNA	Tax Parcel Number, Legal Descrip	otion, etc.)		
 A4. Building Use (e.g., Residential, Non-Residential) A5. Latitude/Longitude: Lat. 029°54′55.7″N Long. A6. Attach at least 2 photographs of the building if A7. Building Diagram Number 1A A8. For a building with a crawlspace or enclosure(a) Square footage of crawlspace or enclosure(b) Number of permanent flood openings in the or enclosure(s) within 1.0 foot above adjact. c) Total net area of flood openings?	. <u>090°02'56.4W</u> the Certificate is being used to obt s): e(s) <u>N/A</u> sq ft e crawlspace ent grade <u>N/A</u> N/A sq in ⊠ No	Horizontal Da ain flood insurance. A9. For a building with an	attached garage N/A sq ft ent flood openings in the attached garage we adjacent grade N/A bood openings in A9.b N/A sq in openings? Yes No	
SECTION E	B – FLOOD INSURANCE RATI	E MAP (FIRM) INFORMA	FION	
B1. NFIP Community Name & Community Number CITY OF GRETNA 225198		RSON PARISH	B3. State LA	
	FIRM Index Date B7. FIRM Effective/Re	vised Date Zone(s)	AO, use base flood dèpth)	
B11. Indicate elevation datum used for BFE in Item B12. Is the building located in a Coastal Barrier Res Designation Date: SECTION C -	mmunity Determined	ntered in Item B9. ther/Source: AVD 1988	Yes ⊠ No UIRED) ☑ Finished Construction AR/AH, AR/AO. Complete Items C2.a–h	
h) Lowest adjacent grade at lowest elevation of			☐ feet ☐ meters	
	SURVEYOR, ENGINEER, OR			
This certification is to be signed and sealed by a lar information. I certify that the information on this Cer I understand that any false statement may be punis ☐ Check here if comments are provided on back ☐ Check here if attachments.	tificate represents my best efforts to shable by fine or imprisonment under of form. Were latitude and lor licensed land surveyone.	o interpret the data available. er 18 U.S. Code, Section 100 ngitude in Section A provided or? ⊠ Yes □ No	1.	
Title LAND SURVEYOR Comp	Licer Dany Name DUFRENE SURVEYI	nse Number 04563 NG AND ENGINEERING INC	7/10/1	
		LA ZIP Code 70058	- OLNINU	
		phone 504 368 6300	- dialia area	

ELEVATION CERTIFICATE, pag			4.,			
IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., 91 WESTBANK EXPRESSWAY	Policy Number:					
City GRETNA	State LA	ZIP Code 70053	Company NAIC Number:			
SECTION I	O – SURVEYOR, ENGINEER, OR ARCHIT	ECT CERTIFICATIO	N (CONTINUED)			
Copy both sides of this Elevation Certific	cate for (1) community official, (2) insurance age	nt/company, and (3) buil	ding owner.			
Comments C2a-h: ELEVATIONS HAVE BEEN ADJUSTED BY 0.3' TO NGVD NOTE: CENTER OF STREET ELEVATION= -0.4 NGVD C2e.: ELECTRIC RECEPTACLE A/C UNIT ON ROOF ELEVATION= 20.1 NGVD						
Signature	Date	8/19/13				
SECTION E - BUILDING ELEV	ATION INFORMATION (SURVEY NOT R	EQUIRED) FOR ZON	E AO AND ZONE A (WITHOUT BFE)			
and C. For Items E1–E4, use natural gr E1. Provide elevation information for the grade (HAG) and the lowest adjact a) Top of bottom floor (including be) (elevation C2.b in the diagrams) of the celevation C2.b in the diagrams of the celevation C2.b in the diagram of the celevation C2.b in the	pasement, crawlspace, or enclosure) is pasement, crawlspace, or enclosure) is ermanent flood openings provided in Section A I of the building is \overline{\text{Mode feet}} feet \overline{\text{mode meters}} makes for equipment servicing the building is number is available, is the top of the bottom floor Unknown. The local official must certify this info	In Puerto Rico only, ento show whether the elevariation in Section only, ento show whether the elevariation in Section G.	et meters. Intion is above or below the highest adjacent sters above or below the HAG. Interest above or below the LAG. Interest Below the LAG. Interest Below the LAG. Interest Below the HAG. Interest Below the HAG. Interest Below the HAG. Interest Below the HAG. Interest Below the HAG.			
SECTION	F - PROPERTY OWNER (OR OWNER'S	REPRESENTATIVE)	CERTIFICATION			
The property owner or owner's authoriz or Zone AO must sign here. The statem	ed representative who completes Sections A, B, nents in Sections A, B, and E are correct to the b	and E for Zone A (witho est of my knowledge.	ut a FEMA-issued or community-issued BFE)			
Property Owner's or Owner's Authorize	The second secon					
Address	City		State ZIP Code			
Signature	Date		Telephone			
Comments			☐ Check here if attachment			
	SECTION G - COMMUNITY INFOR	MATION (OPTIONAL	.)			
of this Elevation Certificate. Complete the	or ordinance to administer the community's flood applicable item(s) and sign below. Check the mea	asurement used in items	G8-G10. In Puello Rico only, enter meters.			
is authorized by law to certify each G2. A community official completed	vas taken from other documentation that has bee elevation information. (Indicate the source and d d Section E for a building located in Zone A (with ns G4–G10) is provided for community floodplain	ate of the elevation data out a FEMA-issued or co	ommunity-issued BFE) or Zone AO.			
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate	Of Compliance/Occupancy Issued			
G7. This permit has been issued for:	│ New Construction │ Substantial Im	provement				
G8. Elevation of as-built lowest floor (in		feet _ mete				
G9. BFE or (in Zone AO) depth of flood						
G10. Community's design flood elevation	n:	_	rs Datum			
Local Official's Name	Tit	le				
Community Name	Te	lephone				
Signature	Da	ate				
Comments			☐ Check here if attachment			

ELGVATION CERTIFICATE, page 3

Building Photographs

See Instructions for Item A6.

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. 91 WESTBANK EXPRESSWAY			Policy Number:
City GRETNA	State LA	ZIP Code 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.



FRONT VIEW



REAR VIEW

