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 INSU | RANCE COMPANY USE | |
|--|---|---------------------------|----------|---------------------------------------|-----------------------|---|---|
| A1. Building Owner's Name | | | | | Policy Num | ber: | |
| AREVALO MILTON | | | | | | | |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 509 27TH STREET Compan | | | | | Company N | IAIC Number: | |
| City | | State ZIP Code | | | | 191111111111111111111111111111111111111 | |
| jefferson | | LA 70003 | | | | | |
| 1 ' ' | A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Subdivision NELSON TERRACE District JEFFERSON Lot 3 Square 1 | | | | | | |
| A4. Building Use (| e.g., Resident | ial, Non-Residential, A | Addition | , Accessory, etc.) | Residential | | |
| A5. Latitude/Longit | ude: Lat. 30 | 0.003267 | Long | 90.263762 | Horizontal Datur | n: 🔲 NAD | 1927 🕱 NAD 1983 |
| A6. Attach at least | 2 photograph | ns of the building if the | Certific | ate is being used to | o obtain flood insur | ance. | 1 |
| A7. Bullding Diagra | ım Number | 8 | | | | | |
| A8. For a building | with a crawlsp | pace or enclosure(s): | | : | | | |
| a) Square foot | age of crawls | space or enclosure(s) | 173 | sq ft | | | |
| b) Number of | oermanent flo | od openings in the cra | wlspac | e or enclosure(s) w | vithin 1.0 foot above | e adjacent gr | ade <u>13</u> |
| c) Total net an | ea of flood op | enings in A8.b 295 | 5 | sq in . | | | |
| d) Engineered | flood opening | gs? Yes 🗓 N | 0 | | | | |
| A9. For a building with an attached garage: | | | | | | | |
| a) Square footage of attached 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 | | | | | | | |
| | | | | | B3. State | | |
| CITY OF GRETNA, 225198 | | | | <u> </u> | | LA | |
| 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) |
| 22051C0220 | F | 2/2/2018 | | 2/2/2018 | AE | | -3.00 |
| 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 | FOR INSURANCE COMPANY USE | | | | | |
|---|--|---|---|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/ | Policy Number: | | | | | |
| 509 27TH STREET | | | 1 | | | |
| City | Company NAIC Number | | | | | |
| JEFFERSON L | A 7000 | 3 | | | | |
| SECTION C - BUILDING E | LEVATION INFORMATI | ON (SURVEY R | EQUIRED) | | | |
| | The state of the s | ing Under Constru | uction* X Finished Construction | | | |
| *A new Elevation Certificate will be required when | | THE STATE OF THE PARTY OF THE PARTY. | ASSAULT ME RETREMENDED IN THE PROTECTION OF THE | | | |
| Complete Items C2.a-h below according to the bu | 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: s-188 | Vertical Datum: _ | NAVD '88 | | | | |
| Indicate elevation datum used for the elevations in ☐ NGVD 1929 🕱 NAVD 1988 ☐ Other | and the first and another the first of the control process which is the process of the second state of the | <i>i</i> . | | | | |
| Datum used for building elevations must be the sa | | =E. | | | | |
| | | NAME OF THE PARTY | Check the measurement used. | | | |
| a) Top of bottom floor (including basement, crawled) | space, or enclosure floor) | <u>-4</u> . <u>00</u> | X feet meters | | | |
| b) Top of the next higher floor | | <u>-1</u> . <u>15</u> | x feet meters | | | |
| c) Bottom of the lowest horizontal structural memi | ber (V Zones only) | | X feet meters | | | |
| d) Attached garage (top of slab) | entre de la militario de la companya | | X feet meters | | | |
| e) Lowest elevation of machinery or equipment se (Describe type of equipment and location in Co | ervicing the building | <u>-1</u> . <u>15</u> | X feet meters | | | |
| f) Lowest adjacent (finished) grade next to buildir | | -4.10 | x feet meters | | | |
| g) Highest adjacent (finished) grade next to buildi | · · · · · · · · · · · · · · · · · · · | -4 00 | X feet ☐ meters | | | |
| h) Lowest adjacent grade at lowest elevation of de | | -4. 08 | X feet meters | | | |
| structural support | | | | | | |
| SECTION D – SURVEYOR | R, ENGINEER, OR ARC | HITECT CERTIF | ICATION | | | |
| 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. | | | | | | |
| Were latitude and longitude in Section A provided by a licensed land surveyor? Yes X No Check here if attachments. | | | | | | |
| Certifier's Name | License Number | | ESHE OF LOUISING | | | |
| Louis C. Hartmann | 4995 | | THE ROLL OF THE | | | |
| Title | | | 15 | | | |
| Professional Land Surveyor | | | | | | |
| Company Name | | | LOUIS C. HARTMANN LIC. NO. 4995 | | | |
| Gilbert, Kelly & Couturié, Inc. | | | UCENSED | | | |
| Address | | | PROFESSIONAL | | | |
| 2121 N. Causeway Blvd., Suite 121 | Ctata | ZID Code | - TANK | | | |
| City | State | ZIP Code | SURVE | | | |
| Metairte | LA Date | 70001 Telephone | - | | | |
| Signature | 2/18/2020 | (504) 836-212 | 1 | | | |
| Copy all pages of this Elevation Certificate 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) | | | | | | |
| SECTION C2E IS A/C COMPRESSOR, THE CENTERLINE OF THE STREET IS -4.17 NAVD | | | | | | |
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| MPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY | | | | | |
|---|--|--|--|--|--|
| Building Street Address (including Apt., Unit, Sulte, and | l/or Bldg. No.) or P.O. | Route and Box No. | Policy Number: | | |
| 509 27TH STREET | | | 1 | | |
| City | State | ZIP Code | Company NAIC Number | | |
| | | 70003 | DEOLUDED) | | |
| SECTION E – BUILDING EL FOR ZONE | | | KEWUIKEU) | | |
| 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 | | feet | rs 🔲 above or 🔲 below the HAG. | | |
| b) Top of bottom floor (including basement, crawlspace, or enclosure) is | • | | rs 🔲 above or 🔲 below the LAG. | | |
| E2. For Building Diagrams 6–9 with permanent flood o | penings provided in S | Section A Items 8 and/or | 9 (see pages 1–2 of Instructions), | | |
| the next higher floor (elevation C2.b in the diagrams) of the building is | - | feet mete | rs ☐ above or ☐ below the HAG. | | |
| E3. Attached garage (top of slab) is | | feet _ mete | rs 🔲 above or 🗌 below the HAG. | | |
| E4. Top of platform of machinery and/or equipment servicing the building is | | [] feet [] mete | rs 🔲 above or 🔲 below the HAG. | | |
| E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes | e, is the top of the bol No Dunknown. | itom floor elevated in ac The local official must | cordance with the community's certify this Information in Section G. | | |
| SECTION F - PROPERTY OW | NER (OR OWNER'S I | REPRESENTATIVE) C | ERTIFICATION | | |
| The property owner or owner's authorized representative | ve who completes Sec | ctions A. B. and E for Zo | one A (without a FEMA-issued or | | |
| community-issued BFE) or Zone AO must sign here. Th | ne statements in Sect | ions A, B, and E are co | rect to the best of my knowledge. | | |
| Property Owner or Owner's Authorized Representative's Name | | | | | |
| Address | City | SI | ate ZIP Code | | |
| Signature | Date | Тє | elephone | | |
| Comments | | | | | |
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| | | | Check here if attachments. | | |

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| IMPORTANT: In these spaces, copy the corre | FOR INSURANCE COMPANY USE | | | | |
|---|----------------------------|---|--|--|--|
| Building Street Address (including Apt., Unit, St | Policy Number: | | | | |
| 509 27TH STREET | | | · · | | |
| City | State | ZIP Code | Company NAIC Number | | |
| JEFFERSON | LA | 70003 | | | |
| | | FORMATION (OPTIONAL) | | | |
| The least of sixty who is sufficient of by layers | | | | | |
| The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8-G10. In Puerto Rico only, en | Certificate. Complete the | e community's floodplain ma e applicable item(s) and sig | n below. Check the measurement | | |
| G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.) | | | | | |
| G2. A community official completed Section or Zone AO. | on E for a building locate | ed in Zone A (without a FEM | 1A-issued or community-issued BFE) | | |
| G3. The following information (Items G4 | G10) is provided for com | nmunity floodplain managen | nent purposes. | | |
| G4. Permit Number | G5. Date Permit Issue | d G6. | Date Certificate of Compliance/Occupancy Issued | | |
| G7. This permit has been Issued for: | New Construction [| Substantial Improvement | | | |
| G8. Elevation of as-built lowest floor (including of the building: | y basement) | fee | t 🗌 meters Datum | | |
| G9. BFE or (in Zone AO) depth of flooding at t | the building site: | fee | t meters Datum | | |
| G10. Community's design flood elevation: | haranan manada a | fee | t meters Datum | | |
| Local Official's Name | | Title | | | |
| Community Name | | Telephone | | | |
| Signature | | Date | | | |
| Comments (for helling to go of an demonstrated by after a configuration of the configuration | | | | | |
| Comments (including type of equipment and location, 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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| IMPORTANT: In these spaces, o | FOR INSURANCE COMPANY USE | | |
|--|---------------------------------------|-----------------------------|---------------------|
| Building Street Address (including 509 27TH STREET | g Apt., Unit, Suite, and/or Bldg. No. |) or P.O. Route and Box No. | Policy Number: |
| City | State | ZIP Code | Company NAIC Number |
| JEFFERSON | LA | 70003 | |

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 Caption

Front View 2/18/2020



Photo Two

Photo Two Caption

Rear View 2/18/2020

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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

| IMPORTANT: In these spaces, o | FOR INSURANCE COMPANY USE | | |
|------------------------------------|---------------------------------------|-----------------------------|---------------------|
| Building Street Address (including | g Apt., Unit, Suite, and/or Bldg. No. |) or P.O. Route and Box No. | Policy Number: |
| City | State | ZIP Code | Company NAIC Number |
| JEFFERSON | LA | 70003 | |

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.

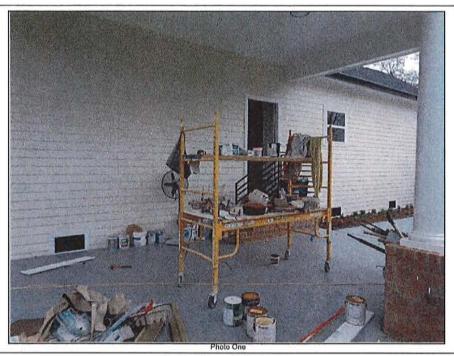


Photo One Caption

Left View 2/18/2020



Photo Two Caption

Right View 2/18/2020