ELEVATION CERTIFICATE

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name: DUANE DUASE

A2. Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No.: 3612 CLUSTER LANE

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.):
LOT 6, PH II BLOCK E, WHISPERING PINES SUBDIVISION, TMS: 172-26-01-030

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): RESIDENTIAL

A5. Latitude/Longitude: Lat. 33°42'42" Long. 079°37'24"

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number:

A8. For a building with a crawl space or enclosure(s):
   a) Square footage of crawl space or enclosure(s) N/A sq ft
   b) No. of permanent flood openings in the crawl space or enclosure(s) within 1.0 foot above adjacent grade N/A
   c) Total net area of flood openings in A8.b N/A sq in
   d) Engineered flood openings? □ Yes □ No

A9. For a building with an attached garage:
   a) Square footage of attached garage N/A sq ft
   b) No. 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? □ Yes □ No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. National Flood Insurance Program (NFIP) Community Name & Community Number: CITY OF MYRTLE BEACH 450109

B2. County Name: HORR COUNTY

B3. State: SC

B4. Map/Panel Number: 4998/2C879

B5. Suffix: H

B6. FIRM Index Number: Effective/Revised Date: 9-17-2003 / 8-23-99

B8. Flood Zone: "AE"


B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item 89:
□ FIS Profile □ FIRM □ Community Determined □ Other (Describe) ______

B11. Indicate elevation data used for BFE in Item 89: □ NGVD 1929 □ NAVD 1988 □ Other (Describe) ______

B12. Is the building located in a Coastal Barrier Resource System (CBRS) area or Otherwise Protected Area (OPA)? □ Yes □ No

Designation Date: N/A

CBRS □ OPA

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.


Conversion/Comments N/A

a) Top of bottom floor (including basement, crawl space, or enclosure floor) 15.62 □ feet □ meters (Puerto Rico only)

b) Top of the next higher floor N/A □ feet □ meters (Puerto Rico only)

c) Bottom of the lowest horizontal structural member (V Zones only) N/A □ feet □ meters (Puerto Rico only)

d) Attached garage (top of slab) N/A □ feet □ meters (Puerto Rico only)

e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 15.72 □ feet □ meters (Puerto Rico only)

f) Lowest adjacent (finished) grade next to building (LAG) 11.20 □ feet □ meters (Puerto Rico only)

g) Highest adjacent (finished) grade next to building (HAG) 11.46 □ feet □ meters (Puerto Rico only)

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 11.89 □ feet □ meters (Puerto Rico only)

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.

□ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? □ Yes □ No

Certifier's Name: KENNETH D. JORDAN
License Number: 219367
Title: REGISTERED LAND SURVEYOR
Company Name: K & R LAND SURVEYORS, INC.
Address: 1320-D HWY 501 BUSINESS
City: CONWAY
State: SC
ZIP Code: 29526
Telephone: 843-241-7842

Signature: 9-29-09

License Number: 219367

Signature: 9-29-09

License Number: 219367
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

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

Comments: THE LOWEST PIECE OF MACHINERY SERVICING THE BUILDING IS THE A/C PAD.

[Signature]
Kenneth D. [Name]

Date 9-29-09

[Check here if attachments]

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

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 _______ 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 8-9 with permanent flood openings provided in Section A, Items 8 and 9 (see pages 8-9 of instructions), the next higher floor (elevation C2 is in the diagrams) 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 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’s or Owner’s Authorized Representative’s Name

Address

[Signature]

Date

City

State

ZIP Code

Comments

[Check here if attachments]

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

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 and G9.

G1. □ 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.)
G2. □ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
G3. □ The following information (Items G4-G8) is provided for community floodplain management purposes.

G4. Permit Number

G5. Date Permit Issued

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 basement) of the building: _______ feet _______ meters (PR) Datum

G9. BFE or (in Zone AO) depth of flooding at the building site: _______ feet _______ meters (PR) Datum

G10. Community’s design flood elevation: _______ feet _______ meters (PR) Datum

Local Official’s Name

[Signature]

Comments

Title

Telephone

Date

Comments
Horry County Code Enforcement
1301 2nd Ave Suite 1D09
Conway, SC 29526

MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

In accordance with this community's participation in the National Flood Insurance Program's Community Rating System, all FEMA Elevation Certificates must be correct and complete. The attached Certificate has some incorrect items which are noted here.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name: DUANE DUISIT

A2. Building Street Address (Including Apt., Unit, Suite, and/or Building No.) or P.O. Route and Box No.: 3612 CLUSTER LN.

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): MYALL BEACH SC 29579

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): ______

A5. Latitude/Longitude: Lat ______ Long ______

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number: ______

A8. For a building with a crawl space or enclosure(s), provide:
   a) Square footage of crawl space or enclosure(s) ______ sq ft
   b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade ______
   c) Total net area of flood openings in A8b ______ sq in
   d) Engineered flood openings? Yes ______ No ______

A9. For a building with an attached garage, provide:
   a) Square footage of attached garage ______
   b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade ______
   c) Total net area of flood openings in A9b ______ sq in
   d) Engineered flood openings? Yes ______ No ______

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number: Horry County 450104

B2. County Name:______

B3. State:______

B4. Map/Panel Number:______

B5. Suffix:______

B6. FIRM Index Date:______

B7. FIRM Panel Effective/Revised Date:______

B8. Flood Zone(s):______

B9. Base Flood Elevation:______

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in item B9.

□ PLS Profile □ FIRM □ Community Determined □ Other (Describe) ______

B11. Indicate elevation datum used for BFE in item B9: ______

□ NGVD 1929 □ 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

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: □ Construction Drawings* □ Building Under Construction* □


Complete Items C2 a-h below according to the building diagram specified in Item A7.

Benchmark Utilized ______ Vertical Datum ______

□ Indicate elevation datum used for the elevations in items a) through h) below. □ NGVD 1929 □ NAVD 1988 □

Other/Source: ______

COMMENTS:______

B1 Incorrect Community Name & Number ______

Date of Review: 2/27/2015 Community Official: ______

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.