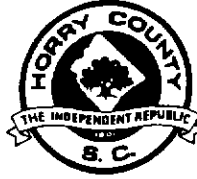


Horry County Code Enforcement

1301 2nd Ave Suite 1D09
Conway, SC 29526



Permit
165296

Phone: (843) 915-5090
(843) 205-5090

Fax: (843) 915-6090

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		For Insurance Company U
A1. Building Owner's Name <i>Mary Jordan</i>	Policy Number	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <i>4533 Bottle Branch Rd</i>	Company NAIC Number	
City <i>Conway</i> State <i>SC</i> ZIP Code _____		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <i>TMS 120 00 02 120</i>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) _____		
A5. Latitude/Longitude: Lat. _____ Long. _____		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <i>2</i>		
A8. For a building with a crawl space or enclosure(s), provide		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) _____ sq ft		a) Square footage of attached garage _____ sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____		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 A8.b _____ sq in		c) Total net area of flood openings in A9.b _____
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		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		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 (use base flood de

- B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
 FIS 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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input type="checkbox"/> 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.			
Benchmark Utilized _____		Vertical Datum _____	
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____			

COMMENTS:

A9 + A8 Incomplete

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

ELEVATION CERTIFICATE

*PK
Krohn
4-27*

Form No. 1680-0008
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name: MARY JORDAN

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 4833 BOTTLE BRANCH RD

City: COMMA State: SC ZIP Code: 29527

A3. Property Description (Lot and Block Numbers, Lot Parcel Number, Legal Description, etc.): 2000 28 120

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

A5. Latitude/Longitude: Lat. _____ Long. _____ Horizontal Datum: NAD 1927 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: 5

A8. For a building with a crawlspace or enclosure(s):
 a) Square footage of crawlspace or enclosure(s): 1500 sq ft
 b) No. 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? 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: _____
 c) Total net area of flood openings in A9.b: _____ sq in
 d) Engineered flood openings? Yes No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. FIRM Community Name & Community Number: 450104 Harry B2. County Name: Harri B3. State: SC

B4. Map/Panel Number: 4505K0500 B5. Sheet: H B6. FIRM Issue Date: 9-17-03 B7. FIRM Panel Effective/Revised Date: 8-23-99 B8. Flood Zone(s): A B9. Base Flood Elevation(s) (Zone AD, use base flood depth): Unshaded

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:
 RB Profile FIRM Community Determined Other (Describe) _____

B11. Indicate elevation datum used for BFE in Item B9: NGVD 1928 NAVD 1988 Other (Describe) _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?
 Designation Date: _____ CBRS OPA Yes No

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 - Series A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AD. Complete items C2a-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.
 Benchmark Utilized: _____ Vertical Datum: _____
 Conversion/Comments: _____

Check the measurement used.

a) Top of lowest floor (including basement, crawlspace, or enclosure floor) _____ feet meters (Puerto Rico only)

b) Top of the next higher floor _____ feet meters (Puerto Rico only)

c) Bottom of the lowest horizontal structural member(s) (Zones only) _____ feet meters (Puerto Rico only)

d) Attached garage (top of slab) _____ feet meters (Puerto Rico only)

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

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

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

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____ 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: _____ License Number: _____

Title: _____ Company Name: _____

Address: _____ City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____ Telephone: _____

PLACE SEAL HERE

Mary Jordan
MARY JORDAN 4/24/12

IMPORTANT: In these spaces, copy the corresponding information from Section A.

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

City

State

ZIP Code

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

Signature

Date

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 this Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For items E1-EA, 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 indicate 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 3 feet meters above or below the HAG.
 - b) Top of bottom floor (including basement, crawlspace, or enclosure) is 3 feet meters above or below the LAG.
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section 4, items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.8 in the diagrams) of the building is 3 feet meters above or below the HAG.
- E3. Attached garage (top of slab) is N/A feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is 3 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

MARY JORDAN

Address

4833 BOTTLE BRANCH RD

City

State

ZIP Code

29527

SC 29527

Date

4/24/12

Telephone

813-465-7701

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 items 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-G9) 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: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement		
G8. Elevation of 66-inch lowest floor (including basement) of the building	<input type="checkbox"/> feet <input type="checkbox"/> meters (PR)	Datum
G9. BFE or (in Zone AO) depth of flooding at the building site	<input type="checkbox"/> feet <input type="checkbox"/> meters (PR)	Datum
G10. Community's design flood elevation	<input type="checkbox"/> feet <input type="checkbox"/> meters (PR)	Datum

Local Official's Name _____ Title _____
 Community Name _____ Telephone _____
 Signature _____ Date _____
 Comments _____

Check here if attachments

Mary Jordan