



**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 <u>Lisa Jones Burton</u>		For Insurance Company Use: Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>403 South Waccamaw Dr.</u>		Company NAIC Number
City <u>MURFREESBORO</u>	State <u>MS</u>	ZIP Code <u>38856</u>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)		

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) \_\_\_\_\_

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 \_\_\_\_\_

A8. For a building with a crawl space or enclosure(s), provide

a) Square footage of crawl space or enclosure(s) _____ sq ft	A9. For a building with an attached garage, provide:
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____	a) Square footage of attached garage _____ sq ft
c) Total net area of flood openings in A8.b _____ sq in	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <u>N/A</u>
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	c) Total net area of flood openings in A9.b <u>N/A</u> 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		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(s) (Zone AO, use base flood depth)

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:  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.  
Benchmark Utilized \_\_\_\_\_ Vertical Datum \_\_\_\_\_

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

**COMMENTS:**

A9 Incomplete

Date of Review: 3/10/2015 Community Official: Harold Edge

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

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## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <u>Lisa Jones Bruorton</u>		For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>403 South Waccamaw Drive</u>		Policy Number
City <u>Murrells Inlet</u> State <u>SC</u> ZIP Code <u>29576</u>		Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>Parcel A of Lot 11, Block 22, Garden City TMS 198-01-03-006</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>N 33-34-23.3</u> Long. <u>W 079-00-07.4</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>5</u>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <u>0</u> sq ft		a) Square footage of attached garage <u>NA</u> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u>		b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>NA</u>
c) Total net area of flood openings in A8.b <u>0</u> sq in		c) Total net area of flood openings in A9.b <u>NA</u> sq in
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <u>Horry County 450104</u>		B2. County Name <u>Horry</u>		B3. State <u>SC</u>	
B4. Map/Panel Number <u>45051C0734</u>	B5. Suffix <u>H</u>	B6. FIRM Index Date <u>09/17/03</u>	B7. FIRM Panel Effective/Revised Date <u>08/23/99</u>	B8. Flood Zone(s) <u>VE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>17</u>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
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					

## 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.

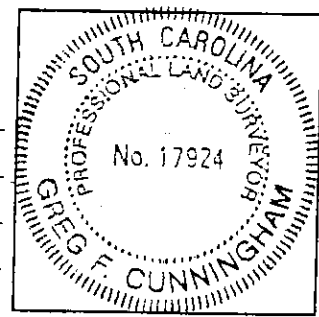
C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.  
Benchmark Utilized NGS "Hardee" Vertical Datum NGVD 1929  
Conversion/Comments \_\_\_\_\_

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>22.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>32.8</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>19.2</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>NA</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>19.8</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG)	<u>10.2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG)	<u>10.7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>10.3</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)

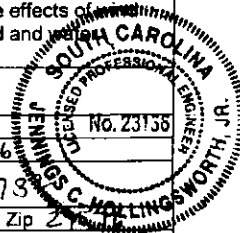
## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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 <u>Greg F. Cunningham</u>	License Number <u>S.C.P.L.S. 17924</u>
Title <u>Professional Land Surveyor</u>	Company Name <u>Cunningham Land Surveying, LLC</u>
Address <u>6004 Highmarket Street</u>	City <u>Georgetown</u> State <u>SC</u> ZIP Code <u>29440</u>
Signature <u>[Signature]</u>	Date <u>03/11/13</u> Telephone <u>843-340-1681</u>



V-Zone Certification					
Property Information			For Insurance Company Use		
Name of Building Owner <i>LISA JONES REHOUTON</i>			Policy Information		
Building Address or Other Description <i>405 S. WACCAWALL DR</i>					
City <i>GARDEN CITY</i>		State <i>SC</i>		Zip <i>29576</i>	
SECTION I: FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
<i>Note: To be obtained from appropriate FIRMs</i>					
Community No. <i>10224</i>	Panel No. <i>460104</i>	Suffix <i>4</i>	Date of FIRM Index <i>9.17.03</i>	FIRM Zone <i>VE17</i>	
SECTION II: ELEVATION INFORMATION					
<i>Note: This form is not a substitute for an Elevation Certificate. Elevations should be rounded to nearest tenth of a foot.</i>					
1. Elevation of the Bottom of Lowest Horizontal Structure Member			<i>18</i> feet		
2. Base Flood Elevation			<i>17</i> feet		
3. Elevation of Lowest Adjacent Grade			<i>10.5</i> feet		
4. Approximate Depth of Anticipated Scour/Erosion used for Foundation Design			<i>25</i> feet		
5. Embedment Depth of Pilings or Foundation Below Lowest Adjacent Grade			<i>10</i> feet		
6. Datum Used		<input checked="" type="checkbox"/> NGVD '29		<input type="checkbox"/> NAVD '88	
Other					
SECTION III: FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
<i>Note: This section must be certified by a registered professional engineer or architect.</i>					
I certify that I have developed or reviewed the structural design, plans and specifications for construction and that the methods of construction to be used are in accordance with accepted standards of practice for meeting the following provisions:					
<ul style="list-style-type: none"> <li>a) The bottom of the lowest horizontal structure member of the lowest floor (excluding the pilings or columns) is elevated to or above the BFE; and</li> <li>b) The pile or column foundation and structure attached thereto is anchored to resist flotation, collapse and lateral movement due to the effects of the wind and water loads acting simultaneously on all building components. Water loading values used are those associated with the base flood including wave action. Wind loading values used are those required by the applicable State or local building code. The potential for scour and erosion at the foundation has been anticipated for conditions associated with the flood, including wave action.</li> </ul>					
SECTION IV: FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
<i>Note: This section must be certified by a registered professional engineer or architect.</i>					
I certify that I have developed or reviewed the structural design, plans and specifications for construction and that the methods of construction to be used for the breakaway walls are in accordance with accepted standards of practice for meeting the following provisions:					
<ul style="list-style-type: none"> <li>c.) Breakaway collapse shall result from water load less than that which would occur during the base flood, and,</li> <li>d.) The structural design of the building and supporting foundation system shall not be subject to collapse, displacement, or other structural damage due to the effects of wind and water loads acting simultaneously on all building components (wind and water loading values defined in Section III).</li> </ul>					
SECTION V: CERTIFICATION					
<i>Note: Check Section III and/or Section IV</i>					
Name of Certifier <i>J. CROS HOLDINGS</i>			Title <i>P.E.</i>		
Firm Name <i>J. CROS HOLDINGS</i>			License No. <i>23136</i>		
Street Address <i>4045 DE ALBERTA</i>			Phone No. <i>(843) 357-873</i>		
City <i>MURRELLS INLET</i>			State <i>SC</i>		
Signature <i>[Signature]</i>			Date <i>11/21/2012</i>		



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<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	<b>For Insurance Company Use:</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 403 South Waccamaw Drive	Policy Number
City Murrells Inlet State SC ZIP Code 29576	Company NAIC Number

**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 C2, e) HVAC Pad

Signature 

Date 03/11/13

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 6-9 with permanent flood openings provided in Section A Items 6 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b 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 \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

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-G9) is provided for community floodplain management purposes.

G4. Permit Number _____	G5. Date Permit Issued _____	G6. Date Certificate Of Compliance/Occupancy Issued _____
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- 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 \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_