ELEVATION CERTIFICATE

Important: Read the instructions on pages 1–9.

SECTION A – PROPERTY INFORMATION

A1. Building Owner's Name BILL CLARK HOMES OF MYRTLE BEACH

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

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

TMS # 194-46-01-140 LOT 42 PHEASANT RUN PHASE 2

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


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

A7. Building Diagram Number 1A

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s) N/A sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A

c) Total net area of flood openings in A8.b

d) Engineered flood openings? ☐ Yes ☒ No

A9. For a building with an attached garage:

a) Square footage of attached garage 433 sq ft

b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0

c) Total net area of flood openings in A9.b

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 SOUTH CAROLINA

B4. Map/Panel Number 45051C3731

B5. Suffix H

B6. FIRM Index Date 09/17/2003

B7. FIRM Panel Effective/Revised Date 8/23/1999

B8. Flood Zone(s) AE

B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 10

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. ☐ 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

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: GPS

Vertical Datum: NGVD 29

Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 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) 14.42 ☒ feet ☐ meters
b) Top of the next higher floor N/A

c) Bottom of the lowest horizontal structural member (V Zones only) N/A

d) Attached garage (top of slab) 13.99 ☒ feet ☐ meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 13.62 ☒ feet ☐ meters

f) Lowest adjacent (finished) grade next to building (LAG) 13.62 ☒ feet ☐ meters
g) Highest adjacent (finished) grade next to building (HAG) 13.79 ☒ feet ☐ meters

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support N/A

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 AARON LEACH License Number 20191

Title Land Surveyor Company Name ROWE PROFESSIONAL SERVICES COMPANY

Address 511 BROADWAY STREET City MYRTLE BEACH State SC ZIP Code 29577

Signature __________________ Date 09/09/2015 Telephone 843-444-1020

FEMA Form 086-0-33 (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: Sections E.F, and G of this form have been left blank by the Land Surveyor. Form has expired, however, this is the latest form provided by FEMA.

Signature ___________________________ Date 09/09/2015

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 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 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.
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.
294 SOUTHERN BREEZES CIRCLE

City MURRELLS INLET State SC ZIP Code 29576

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.
Building Photographs
Continuation Page

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

<table>
<thead>
<tr>
<th>FOR INSURANCE COMPANY USE</th>
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<tbody>
<tr>
<td>Policy Number:</td>
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<tr>
<td>Company NAIC Number:</td>
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<table>
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<tr>
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<td>294 SOUTHERN BREEZES CIRCLE</td>
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<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>MURRELLS INLET</td>
<td>SC</td>
<td>29576</td>
</tr>
</tbody>
</table>

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. 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.