ELEVATION CERTIFICATE

Important: Read the instructions on pages 1–9.

SECTION A – PROPERTY INFORMATION

A1. Building Owner's Name: Retreat at Garden City, LLC

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
149 GC Retreat Drive

City: Murrells Inlet
State: SC
ZIP Code: 29576

A3. Property Description (Lot and Block Number, Tax Parcel Number, Legal Description, etc.)
Unit #13 of Retreat at Garden City HPR, PINE-70-06-02-0207

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

A5. Latitude/Longitude: Lat. 33°34'45" Long. 78°59'53"
Horizontal Datum: NAD 1927

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) NA sq ft
   b) Number of permanent flood openings in the crawl space or enclosure(s) within 1.0 foot above adjacent grade NA sq in
   c) Total net area of flood openings in A8.b NA sq ft
   d) Engineered flood openings? ☑ Yes ☒ No

A9. For a building with an attached garage:
   a) Square footage of attached garage NA sq ft
   b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade NA sq ft
   c) Total net area of flood openings in A9.b NA sq ft
   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
Horry

B3. State
SC

B4. Map/Panel Number
45051C0753

B5. Suffix
H

B6. FIRM Index Date
09/17/2003

B7. FIRM Panel Effective/Revised Date
08/23/1999

B8. Flood Zone(s)
VE

B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 17

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/Source: ________________

B11. Indicate elevation datum used for BFE in Item B9: ☑ NAVD 1929 ☐ NAVD 1988 ☐ Other/Source: ________________

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?
   Designation Date: NA
   ☐ 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.


Benchmark Utilized: SCCC 5005-B
Vertical Datum: NGVD 1929

Indicate elevation datum used for the elevations in items a) through h) below. ☑ NAVD 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) 19.79 ☑ feet ☑ meters

b) Top of the next higher floor 30.40 ☑ feet ☑ meters

c) Bottom of the lowest horizontal structural member (V Zones only) ☑ feet ☑ meters

d) Attached garage (top of slab) NA ☑ feet ☑ meters

e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 19.40 ☑ feet ☑ meters

f) Lowest adjacent (finished) grade next to building (LAG) 5.7 ☑ feet ☑ meters

g) Highest adjacent (finished) grade next to building (HAG) 6.22 ☑ feet ☑ meters

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 7.07 ☑ feet ☑ 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.C. 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: Jeffrey D. Solan, PE, PLS
License Number: 19407

Title: President
Company Name: Solan Associates, P.C.
Address: 212 Main Street, Suite A
City: Conway
State: SC
ZIP Code: 29526

Signature: ________________________________
Date: 10-12-15
Telephone: 843-488-3400

FEMA Form 088-0-63 (7/12) See reverse side for continuation. Replaces all previous editions.
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: Item C2.e is HVAC equipment on platform

Signature: __________________________ Date: 10-12-15

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 8 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–G10. In Puerto Rico only, enter meters.

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–G10) 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 Datum ______

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

G10. Community’s design flood elevation: ______ feet ______ meters Datum ______

Local Official’s Name: __________________________ Title: __________________________

Community Name: __________________________ Telephone: __________________________

Signature: __________________________ Date: __________________________

Comments: __________________________

□ Check here if attachments.

FEMA Form 086-0-33 (7/12) Replaces all previous editions.
Building Photographs
See Instructions for Item A6.

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.
149 GC Retreat Drive

City: Murrells Inlet  State: SC  ZIP Code: 29576

For Insurance Company Use
Policy Number:

Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; “Front View” and “Rear View”; and, if required, “Right Side View” and “Left Side View.” When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

Front View
(9-11-15)

Right Side View
(9-11-15)

Rear View
(9-11-15)

Left Side View
(9-11-15)
October 12, 2015

Horry County Code Enforcement Department
1302 Second Avenue
Conway, SC 29526

RE: Lot #13, Retreat at Garden City

Dear Sir:

The breakaway walls constructed around the ground level storage meet the structural requirements of FEMA Technical Bulletins 5 & 9 for breakaway wall construction.

Please call with any questions.

Sincerely,

Jeffrey D. Solan, PE, PLS