ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1–9.

SECTION A – PROPERTY INFORMATION	FOR INSURANCE COMPANY USE
A1. Building Owner's Name	Policy Number:
BRIAN GAI FAS	

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

A1. Building Owner BRIAN GAI					F	olicy Num	ber:
	Address (incl	uding Apt., Unit, Suite,	and/o	r Bldg. No.) or P.O.	Route and	Company N	IAIC Number:
Box No. 1027	' LAURAD	ALE DR				. ,	
^{City} NEW O	RLEANS			State LA	Z	IP Code 7	0114
		d Block Numbers, Tax RICT, ORLEANS PARI		Number, Legal De	escription, etc.)		
A4. Building Use (e	e.g., Resident	ial, Non-Residential, A	ddition,	Accessory, etc.)	Residential		
A5. Latitude/Longite	ude: Lat. 29	.9434 L	ong	90.0330	Horizontal Datum:		1927 🕱 NAD 1983
A6. Attach at least	2 photograph	s of the building if the (Certific	ate is being used to	o obtain flood insurar	ice.	
A7. Building Diagra	m Number	5					
A8. For a building v	vith a crawlsp	ace or enclosure(s):					
a) Square foot	age of crawls	pace or enclosure(s)		N/A sq ft			
b) Number of p	permanent flo	od openings in the crav	vlspac	e or enclosure(s) w	vithin 1.0 foot above a	djacent gr	ade N/A
c) Total net are	ea of flood op	enings in A8.bN/A	s	q in			
d) Engineered	flood opening	gs? 🗌 Yes 🗵 No					
A9. For a building w	vith an attach	ed garage:					
a) Square foot	age of attach	ed garage N/A	:	sq ft			
b) Number of p	permanent flo	od openings in the atta	ched g	arage within 1.0 fo	ot above adjacent gr	ade	N/A
c) Total net are	ea of flood op	enings in A9.b N/	Ά	sq in			
d) Engineered	flood opening	gs? 🗌 Yes 🕱 No)				
, 3	1 .	,					
	SE	CTION B – FLOOD IN	SURA	NCE RATE MAP	(FIRM) INFORMAT	ION	
B1. NFIP Communit	ty Name & Co	ommunity Number		B2. County Name)		B3. State
CITY OF NEW ORI	LEANS - 225	203		ORLEANS PARI	SH		Louisiana
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Ef	IRM Panel ffective/ evised Date	B8. Flood Zone(s)	(Zo	se Flood Elevation(s) ne AO, use Base od Depth)
22071C0233	F	09-30-2016	09-30	0-2016	x	N/A	
		Base Flood Elevation (E	,	ata or base flood do	epth entered in Item I	39:	
B11. Indicate eleva	tion datum us	sed for BFE in Item B9:	□ N	GVD 1929 🗙 NA	AVD 1988 🗌 Othe	er/Source:	
B12. Is the building	located in a	Coastal Barrier Resou	ces Sy	/stem (CBRS) area	or Otherwise Protec	ted Area (0	OPA)? 🗌 Yes 🕱 No
Designation D	late:	C	BRS				

ELEVATION CERTIFICATE			OMB No. 1660-0008 Expiration Date: November 30, 2022
IMPORTANT: In these spaces, copy the corresponding	information from S	ection A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or 1027 LAURADALE DR	Bldg. No.) or P.O. R	oute and Box No.	Policy Number:
City Sta	te Zl	IP Code	Company NAIC Number
NEW ORLEANS	LA	70114	
SECTION C – BUILDING EL	EVATION INFORM	ATION (SURVEY R	EQUIRED)
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when ca		uilding Under Constru Iding is complete.	uction* 🗙 Finished Construction
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), Complete Items C2.a–h below according to the build	ding diagram specifie	d in Item A7. In Puer	
Benchmark Utilized: <u>ALCO</u>	Vertical Datu		
Indicate elevation datum used for the elevations in it	, ,	elow.	
Datum used for building elevations must be the sam		e BFE.	Check the measurement used.
a) Top of bottom floor (including basement, crawlsp	ace, or enclosure flo	or) <u>5</u> .1	-
b) Top of the next higher floor		N/A.	
c) Bottom of the lowest horizontal structural member	er (V Zones only)	<u>N/A</u> .	
d) Attached garage (top of slab)	()/	N/A .	
e) Lowest elevation of machinery or equipment service (Describe type of equipment and location in Com	vicing the building ments)	<u> </u>	
f) Lowest adjacent (finished) grade next to building	(LAG)	2.0	X feet meters
g) Highest adjacent (finished) grade next to building	g (HAG)	2.3	X feet meters
 h) Lowest adjacent grade at lowest elevation of dec structural support 	ck or stairs, including	<u> 2</u> . <u>0</u>	X feet meters
SECTION D – SURVEYOR,	ENGINEER, OR A	RCHITECT CERTIF	ICATION
This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment ur	s my best efforts to in	terpret the data availa	y law to certify elevation information. able. I understand that any false
Were latitude and longitude in Section A provided by a lie			Check here if attachments.
Certifier's Name C. RANDALL DIXON, SR.	License Number LA 4474		
Title			- OF LOUIS
SURVEYOR			
Company Name KLS GROUP, INC.			Place C. RANEPALL DIXON Place REGISTERED PROFESSIONAL
Address 5118 STOREY STREET			PROFESSIONAL
City ELMWOOD	State Louisiana	ZIP Code 70123	11/1/0 SURVEY
Signature	Date 07-28-2022	Telephone 504-302-0991	
Copy all pages of this Elevation Certificate and all attachme	ents for (1) community	official, (2) insurance	agent/company, and (3) building owner.
Comments (including type of equipment and location, per	r C2(e), if applicable)		
LATITUDE/LONGITUDE OBTAINED BY GPS C2e.) ELE EXISTING CENTERLINE OF STREET 0.48' / EXISTING		5'	

ELI	EVATION CERTIFICATE				MB No. 1660-0008 piration Date: November 30, 2022
IMP	ORTANT: In these spaces, copy the correspor	nding information	from Section A.	F	OR INSURANCE COMPANY USE
	ding Street Address (including Apt., Unit, Suite, a	nd/or Bldg. No.) o	P.O. Route and Box I	No. P	olicy Number:
City	NEW ORLEANS	State LA	ZIP Code 70114	С	ompany NAIC Number
	SECTION E – BUILDING E FOR ZO		ORMATION (SURVE)		EQUIRED)
con	Zones AO and A (without BFE), complete Items nplete Sections A, B,and C. For Items E1–E4, use er meters.	E1–E5. If the Certi e natural grade, if a	ficate is intended to su available. Check the m	upport a L0 neasureme	DMA or LOMR-F request, nt used. In Puerto Rico only,
E1.	Provide elevation information for the following an the highest adjacent grade (HAG) and the lowes a) Top of bottom floor (including basement,			whether th	
	crawlspace, or enclosure) is b) Top of bottom floor (including basement,			_ meters	above or below the HAG.
E2.	crawlspace, or enclosure) is For Building Diagrams 6–9 with permanent floor	l openings provide	feet d in Section A Items 8	_l meters 8 and/or 9 (above or below the LAG.
	the next higher floor (elevation C2.b in the diagrams) of the building is		feet	meters	above or below the HAG.
	Attached garage (top of slab) is	· _	feet [meters	above or below the HAG.
E4.	Top of platform of machinery and/or equipment servicing the building is		feet	meters	above or below the HAG.
E5.	Zone AO only: If no flood depth number is availa floodplain management ordinance? Yes				dance with the community's tify this information in Section G.
	SECTION F – PROPERTY O	WNER (OR OWN	R'S REPRESENTAT	IVE) CER	TIFICATION
The con	e property owner or owner's authorized representa munity-issued BFE) or Zone AO must sign here.	ative who complete The statements in	es Sections A, B, and E Sections A, B, and E	E for Zone are correc	A (without a FEMA-issued or t to the best of my knowledge.
Pro	perty Owner or Owner's Authorized Representation	ve's Name			
Ado	lress		City	State	ZIP Code
Sig	nature		Date	Telep	hone
Со	nments				
					Check here if attachments.

ELEVATION CERTIFICATE			OMB No. 1660-0008 Expiration Date: November 30, 2022
IMPORTANT: In these spaces, copy the corre	sponding information from	Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Su 1027 LAURADALE DR	ite, and/or Bldg. No.) or P.O. I	Route and Box No.	Policy Number:
City		IP Code	Company NAIC Number
NEW ORLEANS	LA	70114	
SECTIO	N G – COMMUNITY INFORM	ATION (OPTIONAL)	
The local official who is authorized by law or ord Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, ent	Certificate. Complete the appl	munity's floodplain ma icable item(s) and sig	anagement ordinance can complete n below. Check the measurement
G1. The information in Section C was take engineer, or architect who is authorize data in the Comments area below.)			
G2. A community official completed Section or Zone AO.	on E for a building located in Z	one A (without a FEN	IA-issued or community-issued BFE)
G3. The following information (Items G4–	G10) is provided for communit	y floodplain manager	nent purposes.
G4. Permit Number	G5. Date Permit Issued	G6.	Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:] New Construction 🗌 Substa	ntial Improvement	
G8. Elevation of as-built lowest floor (including of the building:	basement)	fee	et 🗌 meters Datum
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	fee	et 🗌 meters Datum
G10. Community's design flood elevation:		fee	et 🗌 meters Datum
Local Official's Name	Title		
Community Name	Telep	hone	
Signature	Date		
Comments (including type of equipment and loc	ation, per C2(e), if applicable)		
			Check here if attachments.

ELEVATION CERTIFICATE	BUILDING PH See Instruction		OMB No. 1660-0008 Expiration Date: November 30, 2022
MPORTANT: In these spaces, copy the co			
Building Street Address (including Apt., Unit,	-		FOR INSURANCE COMPANY USE Policy Number:
1027 LAURADALE DR	cano, and/or blug. NO.)		
City	State	ZIP Code	Company NAIC Number
NEW ORLEANS	LA	70114	
If using the Elevation Certificate to obtain instructions for Item A6. Identify all photogra "Left Side View." When applicable, photographic vents, as indicated in Section A8. If submitting the submitting of th	aphs with date taken; "Frographs must show the fo	ont View" and "Rear View"; a oundation with representative	nd, if required, "Right Side View" and examples of the flood openings or
	Dhata	0.70	
Photo One Caption	Photo	One	
		07-28-2	
	STOR SANA		
	Photo	Тwo	
Photo Two Caption			

	LEVATION CERTIFICATE	BUILDING PH Continuati		OMB No. 1660-0008 Expiration Date: November 30, 201
Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. 1027 LAURADALE DR Cliv NEW ORLEANS State ZIP Code LA 70114 Company NAIC Number Company NAIC Number Company NAIC Number If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photograph 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.	 /IPORTANT: In these spaces, copy the co	FOR INSURANCE COMPANY US		
City State ZIP Code Company NAIC Number If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photograph 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 the preceding page, affix the additional photographs below. Identify all photograph photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographotographs If submitting	Building Street Address (including Apt., Unit,			
<text><image/><image/><image/></text>	City	State	ZIP Code	Company NAIC Number
with date taker; "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.	NEW ORLEANS	LA	70114	
Photo One Caption	with: date taken; "Front View" and "Rear	r View"; and, if require	d, "Right Side View" and '	"Left Side View." When applicable
Photo One Caption				
DT-28-2022		Photo	One	
Andready Andrea	noto One Caption			
			Activity devision dev	2022

Photo Two Caption