













The Little Details


Address: 235 N Fieldspan Rd, Scott 70583

	Company	Average Monthly Expense
 Electricity	Entergy	\$533
 Water	LUS	\$120
 Sewer	Private Treatment Plant	
 Gas	Propane / Reed Gas	\$70
 Garbage	City	

Garage Pick-Up Day:

 Pool	(can be purchased additionally)	
 Landscaping		
 Alarm	Acadiana Security Plus	\$32
 Internet	Cox	\$170
 Pest Control	Cajun Bug	\$160
	Company	Yearly Expense
 Homeowner's Insurance	Vault	\$12,357
 Flood Insurance	Assurant	\$863

Flood Zone: AE - See Elevation Certificate Included

 HOA: Contact Information		
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Year Built: 2021 **Age of Roof:** 4 years

Age of Water Heater: 4 years **Gas** ☒ **OR Elec.** ☐

A/C: # of Units 3 (4 mini **Age of Units** 4 years **Heater: Gas** ☐ **OR Elec.** ☒

A/C Serviced By: Butcher / **Frequency:** when needed

*Things Seller **LOVES** About the Property*

A multitude of spaces to enjoy. Privacy. A forever home. Great for entertaining or for relaxation. One-of-a-kind wine cave and wine storage area (my favorite place to relax and unwind). Everyone loves the large theatre room. We often have movie night, dance night, karaoke night, stage performances or great music listening. The master suites were created to give you a feel of staying at a nice resort. What is there not to like about the man cave! If you are a cook, you will love the main kitchen and outdoor kitchen. The back patio and fireplace are an amazing area to relax. So much more to love!

See Details & Features for more about what the Seller loves!

Updates & Repairs Seller Has Done

[illegible]

Things **NOT** Included in the Sale

Washer/Dryer

Wall Mounted TV's (mounts remain)

Furniture, Outdoor Furniture & Art are negotiable.

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 SAM LANDERS				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 235 NORTH FIELDSPAN ROAD				Company NAIC Number:	
City SCOTT		State Louisiana		ZIP Code 70583	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT ` 6.3 ACRES PERMIT #2018-0393					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL-NEW</u>					
A5. Latitude/Longitude: Lat. <u>30.15°05.9"N</u> Long. <u>92.08°39.9"W</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983					
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.					
A7. Building Diagram Number <u>1A</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) _____ sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____					
c) Total net area of flood openings in A8.b _____ sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>2144.00</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>					
c) Total net area of flood openings in A9.b _____ 0.00 sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number Lafayette Parish Unincorporated areas 220101			B2. County Name LAFAYETTE		B3. State Louisiana
B4. Map/Panel Number 22055C040	B5. Suffix J	B6. FIRM Index Date 12-21-2018	B7. FIRM Panel Effective/ Revised Date 12-21-2018	B8. Flood Zone(s) A	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 36'
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input checked="" type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

ELEVATION CERTIFICATE

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. 235 NORTH FIELDSPAN ROAD			Policy Number:
City SCOTT	State Louisiana	ZIP Code 70583	Company NAIC Number

SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

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: GPS observations Vertical Datum: navd88

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.

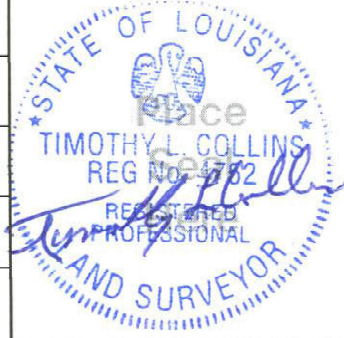
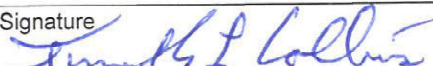
Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>37.6</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	<u>39.2</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>n/a.0</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>39.0</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>39.0'</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>38.2'</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>39'0</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>0.0</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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 ☐ No ☐ Check here if attachments.

Certifier's Name TIMOTHY L. COLLINS	License Number 4752		
Title P.L.S.			
Company Name C.P.S. ENGINEERING & LAND SURVEYING			
Address 2304 EAST PINHOOK ROAD			
City LAFAYETTE	State Louisiana	ZIP Code 70501	
Signature 	Date 10-29-2020	Telephone (337) 235-2431	Ext.

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)
C2,e: A/C unit

ELEVATION CERTIFICATEOMB No. 1660-0008
Expiration Date: November 30, 2022

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. 235 NORTH FIELDSPAN ROAD			Policy Number:	
City SCOTT	State Louisiana	ZIP Code 70583	Company NAIC Number	
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)				
<p>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.</p> <p>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).</p> <p style="margin-left: 20px;">a) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.</p> <p style="margin-left: 20px;">b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the LAG.</p> <p>E2. For Building Diagrams 6–9 with permanent flood openings provided in 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 _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.</p> <p>E3. Attached garage (top of slab) is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.</p> <p>E4. Top of platform of machinery and/or equipment servicing the building is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.</p> <p>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 management ordinance? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown. The local official must certify this information in Section G.</p>				
SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION				
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.				
Property Owner or Owner's Authorized Representative's Name				
Address	City	State	ZIP Code	
Signature	Date	Telephone		
Comments				
<input type="checkbox"/> Check here if attachments.				

ELEVATION CERTIFICATE

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. 235 NORTH FIELDSPAN ROAD			Policy Number:	
City SCOTT	State Louisiana	ZIP Code 70583	Company NAIC Number	
SECTION G – COMMUNITY INFORMATION (OPTIONAL)				
<p>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.</p> <p>G1. <input type="checkbox"/> 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.)</p> <p>G2. <input type="checkbox"/> A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.</p> <p>G3. <input type="checkbox"/> The following information (Items G4–G10) is provided for community floodplain management purposes.</p>				
G4. Permit Number		G5. Date Permit Issued		G6. Date Certificate of Compliance/Occupancy Issued
<p>G7. This permit has been issued for: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement</p> <p>G8. Elevation of as-built lowest floor (including basement) of the building: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____</p> <p>G9. BFE or (in Zone AO) depth of flooding at the building site: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____</p> <p>G10. Community's design flood elevation: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____</p>				
Local Official's Name		Title		
Community Name		Telephone		
Signature		Date		
<p>Comments (including type of equipment and location, per C2(e), if applicable)</p> <div style="text-align: right; margin-top: 10px;"><input type="checkbox"/> Check here if attachments.</div>				

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6

OBM Control Number: 1660-0008
Expiration: 11/30/2022

IMPORTANT: In these spaces, copy the corresponding information from Section A FOR INSURANCE COMPANY USE
POLICY NUMBER:
COMPANY NAIC NUMBER:

Building Street Address (including Apt., Unit, Suit, and/or Bldg. No.) or P.O. route and Box No.

235 NORTH FIELDSPAN ROAD "FINAL
SCOTT, LOUISIANA 70583 10-29-2020 – 25006



BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6

OBM Control Number: 1660-0008
Expiration: 11/30/2022

IMPORTANT: In these spaces, copy the corresponding information from Section A FOR INSURANCE COMPANY USE
POLICY NUMBER:
COMPANY NAIC NUMBER:

Building Street Address (including Apt., Unit, Suit, and/or Bldg. No.) or P.O. route and Box No.
235 NORTH FIELDSPAN ROAD "FINAL
SCOTT, LOUISIANA 70583 10-29-2020 – 25006

