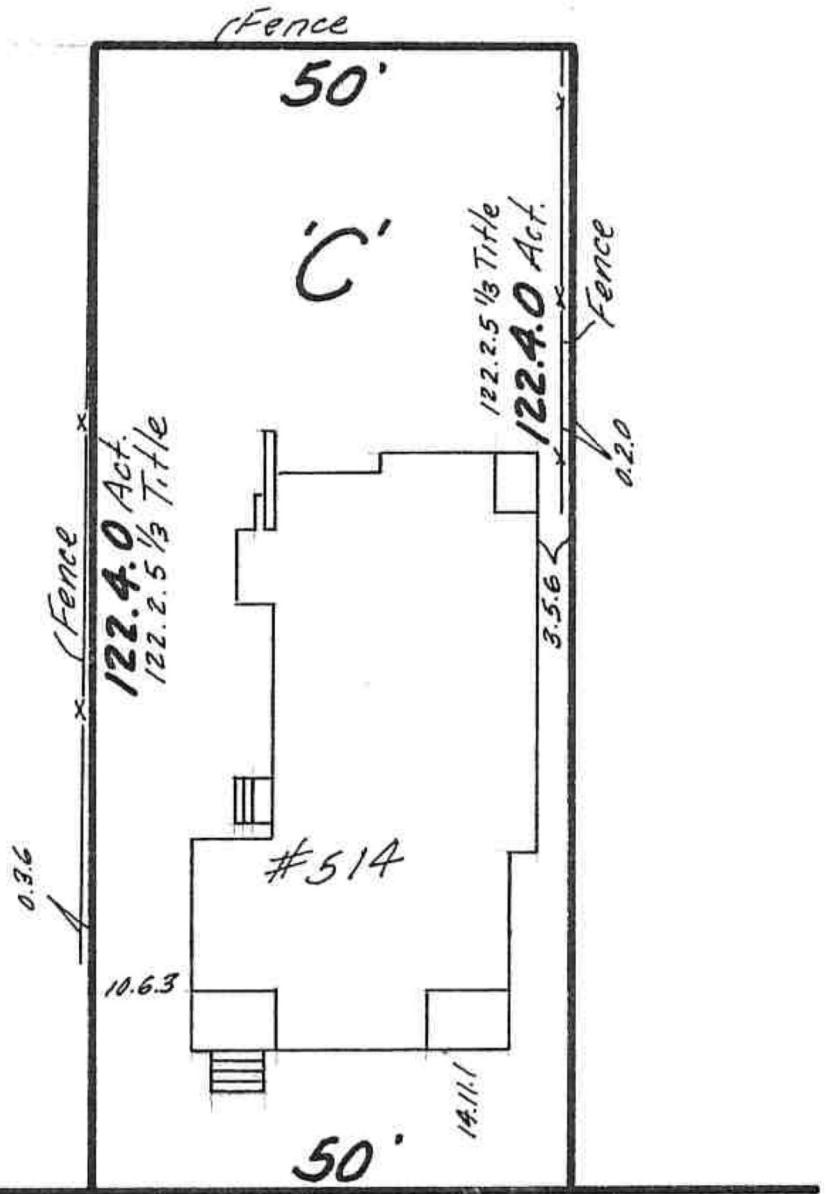
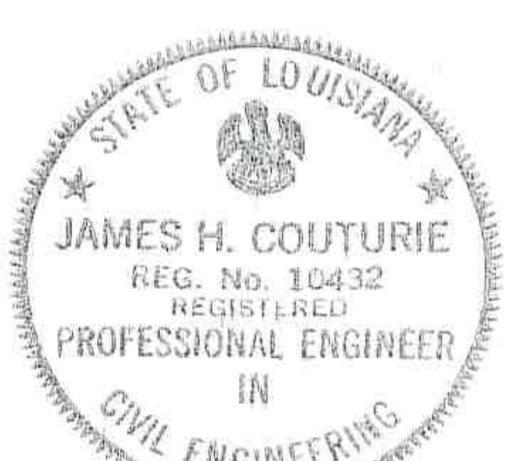


SQ. NO. 63
7 TH DISTRICT

ADAMS *ST.* *SIDE*

PEARL ST.



HILLARY

St.

New Orleans, La.
Oct. 22, 1970

Survey certified correct. Made at the request
of Wm. Coppings.
Gilbert, Kelly & Couturie, Surveying & Engineering
James Couturie

2545

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Interior Renovation

Hillary St

SURVEY + BENCHMARK

2024.23

G002

U.S. DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
National Flood Insurance Program

OMB Control No. 1660-0008
Expiration Date: 06/30/2026

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

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: <u>KEITH VODANOVICH</u>	Policy Number: _____
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>512-14 HILLARY STREET</u>	Company NAIC Number: _____
City: <u>NEW ORLEANS</u>	State: <u>LA</u> ZIP Code: <u>70118</u>
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: <u>District SEVENTH Lot C Square 63</u>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): <u>Residential</u>	
A5. Latitude/Longitude: Lat. <u>29.939545</u> Long. <u>-90.130798</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983 <input type="checkbox"/> WGS 84	
A6. Attach at least two and when possible four clear photographs (one for each side) of the building (see Form pages 7 and 8).	
A7. Building Diagram Number: <u>5</u>	
A8. For a building with a crawlspace or enclosure(s): <ul style="list-style-type: none"> a) Square footage of crawlspace or enclosure(s): <u>N/A</u> sq. ft. b) Is there at least one permanent flood opening on two different sides of each enclosed area? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>N/A</u> Engineered flood openings: <u>N/A</u> d) Total net open area of non-engineered flood openings in A8.c: <u>N/A</u> sq. in. e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructions): <u>N/A</u> sq. ft. f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): <u>N/A</u> sq. ft. 	
A9. For a building with an attached garage: <ul style="list-style-type: none"> a) Square footage of attached garage: <u>N/A</u> sq. ft. b) Is there at least one permanent flood opening on two different sides of the attached garage? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>N/A</u> Engineered flood openings: <u>N/A</u> d) Total net open area of non-engineered flood openings in A9.c: <u>N/A</u> sq. in. e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructions): <u>N/A</u> sq. ft. f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): <u>N/A</u> sq. ft. 	

SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1.a. NFIP Community Name: <u>CITY OF NEW ORLEANS</u>	B1.b. NFIP Community Identification Number: <u>225203</u>		
B2. County Name: <u>ORLEANS</u>	B3. State: <u>LA</u>	B4. Map/Panel No.: <u>22071C0209</u>	B5. Suffix: <u>F</u>
B6. FIRM Index Date: <u>9/30/2016</u>	B7. FIRM Panel Effective/Revised Date: <u>9/30/2016</u>		
B8. Flood Zone(s): <u>X</u>	B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): <u>NONE</u>		
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: <input type="checkbox"/> FIS <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other: _____			
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			
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

FEMA Form FF-206-FY-22-152 (formerly 086-0-33) (10/22)

Page 2 of 19

FEMA Form FF-206-FY-22-152 (formerly 086-0-33) (10/22) Page 2 of 19

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 512-14 HILLARY STREET	FOR INSURANCE COMPANY USE
City: NEW ORLEANS	State: LA ZIP Code: 70118
Policy Number: _____	
Company NAIC Number: _____	

**SECTION H – BUILDING'S FIRST FLOOR HEIGHT INFORMATION FOR ALL ZONES
(SURVEY NOT REQUIRED) (FOR INSURANCE PURPOSES ONLY)**

The property owner, owner's authorized representative, or local floodplain management official may complete Section H for all flood zones to determine the building's first floor height for insurance purposes. Sections A, B, and I must also be completed. Enter heights to the nearest tenth of a foot (nearest tenth of a meter in Puerto Rico). **Reference the Foundation Type Diagrams (at the end of Section H Instructions) and the appropriate Building Diagrams (at the end of Section I Instructions) to complete this section.**

H1. Provide the height of the top of the floor (as indicated in Foundation Type Diagrams) above the Lowest Adjacent Grade (LAG):

a) For Building Diagrams 1A, 1B, 3, and 5–9. Top of bottom _____ feet meters above the LAG floor (include above-grade floors only for buildings with subgrade crawlspaces or enclosure floors) is:

b) For Building Diagrams 2A, 2B, 4, and 6–9. Top of next higher floor (i.e., the floor above basement, crawlspace, or enclosure floor) is:

H2. Is all Machinery and Equipment servicing the building (as listed in Item H2 instructions) elevated to or above the floor indicated by the H2 arrow (shown in the Foundation Type Diagrams at end of Section H instructions) for the appropriate Building Diagram?

Yes No

SECTION I – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and H must sign here. *The statements in Sections A, B, and H are correct to the best of my knowledge.* Note: If the local floodplain management official completed Section H, they should indicate in Item G2.b and sign Section G.

Check here if attachments are provided (including required photos) and describe each attachment in the Comments area.

Property Owner or Owner's Authorized Representative Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____

Telephone: _____ Ext.: _____ Email: _____

Comments: _____

FEMA Form FF-206-FY-22-152 (formerly 086-0-33) (10/22) Page 6 of 19

ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 512-14 HILLARY STREET	FOR INSURANCE COMPANY USE
City: NEW ORLEANS	State: LA ZIP Code: 70118
Policy Number: _____	
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, AO, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO, A99. Complete Items C2.a–h below according to the Building Diagram specified in Item A7. In Puerto Rico only, enter meters.
 Benchmark Utilized: **ALCO** Vertical Datum: **NAVD '88**

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929 NAVD 1988 Other: _____

Datum used for building elevations must be the same as that used for the BFE. Conversion factor used? Yes No
 If Yes, describe the source of the conversion factor in the Section D Comments area.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor):	7.5	Check the measurement used: <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor (see Instructions):	19.5	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (see Instructions):	N/A	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab):	N/A	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area):	8.0	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest Adjacent Grade (LAG) next to building: <input type="checkbox"/> Natural <input checked="" type="checkbox"/> Finished	5.1	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest Adjacent Grade (HAG) next to building: <input type="checkbox"/> Natural <input checked="" type="checkbox"/> Finished	5.7	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Finished LAG at lowest elevation of attached deck or stairs, including structural support:	5.5	<input checked="" 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 state 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 and describe in the Comments area.

Certifier's Name: **Louis C. Hartmann** License Number: **4995**

Title: **Professional Land Surveyor**

Company Name: **Gilbert, Kelly & Couturié, Inc.**

Address: **2121 N. Causeway Blvd., Suite 121**

City: **Metairie** State: **LA** ZIP Code: **70001**

Signature:  Date: **11/6/2024**

Telephone: **(504) 836-2121** Ext.: _____ Email: **louie@gkcsurveyors.com**

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

Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and description of any attachments):
SECTION C2E IS ELECTRICAL BOX, THE TOP OF THE CURB IS 4.10 NAVD.

The seal is circular with "STATE OF LOUISIANA" around the top edge and "LIC. NO. 4995" in the center. The bottom half contains the text "LICENSED PROFESSIONAL LAND SURVEYOR".

Place Seal Here

FEMA Form FF-206-FY-22-152 (formerly 086-0-33) (10/22) Page 3 of 19

ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19
BUILDING PHOTOGRAPHS

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 512-14 HILLARY STREET		FOR INSURANCE COMPANY USE	
City: NEW ORLEANS		State: LA	ZIP Code: 70118
		Policy Number: _____	
		Company NAIC Number: _____	

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.

Photo One

Photo One Caption:

Front View 11/6/2024

Photo Two

Photo Two Caption:

Rear View 11/6/2024

[View Details](#) | [Edit](#) | [Delete](#)

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:

512-14 HILLARY STREET

City: **NEW ORLEANS**

State: **LA**

ZIP Code: **70118**

FOR INSURANCE COMPANY USE

Policy Number: _____

Company NAIC Number: _____

**SECTION E – BUILDING MEASUREMENT INFORMATION (SURVEY NOT REQUIRED)
FOR ZONE AO, ZONE AR/AO, AND ZONE A (WITHOUT BFE)**

For Zones AO, AR/AO, and A (without BFE), complete Items E1–E5. For Items E1–E4, use natural grade, if available. If the Certificate is intended to support a Letter of Map Change request, complete Sections A, B, and C. Check the measurement used. In Puerto Rico only, enter meters.

Building measurements are based on: Construction Drawings* Building Under Construction* Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

E1. Provide measurements (C.2.a in applicable Building Diagram) for the following and check the appropriate boxes to show whether the measurement is above or below the natural HAG and the LAG.

a) Top of bottom floor (including basement, crawlspace, or enclosure) is: _____ feet meters above or below the HAG.

b) Top of bottom floor (including basement, crawlspace, or enclosure) is: _____ feet meters above or below the LAG.

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 (C2.b in applicable Building Diagram) of the building is: _____ feet meters above or below the HAG.

E3. 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 available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown The local official must certify this information in Section G.

SECTION F – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without BFE) or Zone AO must sign here. *The statements in Sections A, B, and E are correct to the best of my knowledge*

Check here if attachments and describe in the Comments area.

Property Owner or Owner's Authorized Representative Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____

Telephone: _____ Ext.: _____ Email: _____

Comments: _____

...and the last time I saw him, he was sitting in a chair, holding a cigarette, looking very tired.

ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19
BUILDING PHOTOGRAPHS

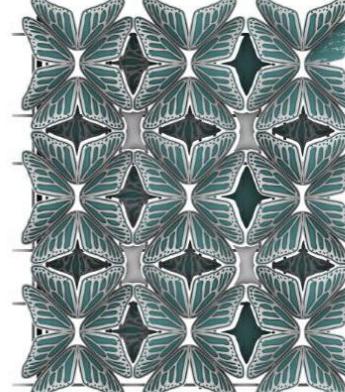
Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 512-14 HILLARY STREET			FOR INSURANCE COMPANY USE	
City: NEW ORLEANS		State: LA	ZIP Code: 70118	
<p>Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.</p> <div style="border: 1px solid black; width: 100%; height: 450px; margin-bottom: 5px;"></div>  <p style="text-align: center;">Photo Three</p>				

| Photo Three Caption: **Left View 11/6/2024** **Photo Four** | | | | |
| Photo Four Caption: **Right View 11/6/2024** | | | | |

FEMA Form FF-206-FY-22-152 (formerly 086-0-33) (10/22)

Page 8 of 19



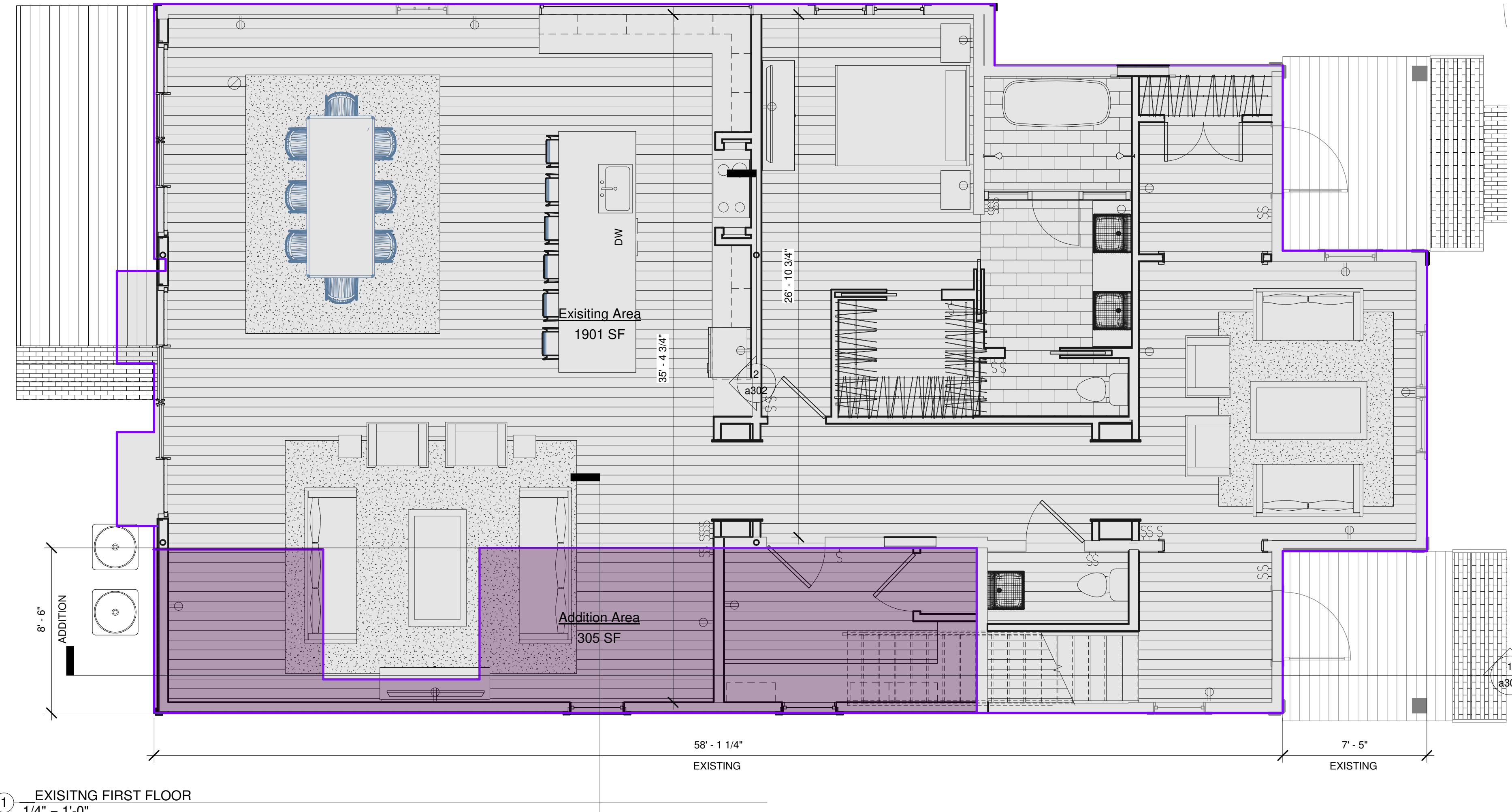
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Interior Renovation

Hillary St.

ELEVATION CERTIFICATE

2024.23



Area Schedule (OVERALL)		
Name	Area	Level
Existing Area	1901 SF	EXISITNG FIRST FLOOR
Addition Area	305 SF	EXISITNG FIRST FLOOR
Existing Area	1248 SF	SECOND FLOOR
Addition Area	166 SF	SECOND FLOOR
ADDITION AREA TOTAL:	471SF	
EXISTING AREA TOTAL:	3,149 SF	

FORMULAS:
EXISITNG AREA (15%) = 15% OF EXISTING AREA
3149 SF.(15%) = 472.35 SF
ADDITION PER FLOOR
305 SF +166SF = 471 SF
ADDITION AREA COMPARED TO 15% OF EXISITING 472.35 SF > 471 SF



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No.	Description	Date
3	STRUCTURAL REDLINES SET	12.26.2024
4	PERMITTING COMMENTS	01.03.2025

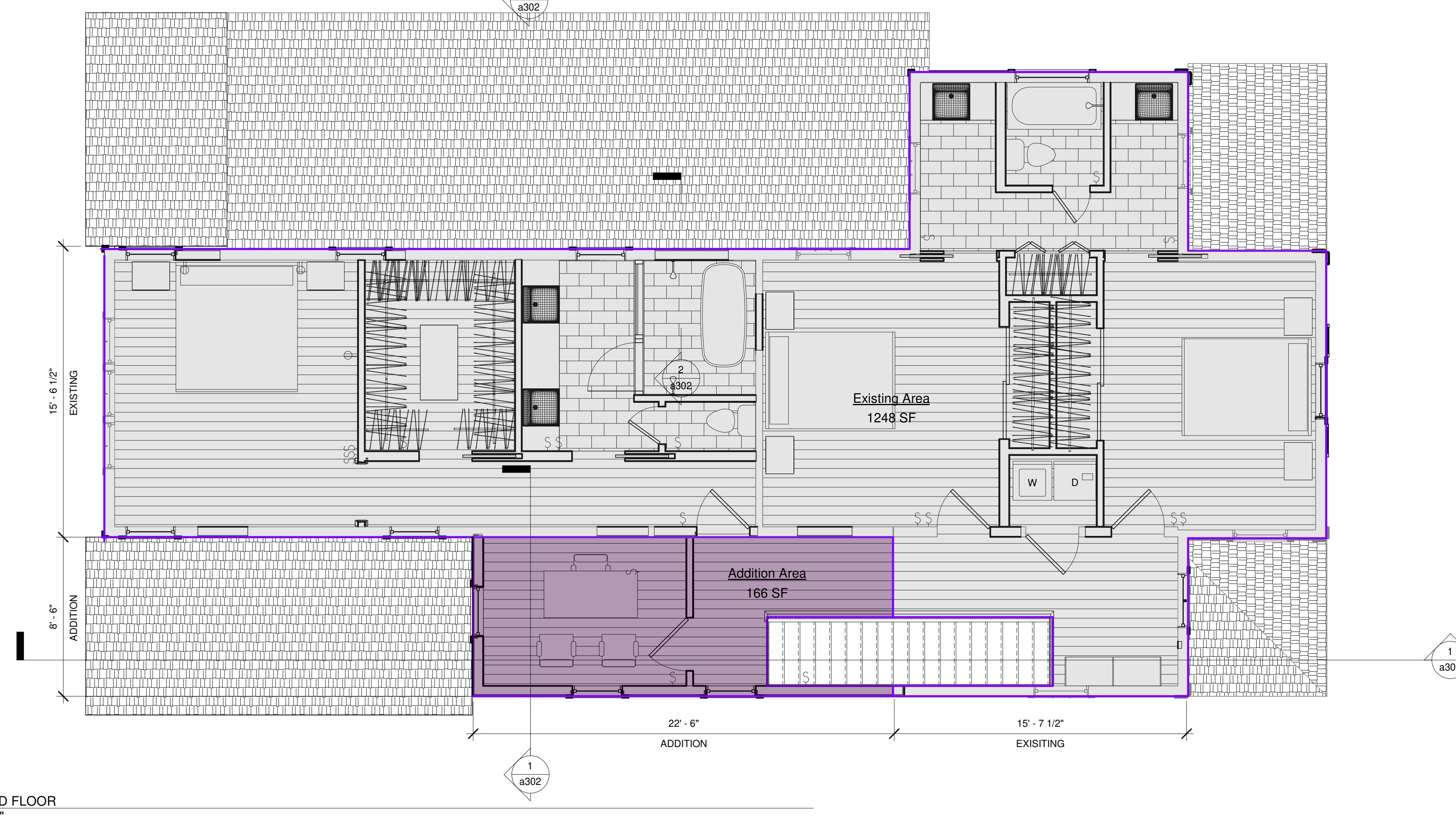
Interior Renovation

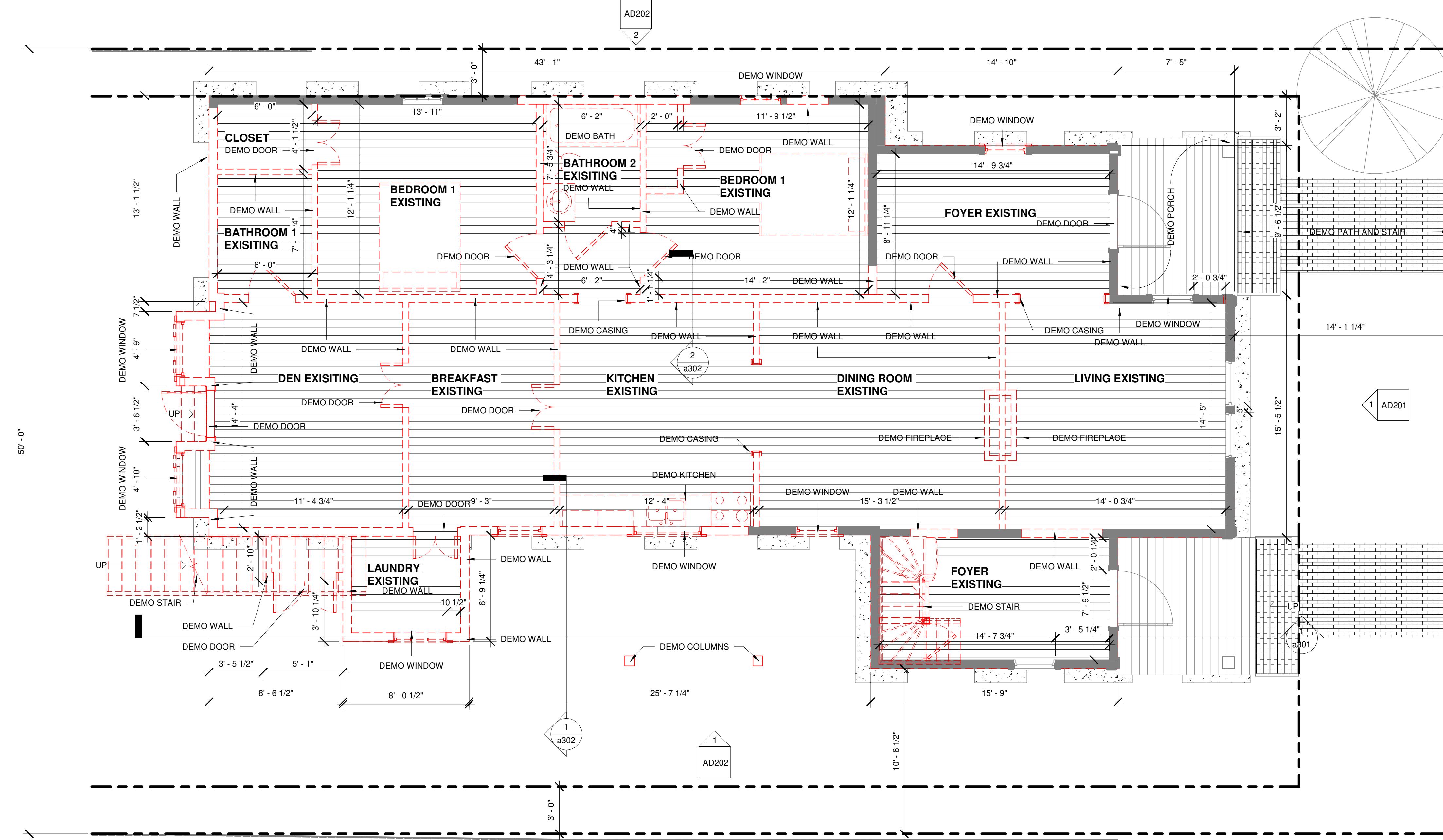
Hillary St.

AREA PLANS

2024.23

G004





① EXISTING FIRST FLOOR
1/4" = 1'-0"

1/12/2025 4:42:34 PM

ROOM SCHEDULE EXISTING	
Name	Number

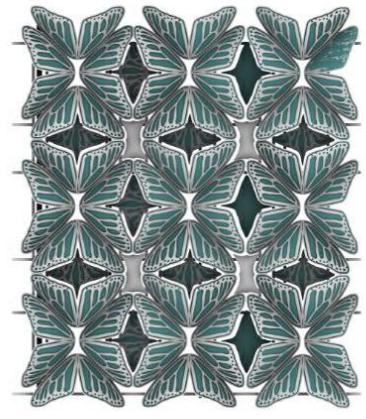
BATH ROOM 1 EXISTING	21
BATHROOM 2 EXISTING	32
BATHROOM 3 EXISTING	38

TOTAL BATHROOMS 3

ROOM SCHEDULE EXISTING	
Name	Number

BEDROOM 1 EXISTING	23
BEDROOM 2 EXISTING	24
BEDROOM 3 EXISTING	42
BEDROOM 4 EXISTING	40
BEDROOM 5 EXISTING	36

TOTAL BEDROOMS 5



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No.	Description	Date
2	CM 1	06.12.2024
3	STRUCTURAL REDLINES SET	12.26.2024
4	PERMITTING COMMENTS	01.03.2025

Interior Renovation

Hillary St.

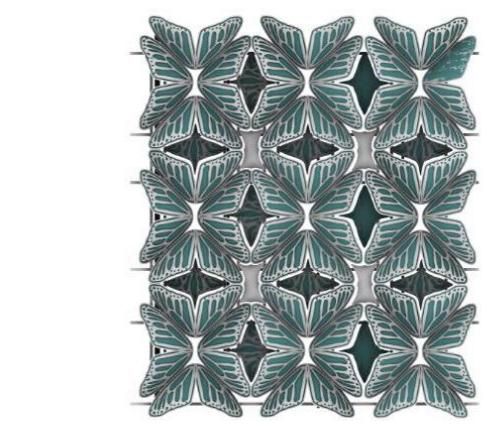
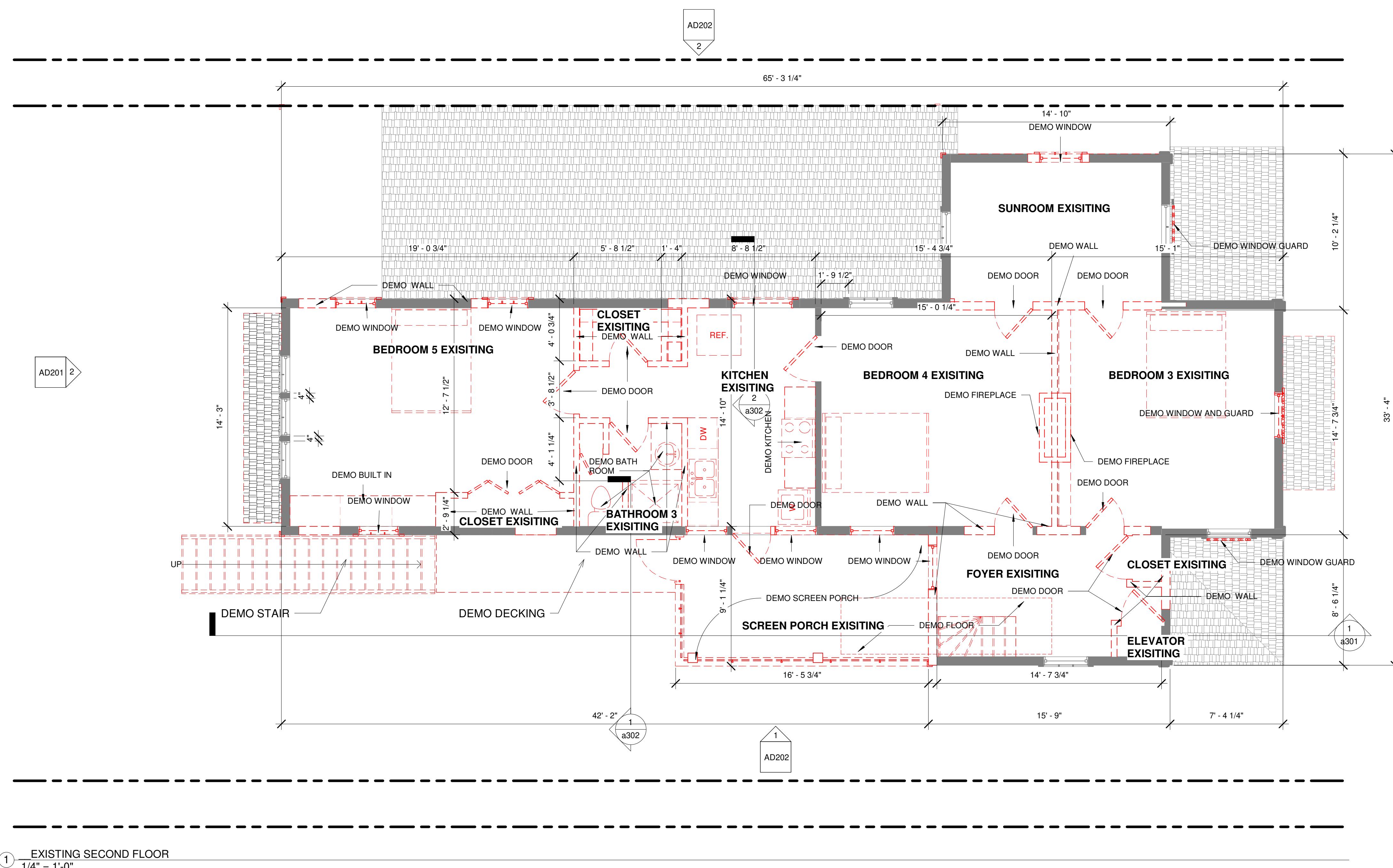
DEMO FLOOR PLAN

EXISTING WALL :

DEMOED WALL :

2024.23

AD101



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No.	Description	Date
2	CM 1	06.12.2024
3	STRUCTURAL REDLINES SET	12.26.2024
4	PERMITTING COMMENTS	01.03.2025

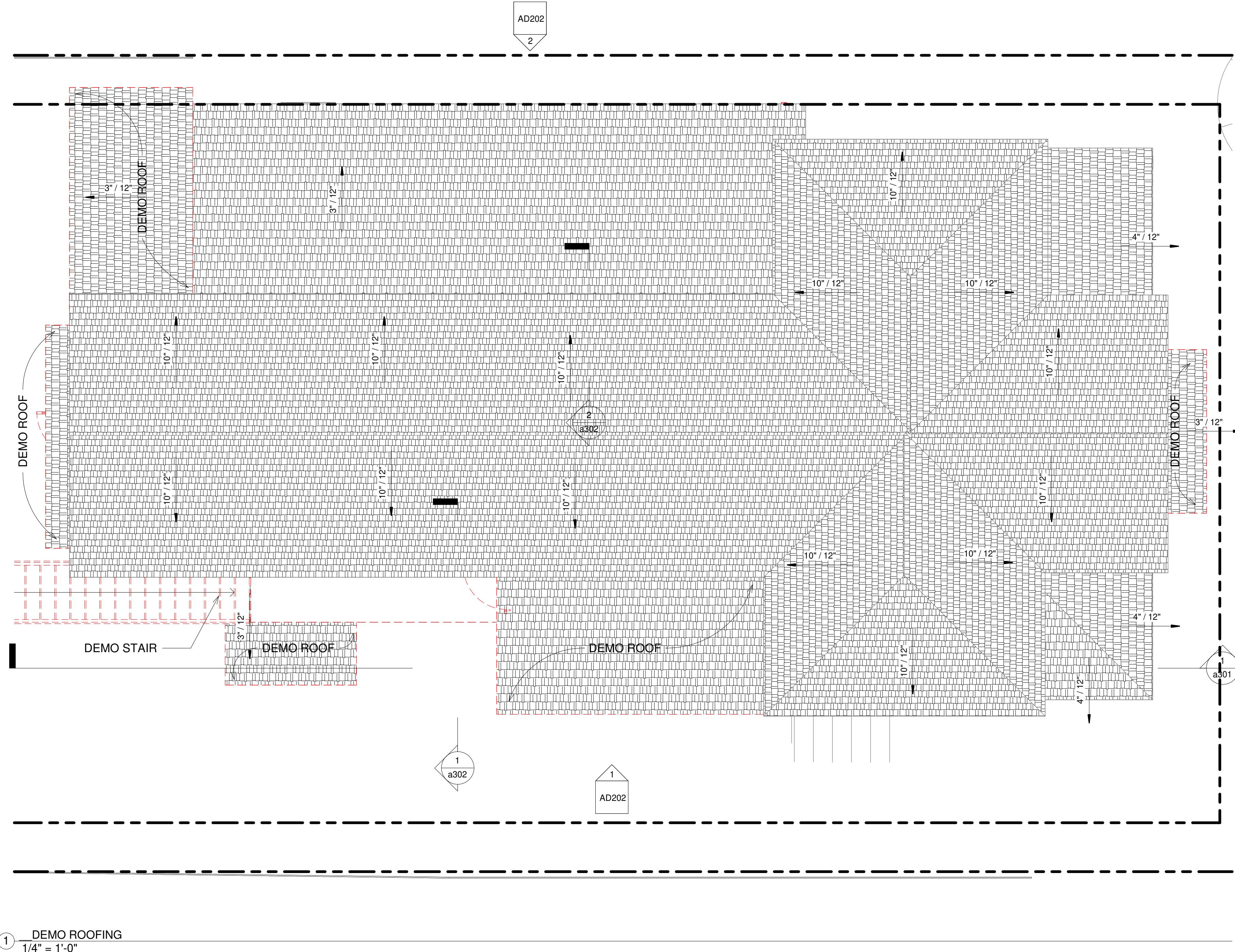
Interior Renovation

Hillary St.

DEMO SECOND FLOOR

2024.23

AD102



Interior Renovation

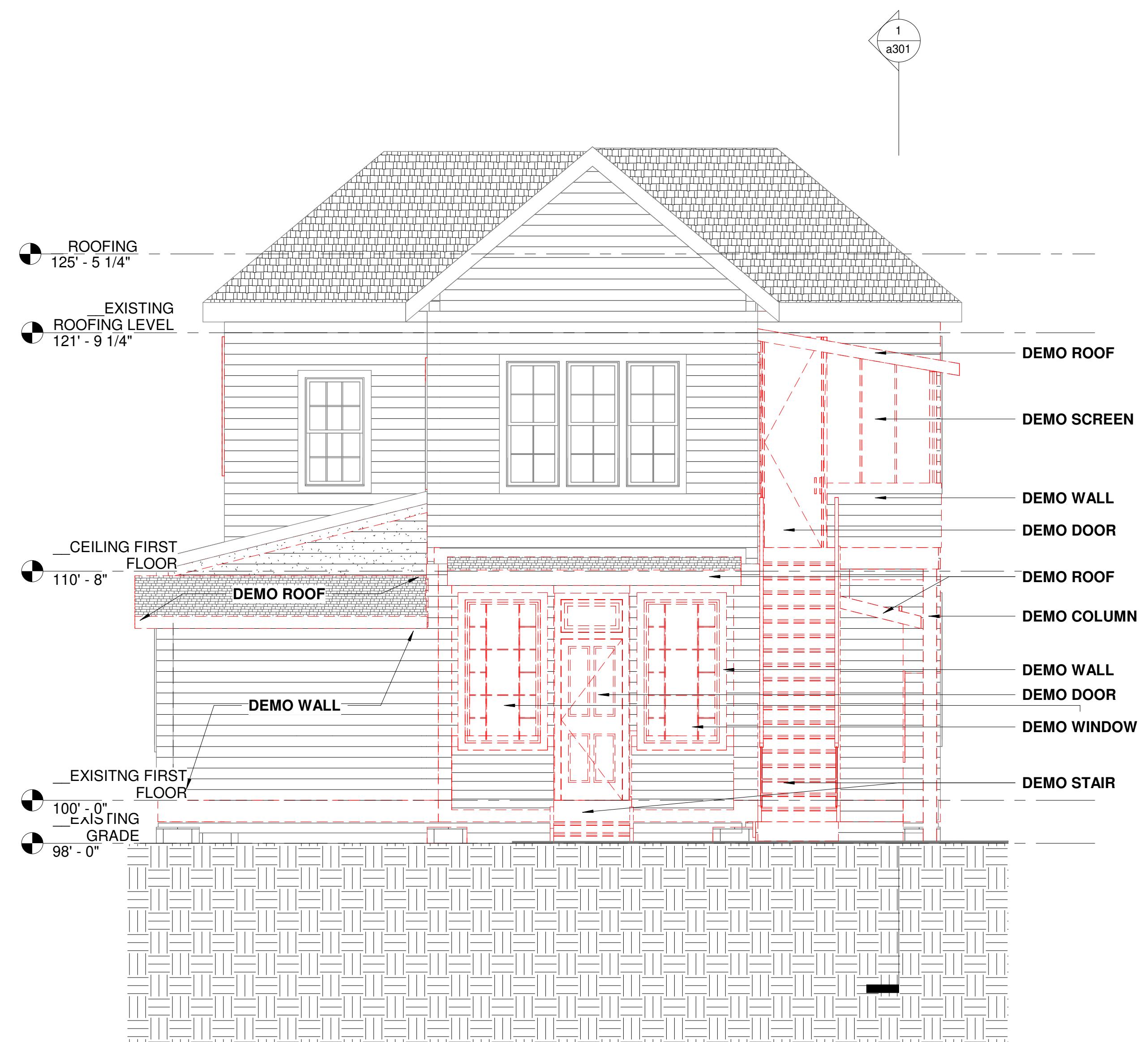
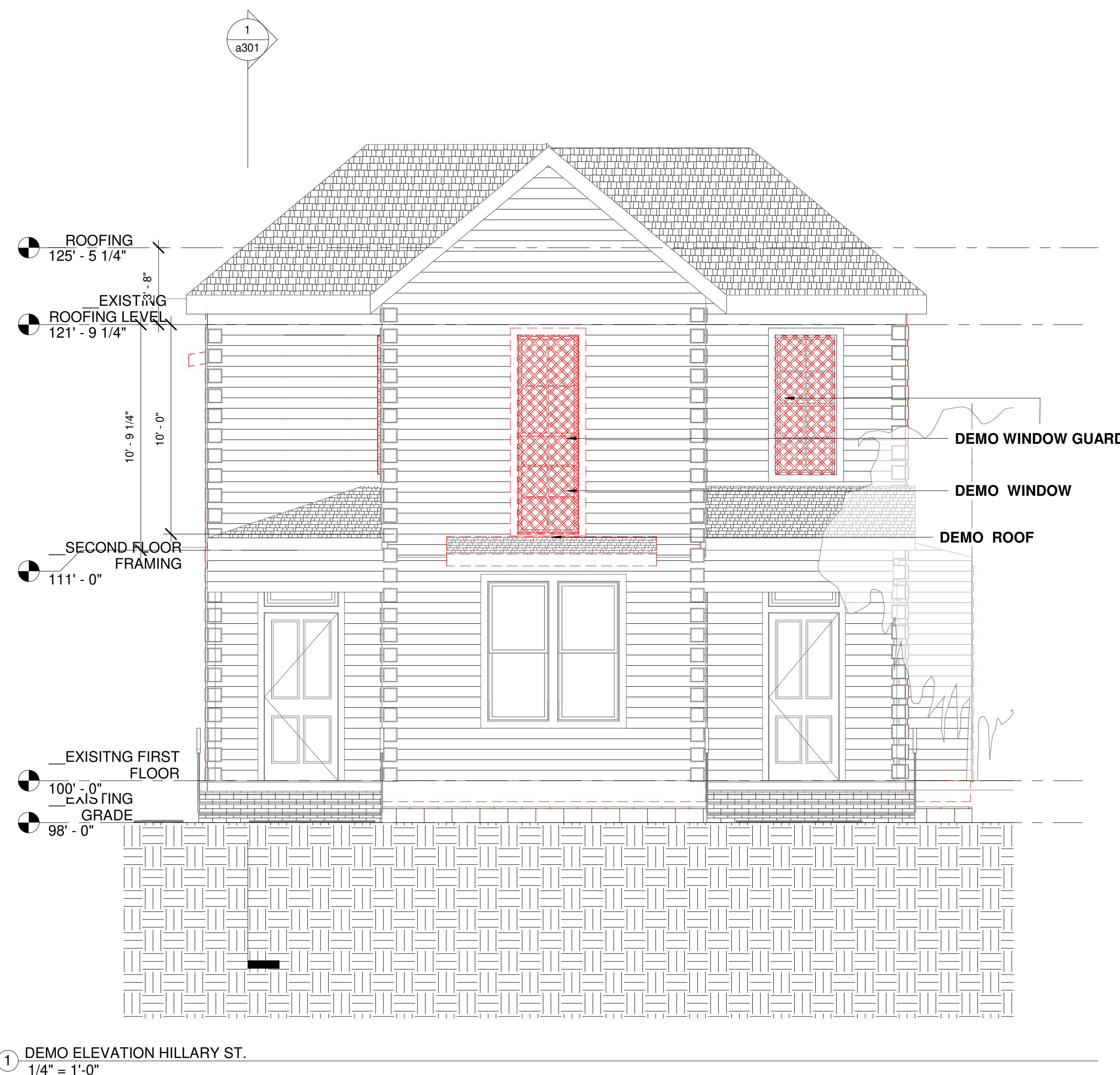
Hillary St.

DEMO ROOF PLAN

2024.23

AD103

1/12/2025 4:42:35 PM



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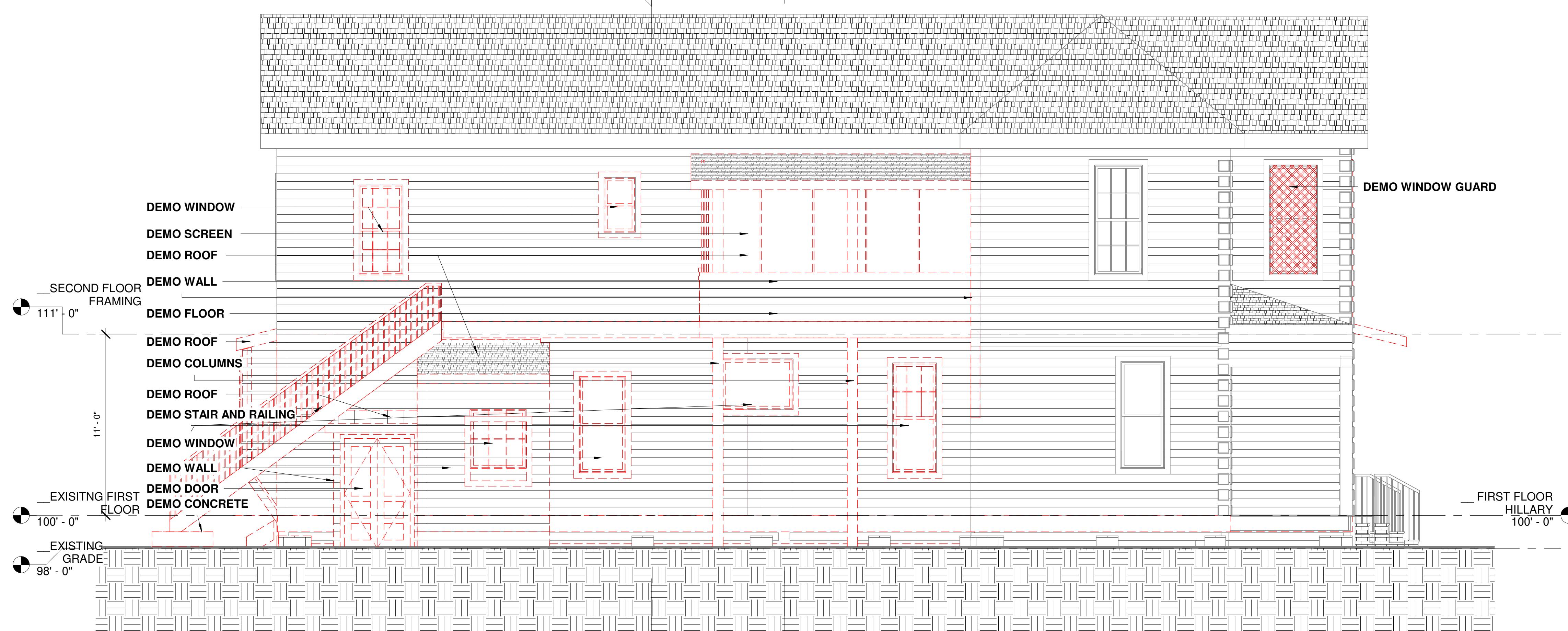
Interior Renovation

Hillary St.

DEMO ELEVATIONS

2024.23

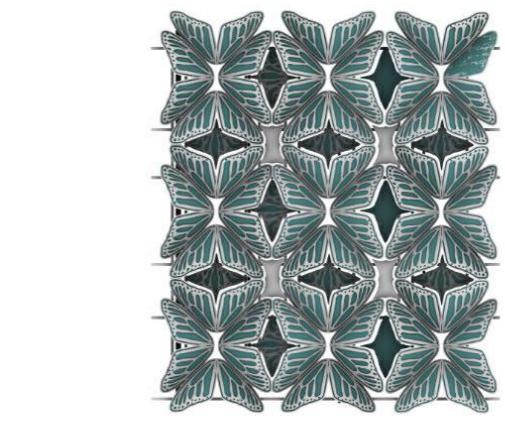
AD201



① DEMO ELEVATION PEARL ST.
1/4" = 1'-0"



② DEMO ELEVATION ST. CHARLES ST.
1/4" = 1'-0"



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No.	Description	Date
2	CM 1	06.12.2024
3	STRUCTURAL REDLINES SET	12.26.2024
4	PERMITTING COMMENTS	01.03.2025

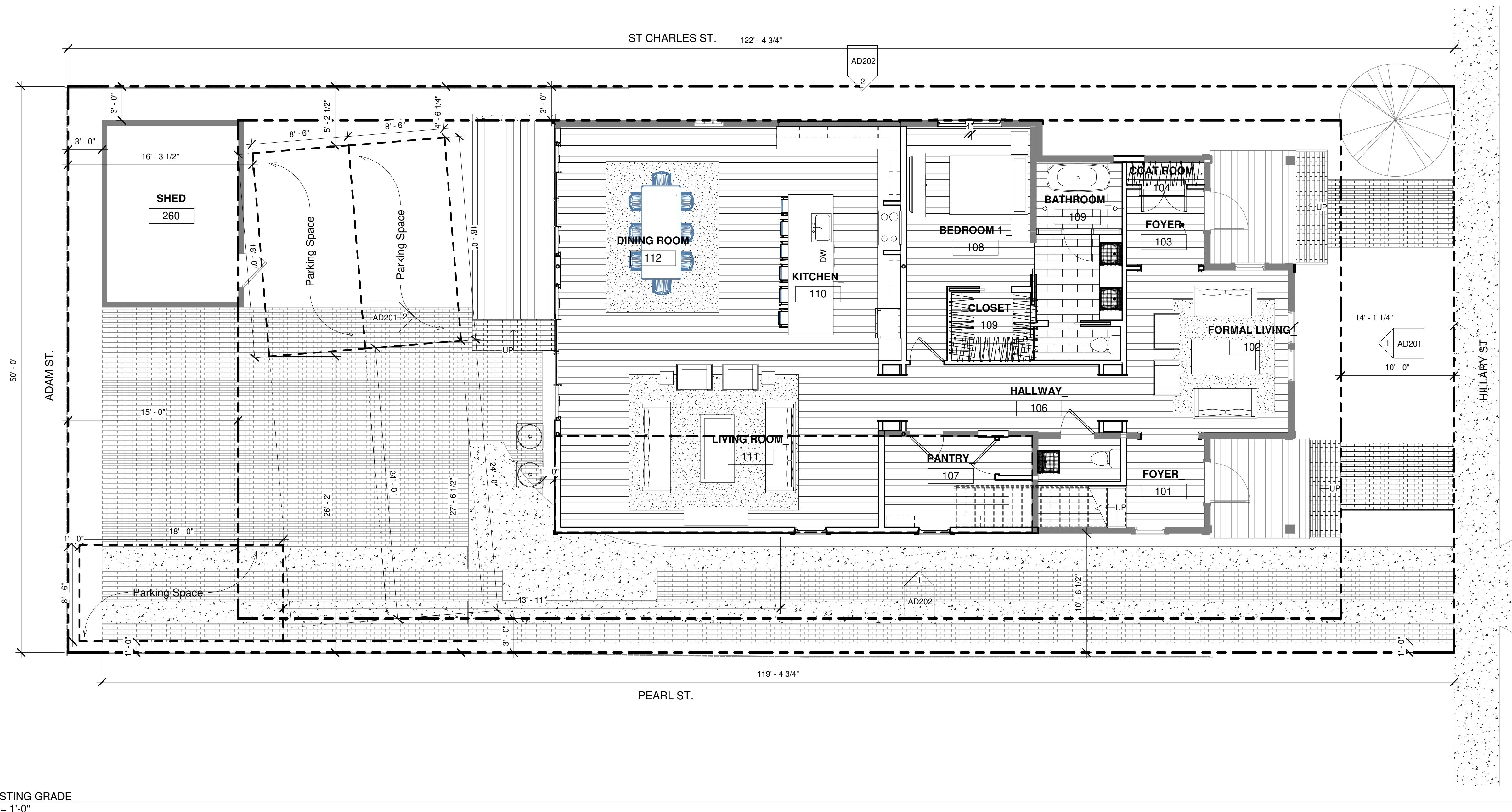
Interior Renovation

Hillary St.

DEMO ELEVATIONS

2024.23

AD202



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<https://mariefrench.netlify.app/>

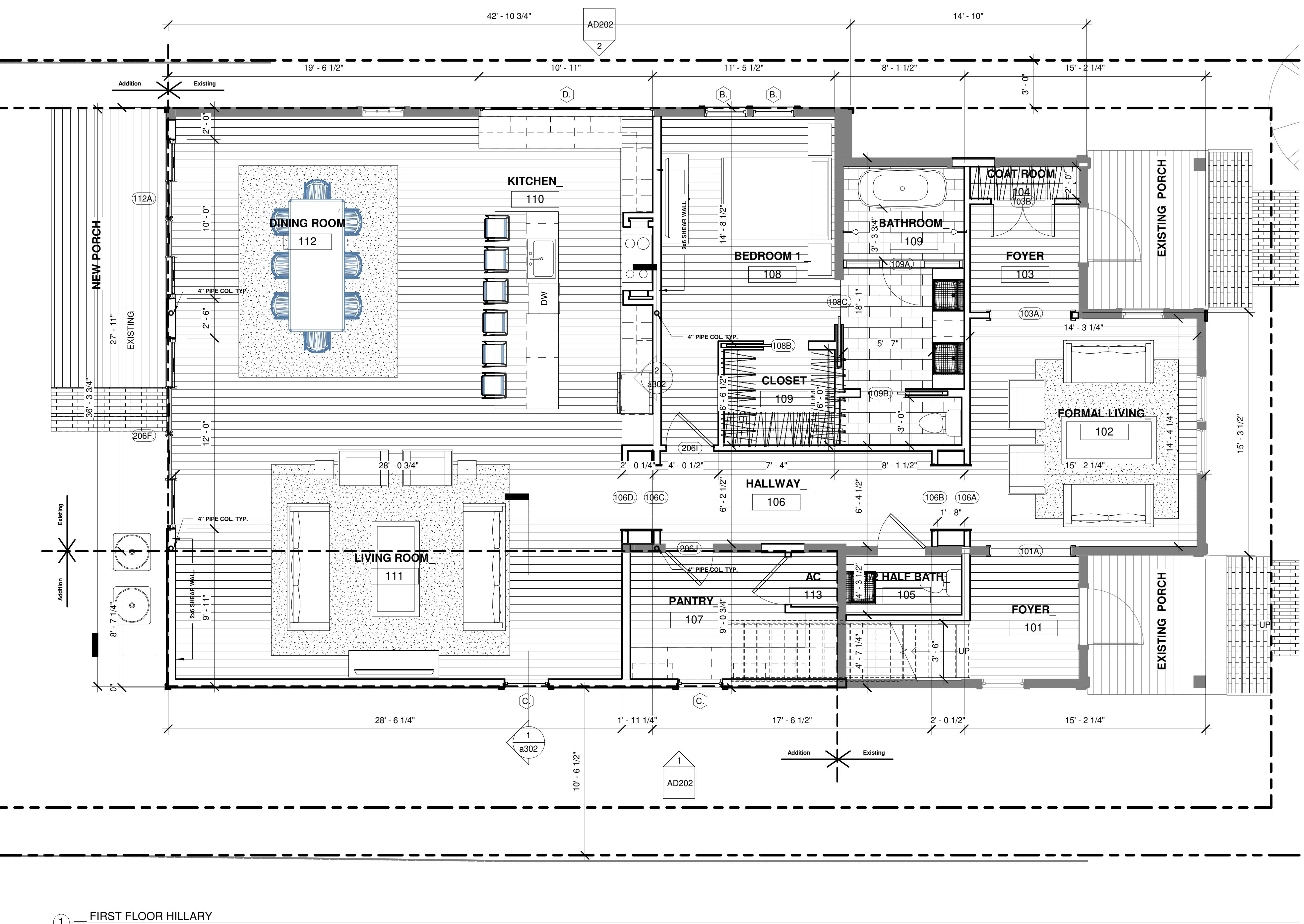
Interior Renovation

Hillary St.

SITE PLAN

2024.23

A050



Door Schedule			
Mark	Width	Height	Comments
101A.	5' - 0"	8' - 0"	CASE OPENING
103A.	5' - 0"	8' - 0"	CASE OPENING
103B.	4' - 0"	8' - 0"	INTERIOR SWING DOOR
104A.	4' - 0"	8' - 0"	BI FOLD DOORS
104B.	2' - 0"	8' - 0"	INTERIOR SWING DOOR
106C.	4' - 0"	8' - 0"	THICK CASE OPENING
106D.	4' - 0"	8' - 0"	THICK CASE OPENING
108B.	2' - 10"	8' - 0"	POCKET DOOR
108C.	2' - 10"	8' - 0"	POCKET DOOR
109A.	2' - 5"	8' - 0"	SHOWER DOOR
109B.	2' - 10"	8' - 0"	POCKET DOOR
112A.	10' - 0"	9' - 0"	NANO WALL W/ SAFETY GLAZING
202A.	2' - 10"	8' - 0"	INTERIOR SWING DOOR
203A.	2' - 10"	8' - 0"	INTERIOR SWING DOOR
203B.	6' - 0"	8' - 0"	SLIDER CLOSET DOOR
203C.	2' - 10"	8' - 0"	POCKET DOOR
205 A.	2' - 10"	8' - 0"	INTERIOR SWING DOOR
205B.	6' - 0"	8' - 0"	SLIDER CLOSET DOOR
205C.	2' - 10"	8' - 0"	POCKET DOOR
206A.	2' - 10"	8' - 0"	POCKET DOOR
206B.	2' - 0"	8' - 0"	INTERIOR SWING DOOR
206C.	2' - 7"	8' - 0"	SHOWER DOOR
206F.	12' - 0"	9' - 0"	NANO WALL W/ SAFETY GLAZING
207A.	2' - 10"	8' - 0"	POCKET DOOR
209A.	2' - 10"	8' - 0"	INTERIOR SWING DOOR
209B.	3' - 0"	8' - 0"	CASE OPENING
238.	2' - 10"	8' - 0"	INTERIOR SWING DOOR

Window Schedule				
Type Mark	Width	Height	Count	Comments
B.	2' - 8"	6' - 8"	2	DOUBLE HUNG
C.	2' - 9 1/2"	5' - 5"	2	DOUBLE HUNG
D.	11' - 0"	1' - 6"	1	FIXED
E.	2' - 11"	6' - 8"	1	DOUBLE HUNG
F.	2' - 8"	5' - 5 1/2"	8	DOUBLE HUNG W/ SAFETY GLAZING FOR WINDOWS NEAR STAIR
G.	4' - 0"	5' - 0"	1	DOUBLE HUNG W/ SAFETY GLAZING
KK.	5' - 0"	1' - 6"	1	FIXED W/ SAFETY GLAZING

ROOM SCHEDULE NEW		ROOM SCHEDULE NEW	
Name	Number	Name	Number
1/2 HALF BATH_	105	BEDROOM 1 _	108
BATHROOM_	206	BEDROOM 2_	203
BATHROOM_	204	BEDROOM 3_	205
BATHROOM_	109	BEDROOM 4_	209
TOTAL BATHROOMS	3 1/2	TOTAL BEDROOMS	4

Notes:

All Dimensions To New Walls Are To Face
Of Stud Unless Otherwise Noted.

All Dimensions To Existing Walls Are To Face
Of Existing Wall Gypsum Unless Otherwise Noted

EXISTING WALL : _____

NEW WALL :

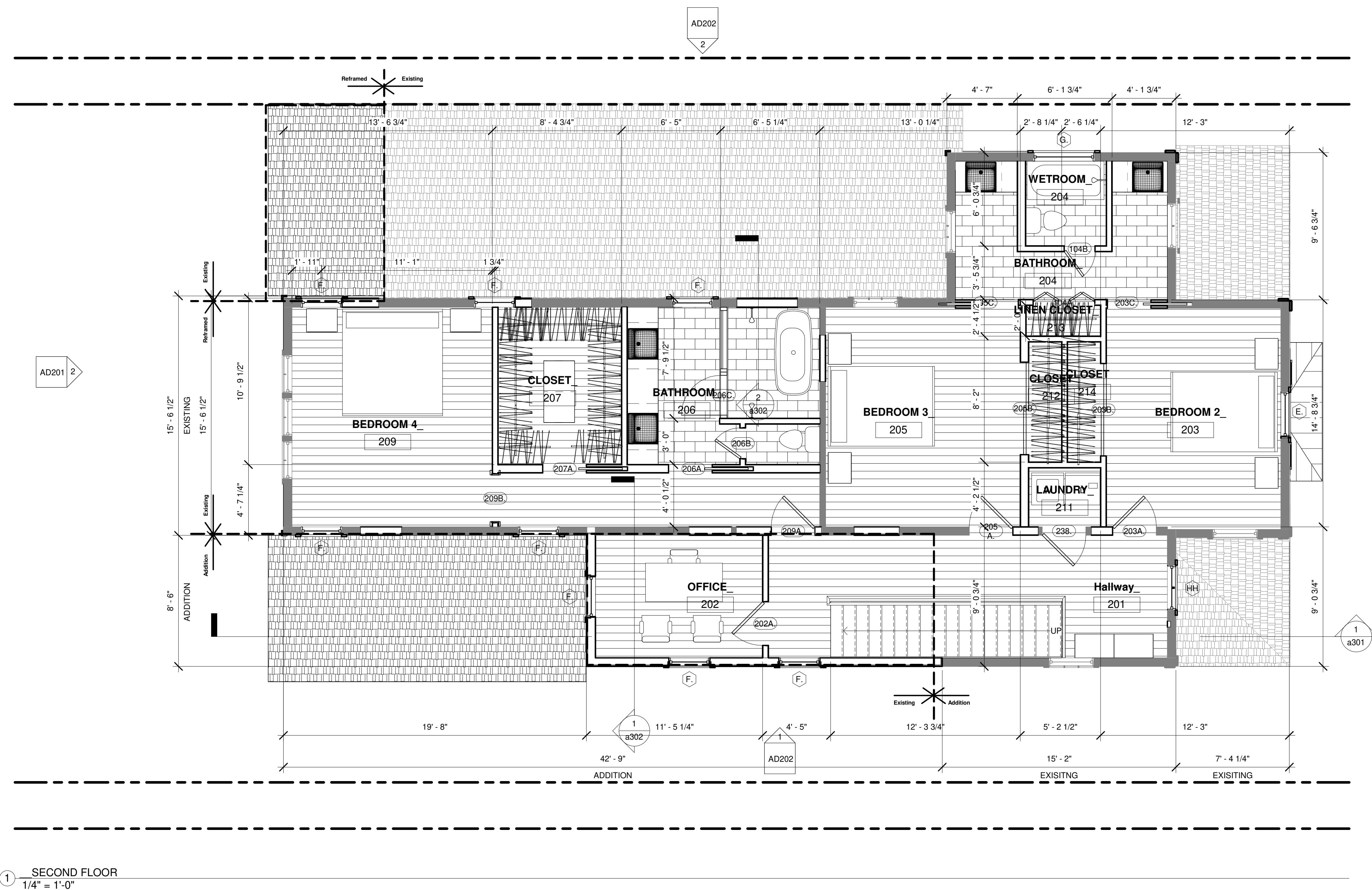


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Interior Renovation

Hillary St.

FIRST FLOOR PLAN



Notes:

All Dimensions To New Walls Are To Face Of Stud Unless Otherwise Noted.

All Dimensions To Existing Walls Are To Face
Of Existing Wall Gypsum Unless Otherwise Noted.

stair notes:

1. treads 10" minimum toe to toe
 2. risers 7 3/4" maximum
 3. handrails 2'-10"
 4. (3) 2x12 stringers
 5. 3-7/8" max spacing between balusters



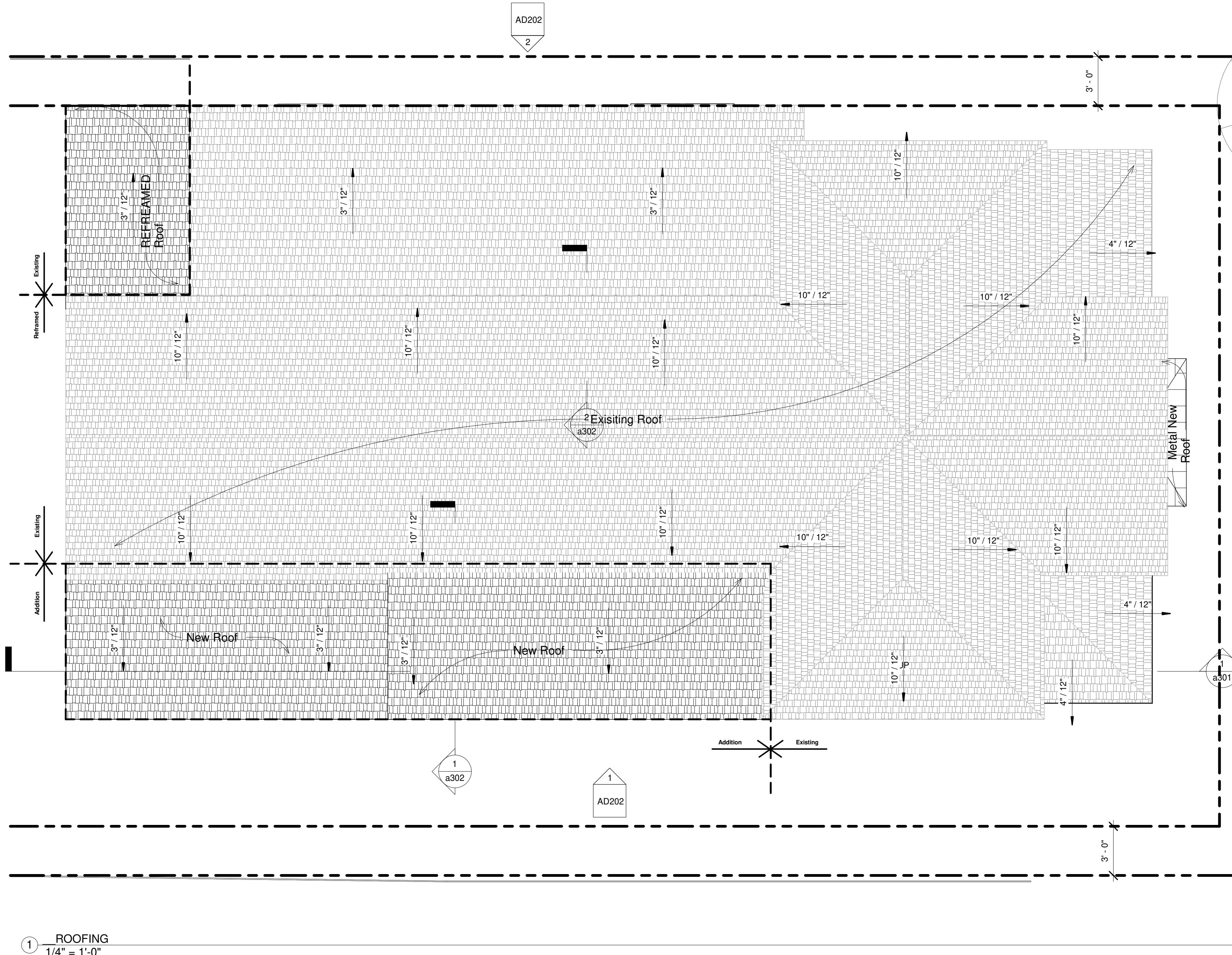
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SECOND FLOOR PLAN

2024.23



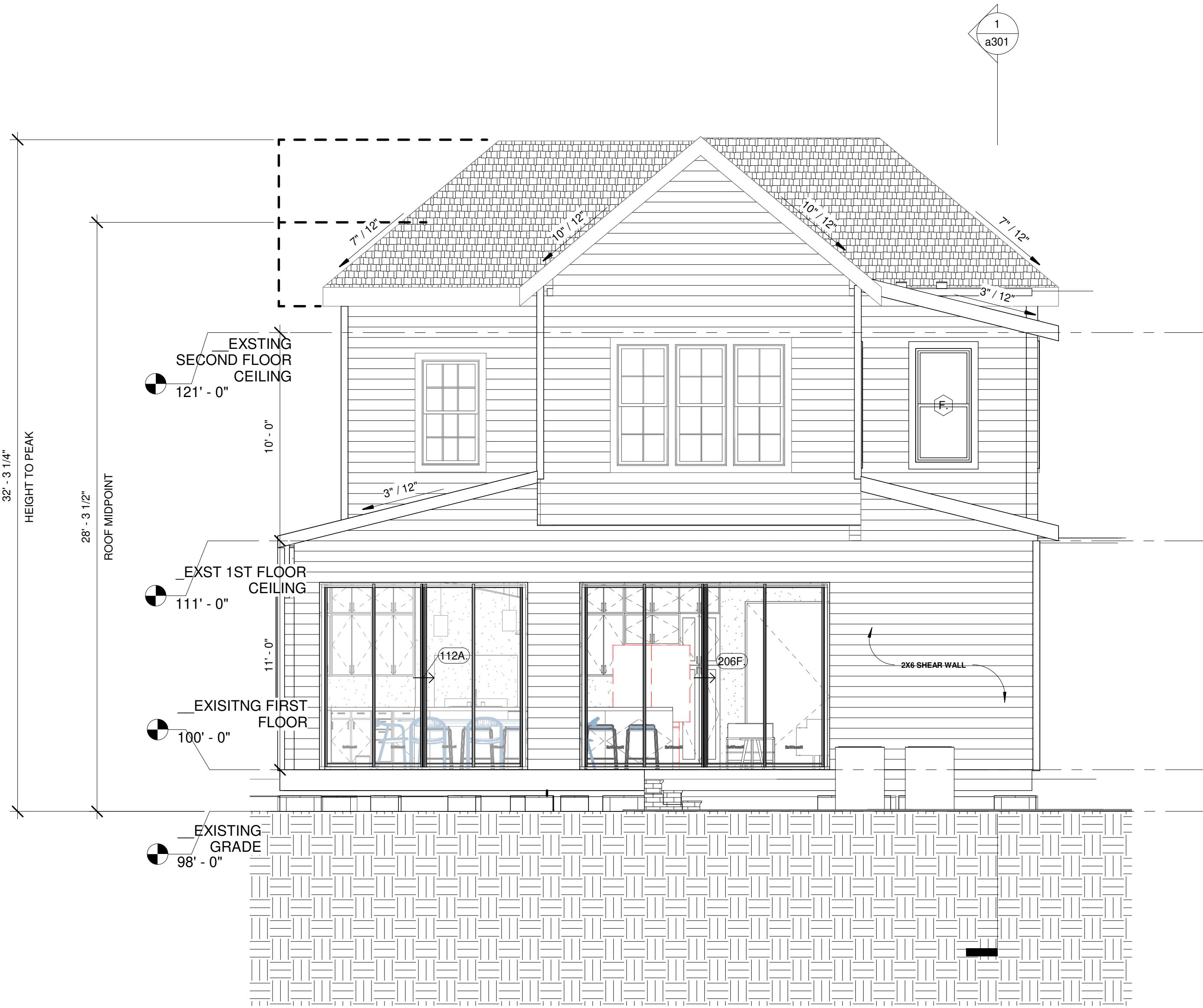
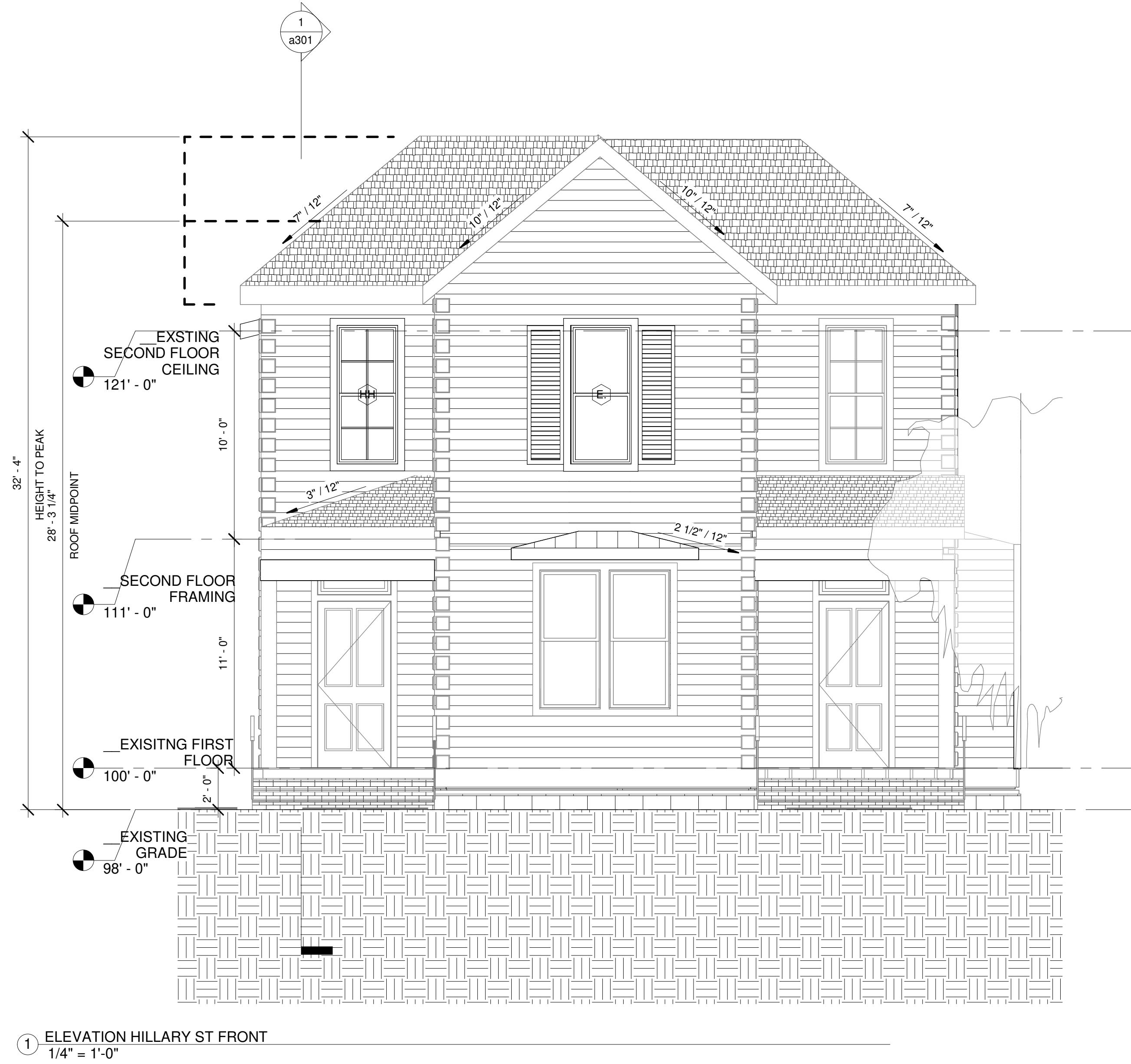
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Roof Plan

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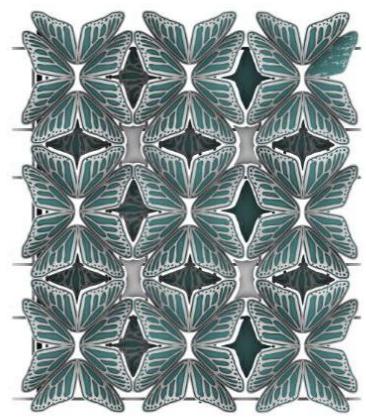
Hillary St.

EXTERIOR ELEVATIONS



stair notes:

1. treads 10" minimum toe to toe
2. risers 7 3/4" maximum
3. handrails 2'-10"
4. (3) 2x12 stringers
5. 3-7/8" max spacing between balusters



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No.	Description	Date
2	CM 1	06.12.2024
3	STRUCTURAL REDLINES SET	12.26.2024
4	PERMITTING COMMENTS	01.03.2025

Interior Renovation

Hillary St.

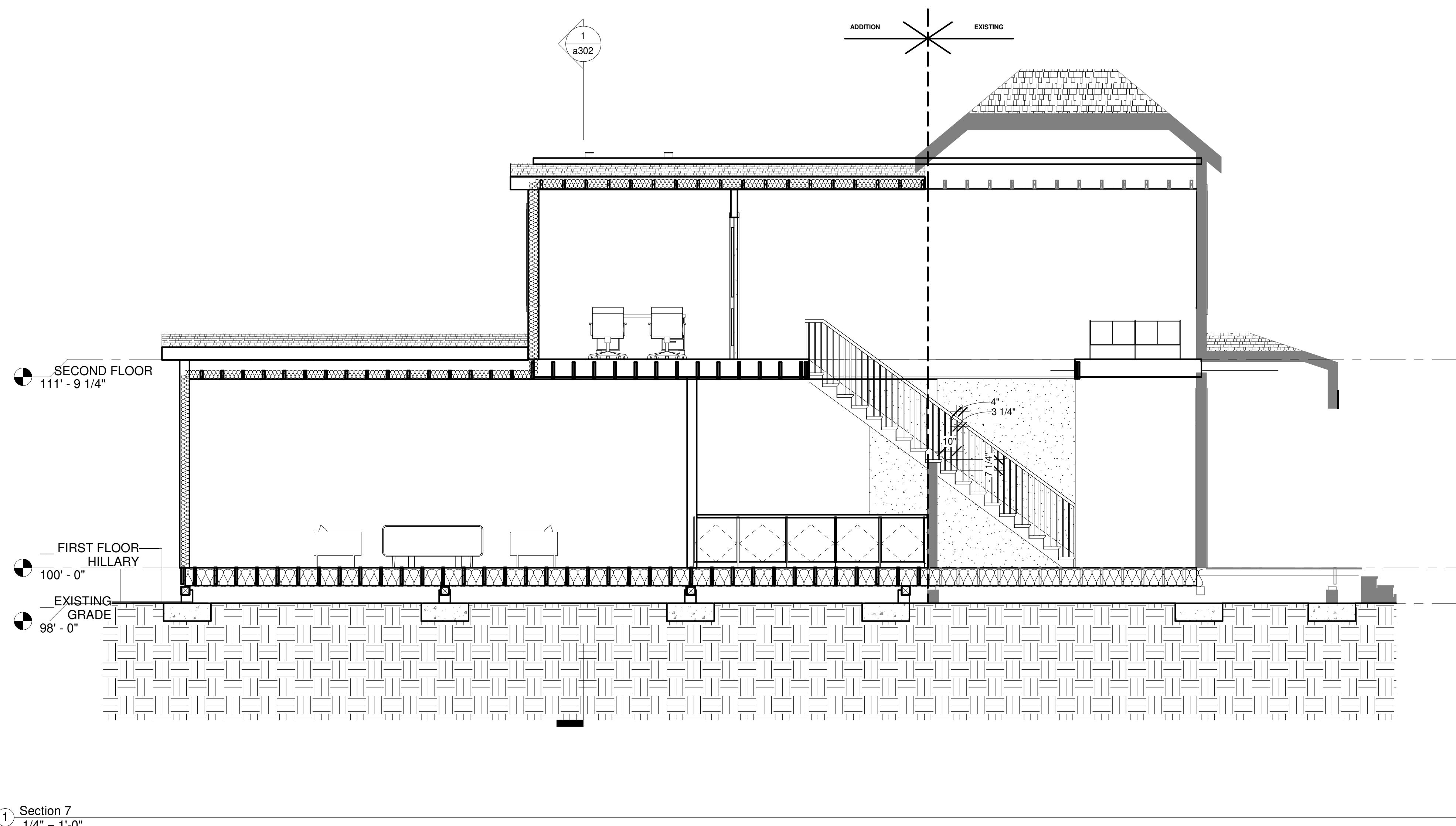
EXTERIOR
ELEVATIONS



2024.23

stair notes:

1. treads 10" minimum toe to toe
 2. risers 7 3/4" maximum
 3. handrails 2'-10"
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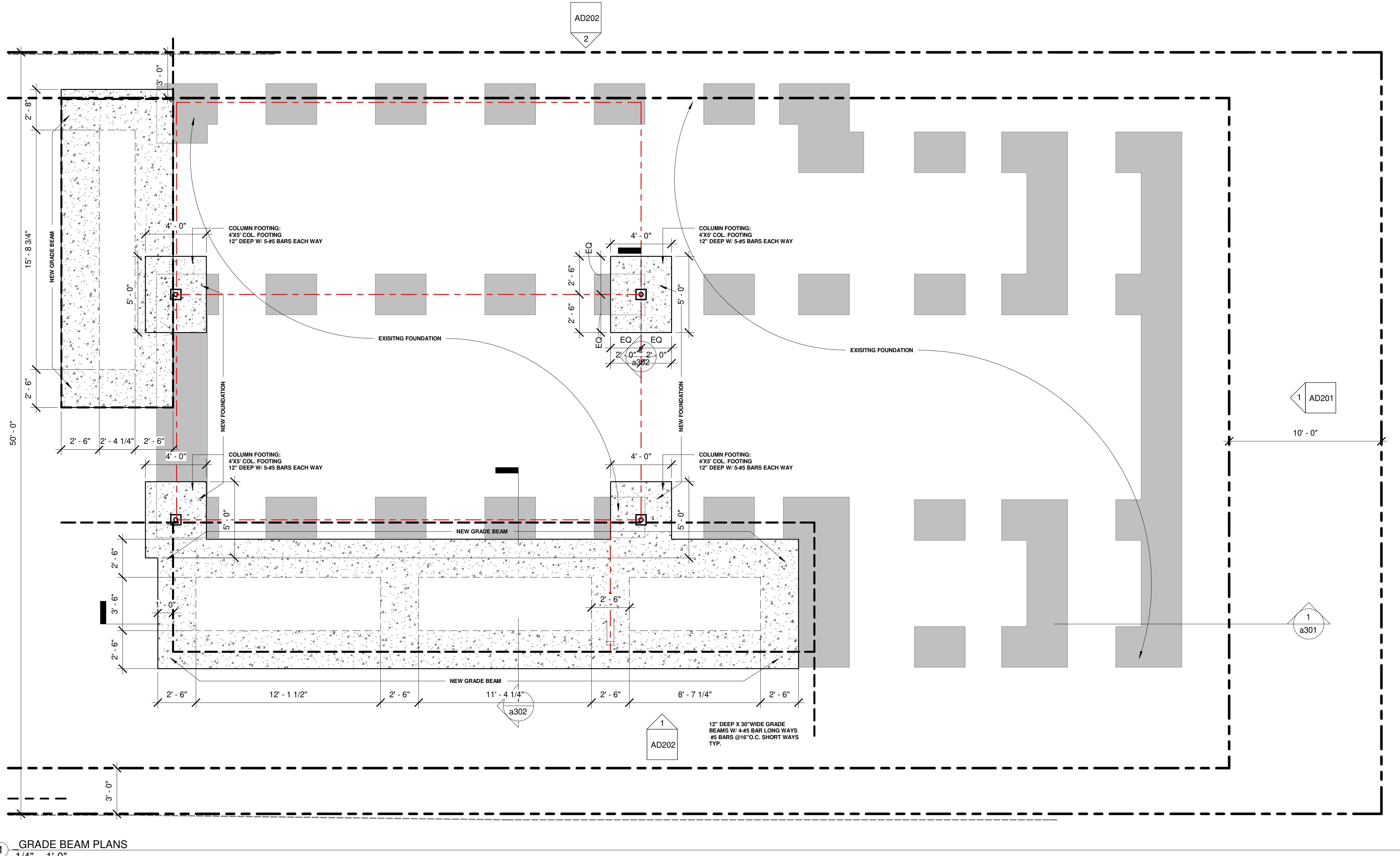
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Interior Renovation

Hillary St.

Building Sections

2024.23



**1 GRADE BEAM PLANS
1/4" - 1'-0"**

FOUNDATION NOTES:

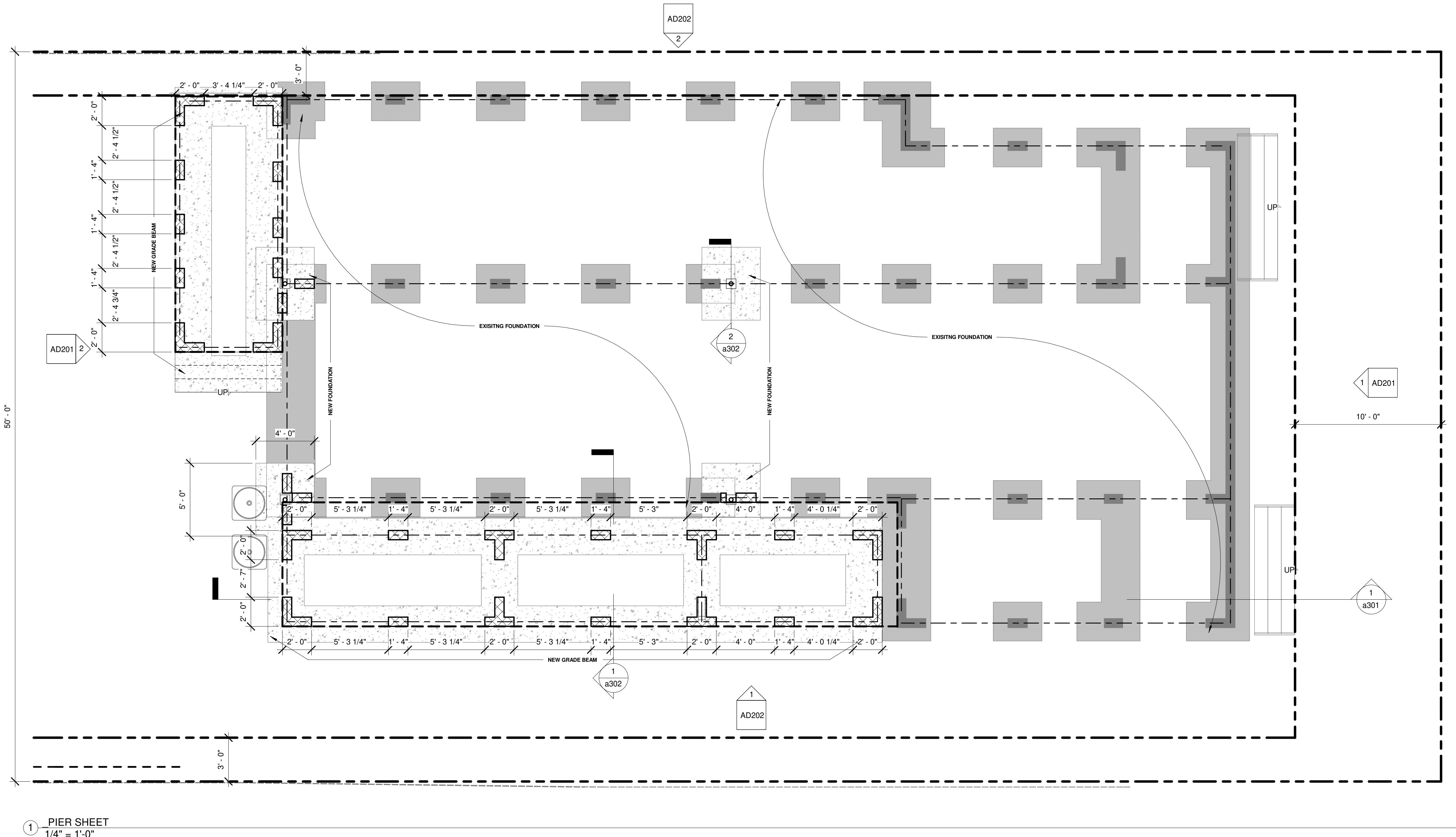
- 1) CONCRETE SHALL BE 3000 PSI AT 28 DAYS WITH 5" MAXIMUM SLUMP.
 - 2) REINFORCEING STEEL SHALL BE A.S.T.M A615 GRADE 60. WELDED WIRE FABRIC W.W.F SHALL CONFORM TO A.S.T.M. A185 REQUIREMENTS.
 - 3) FOUNDATION SLAB SHALL BE 4" THICK WITH 6X12 0/1 W.W.F REINFORCEMENTS. PROVIDE 12" OVERLAP BETWEEN SHEETS OF W.W.F. WHERE REQUIRED.
 - 4) GRADE BEAMS ARE ARE 2'6" WIDE X 12" DEEP WITH (4) #5 BARS CONT. LONG WAY AND #5 BAR @ 16" O.C. SHORT WAY. WHERE NECESSARY LAPSLICE BARS WITH 24" LAPS. PROVIDE FOUR CORNER BARS AT ALL CORNERS. BARS SHALL HAVE 2" COVER ON GRADE BEAM SIDES AND 3" COVER GRADE BEAM BOTTOMS.
 - 5) CHECK PIER PLAN AND SECTIONS FOR LOCATION OF ANCHOR BOLTS AND SLOPES, ECT.
 - 6) ALL FILL TO BE THOROUGHLY COMPACTED PUMPED RIVER SAND.
 - 7) PROVIDE TERMITE TREATMENT PER CODE.
 - 8) MAXIMUM SOIL BERRING PRESSURE= 800 PSF.

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Hillary St.

GRADE BEAM SHEET



PIER FOUNDATION NOTES:

- 1) CONCRETE BLOCK (CMU) SHALL BE 8X8X16 HALLOW LOAD BEARING LIGHTWEIGHT MODULAR BLOCKS ASTM C 90, TYPE I, GRADE N-1.
 - 2) MOTAR SAHLL BE ASTM C270, TYPE M OR S.
 - 3) CONCRETE FOR FILLING BLOCK SHALL BE 2,500 PSI PEA GRAVEL CONCRETE.
 - 4) PROVIDE ONE #5 BAR VERTICAL EACH PIER, THREE AT TEE'S AND CORNERS. PROVIDED HORIZONTAL WALLS REINFORCING EVERY OTHER COURSE IN CMU WALL.
 - 5) FILL ALL CELLS IN PIERS WITH CONCRETE.

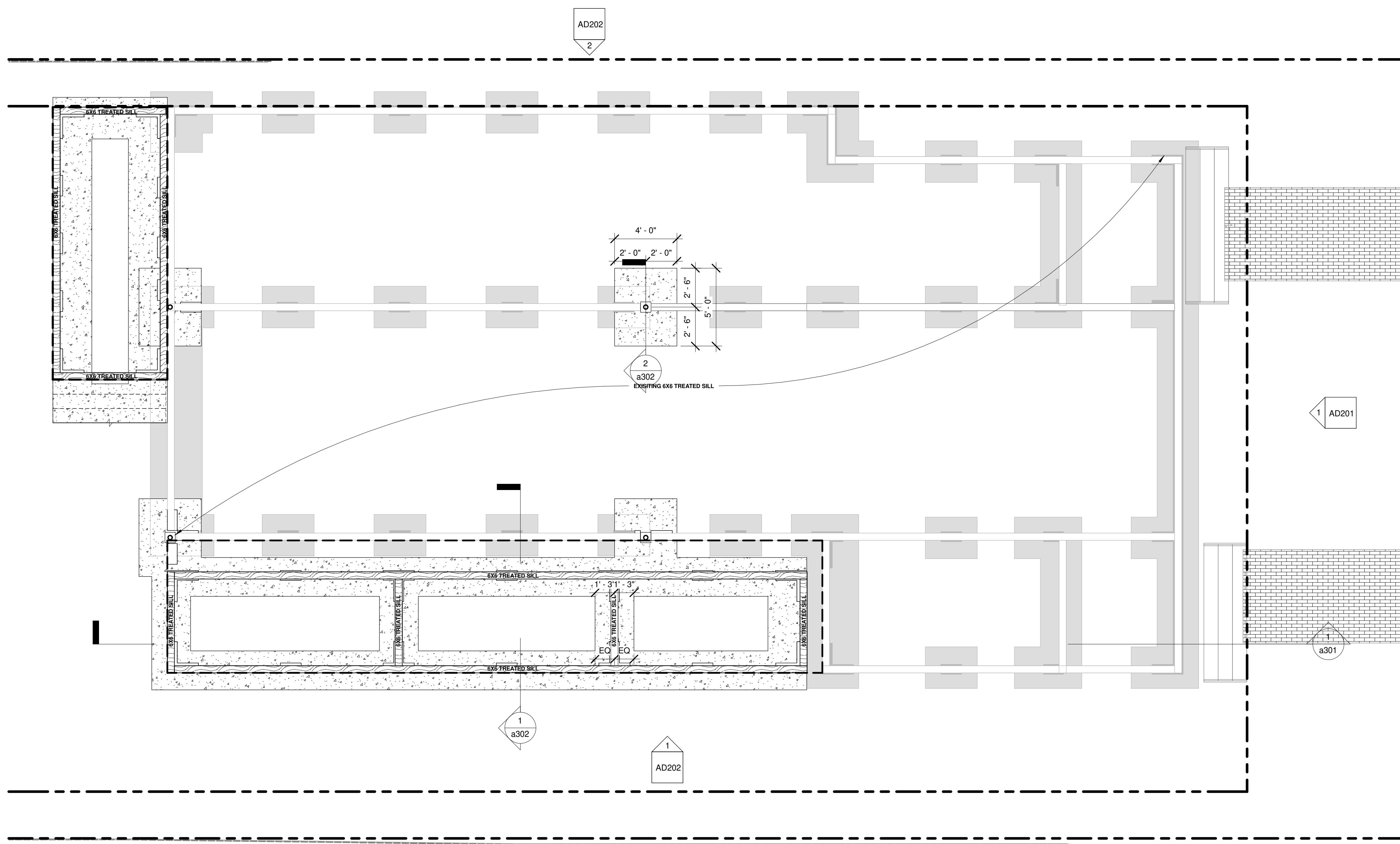
Interior Renovation

Hillary St.

PIER SHEET

2024.23

s102



SILL PLANS

1/4" = 1'-0

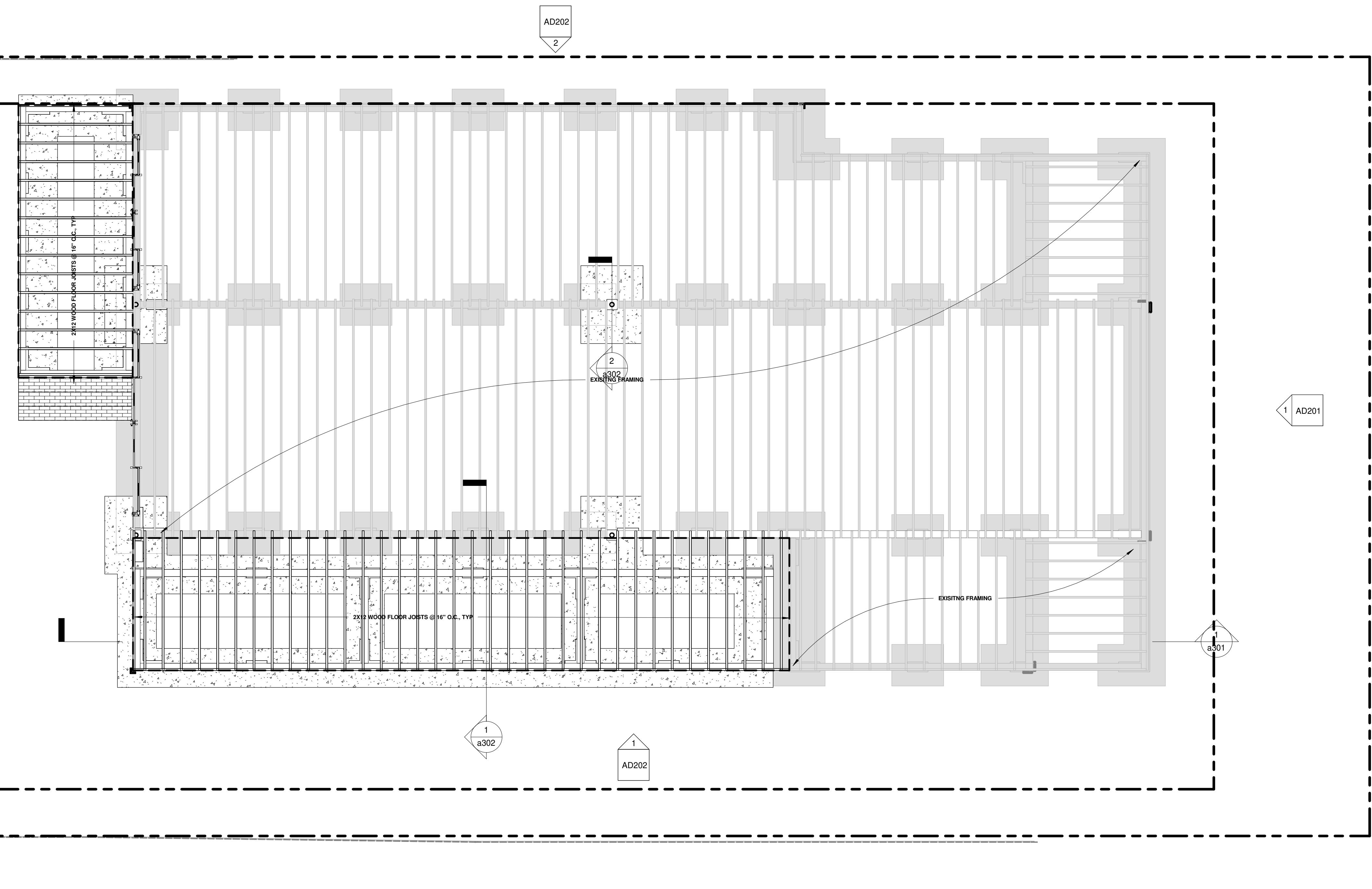
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Hillary St.

SILL SHEET

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**1 FIRST FLOOR FRAMING
1/4" = 1'-0"**

Framing Notes:

1. provide double joists under walls parallel to joist span.
 2. provide solid blocking below bearing walls perpendicular to joist span.
 3. provide rows of bridging @ 8'-0" o.c. [max] for joists spans over 10'-0"
 4. provide solid blocking below columns.

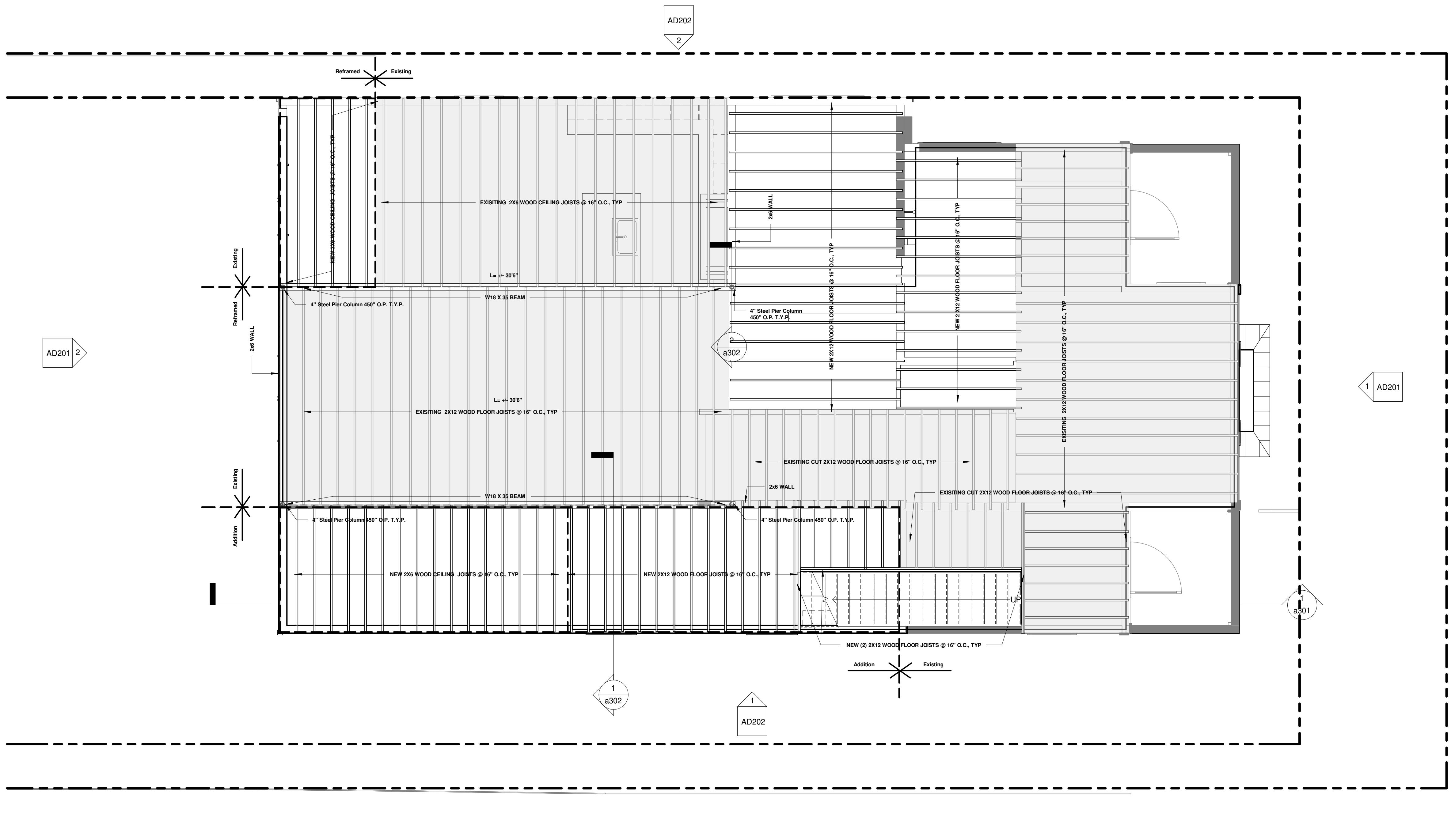
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Hillary St.

Framing Plans_First Floor Joist

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1 SECOND FLOOR FRAMING
1/4" = 1'-0"

Framing Notes:

1. provide double joists under walls parallel to joist span.
 2. provide solid blocking below bearing walls perpendicular to joist span.
 3. provide rows of bridging @ 8'-0" o.c. [max] for joists spans over 10'-0"
 4. provide solid blocking below columns.

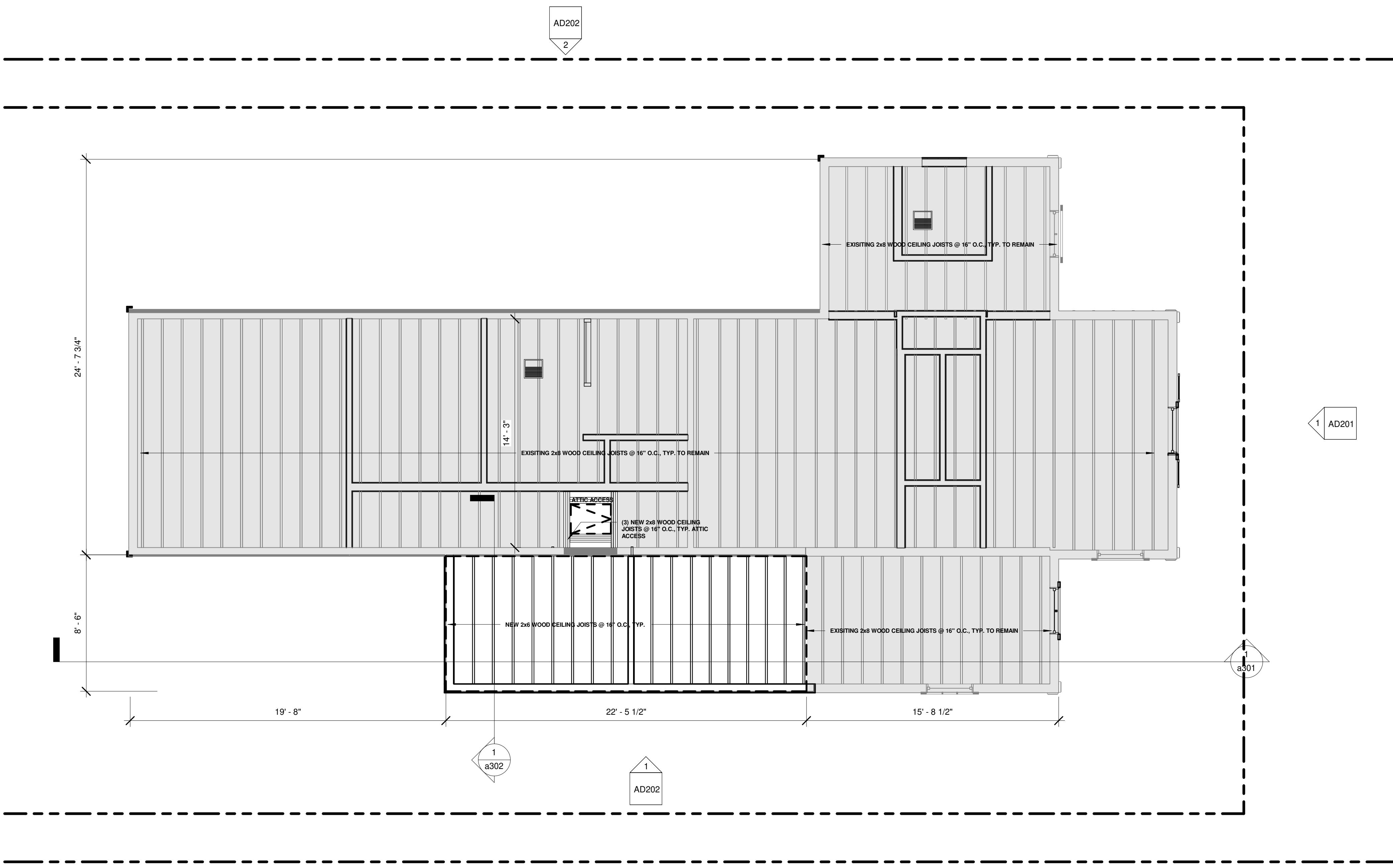
 framing notes
12" = 1'-0"

Interior Renovation

Hillary St.

Framing Plans Second Floor Joist

2024.23



1 PROPOSED CEILING SECOND
1/4" = 1'-0"

wind load connectors

location	type	loads
roof rafters to top plate	simpson h 10 A each rafter	required allowable 678 # 1,140 #
top plate to studs 2nd story studs	1/2" windstorm o.s.b. top plate to stud 2 row 8d nails @4.5" staggered	required allowable 339 plf 347 plf
2nd story studs to 2x12 band @ second floor	1/2" windstorm o.s.b. 2 rows w/ 8d nails @ 5" o.c. staggered	required allowable 339 plf 347 plf
first story studs to band joist @ first floor	1/2" windstorm o.s.b. 2 rows w/ 8d nails @ 5" o.c. staggered	required allowable 273 plf 312 plf
first story studs to band joist @ first floor	1/2" windstorm o.s.b. 2 rows w/ 8d nails @ 5" o.c. staggered	required allowable 273 plf 312 plf
band joist to to 6x6 sill	1/2" windstorm o.s.b. w/ 2 rows 8d nailes @ 6" o.c.	required allowable 213 p 260 plf
6x6 sill to cmu piers	5/8th x 24" anchor bolt w/ 2 oversize washer and 2 hex nuts, each pier	required allowable 1,278 # 2,520 #
cmu piers to concrete footings	1- #5bar x 36" long each pier	required allowable 1,218 # 3,720 #

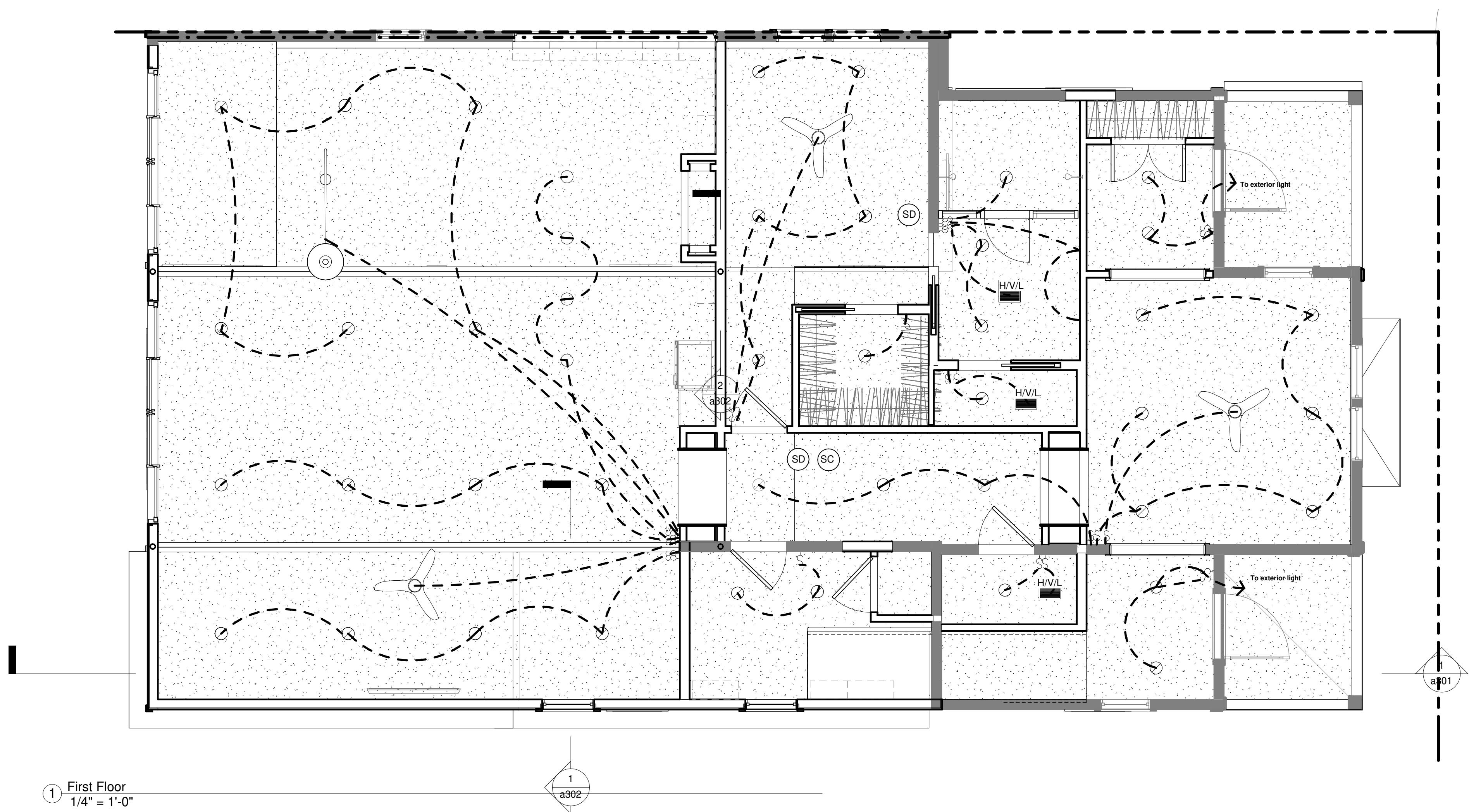
wind load connectors
12" = 1'-0"

Interior Renovation

Hillary St.

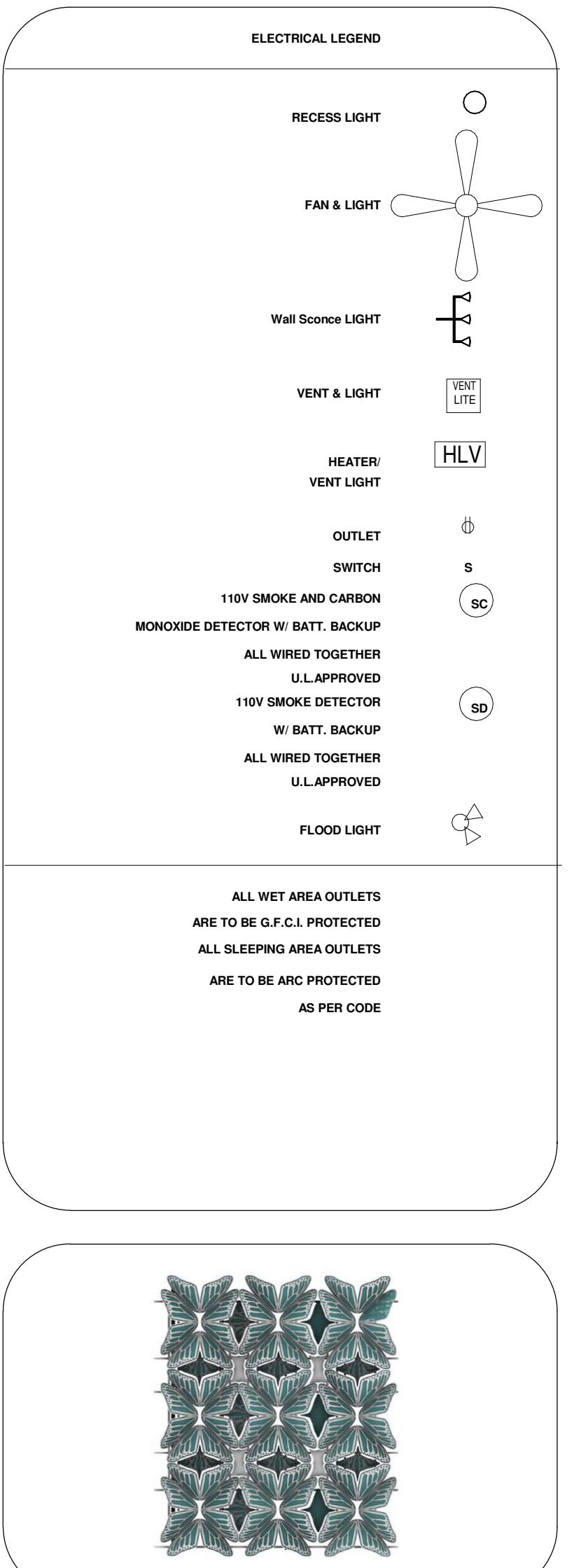
Framing Plans Addition Ceiling Framing

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1 First Floor
1/4" = 1'-0"

a302



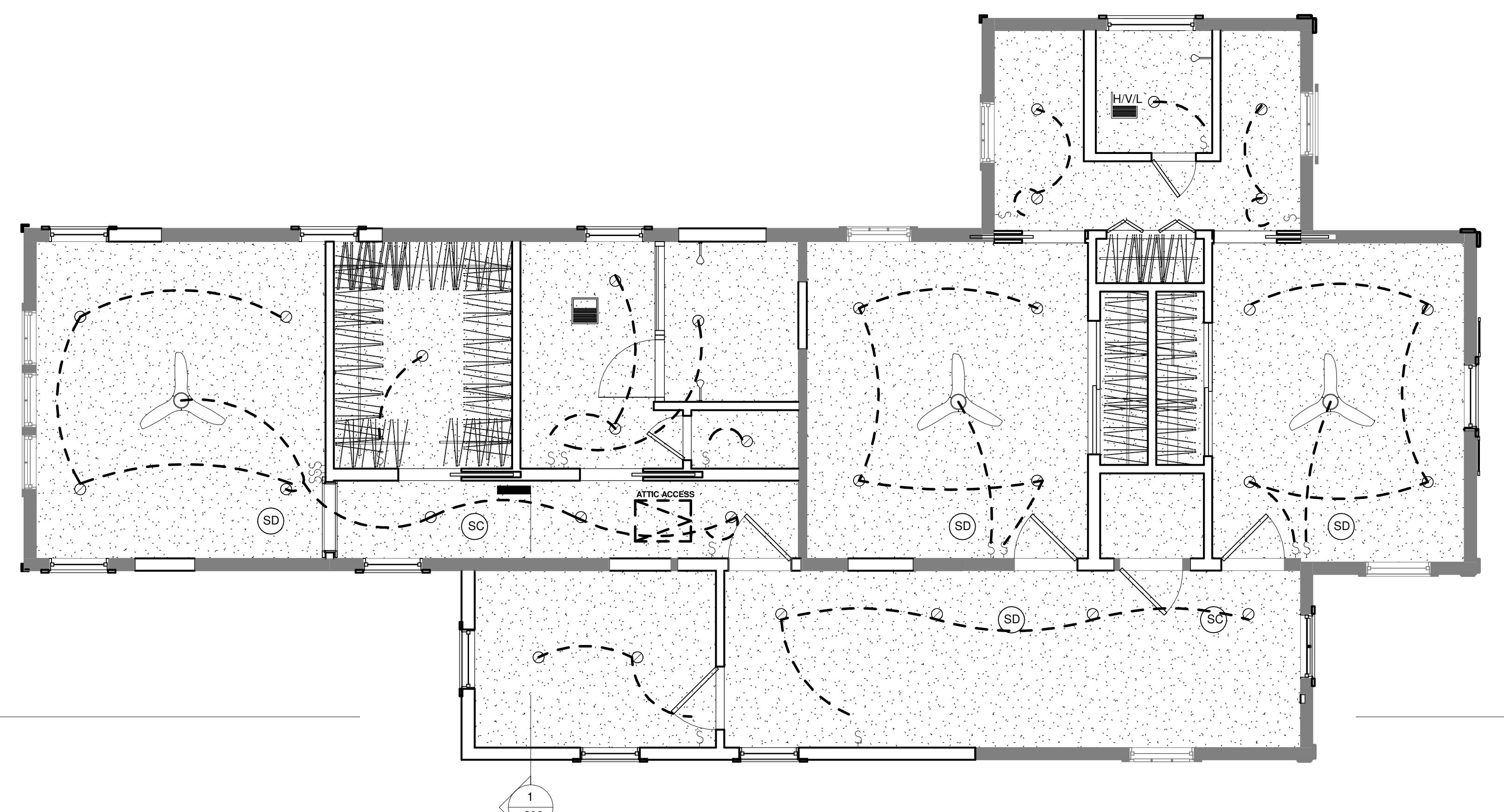
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Hillary St.

electrical plan

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4 SECOND FLOOR ELECTRICAL PLAN
1/4" = 1'-0"

8

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