U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program ELEVATION CERTIFICATE FP 37629 COMB Control Number 1988

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 8-15

Carry all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION	DN	FOR	NSURANCE COMPANY USE
A1. Building Owner's Name CNEEKSIDE DR. LLC		Policy Num	per OK
A2. Building Street Address (including Apt., Unit, Suite, and/or Bid Box No. 630 NORTH CREEK SIDE DRIVE	lg. No.) or P.O. Route and	Company I Number:	IAIC 6-16-16
City MURRELLS INLET	State SC		Zip Code 29574
A3. Property Description (Lot and Block Numbers, Tax Parcel Nur LOT 3 MT. GILEAD SUBDIVISION (TMS 197-17-07-006) A4. Building Use (e.g., Residential, Non-Residential, Addition, Acc A5. Latitude/Longitude: Lat. 33*34*22.8843 Long. 79*00*48. A6. Attach at least 2 photographs of the building if the Certificate is A7. Building Diegram Number 6	cessory, etc.) RESIDENTIAL Horizontal Datum:	(NAD 192	(NAD 1983
A8. For a building with a crawlspace or enclosure(s):	 AO Fore build	ilma saith an ai	tached garage:
		_•	
a) Square footage of crawlspace or enclosure(s) 1549 b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	eq ft a) Square foot b) Number of p in the attach above adject	permanent flo ned garage wi	ed openings
c) Total net area of flood openings in A8.b SEE NOTES	sq in c) Total net an	es of flood op	enings in A9.b N/A sq ir
d) Engineered flood openings? (*Y)	—	flood opening	
SECTION B - FLOOD INSURA			* · · · · · · · · · · · · · · · · · · ·
B1. NFIP Community Name & Community Number	B2. County Name		B3. State
HORRY 450104	HORRY		se
	Revised Date	Flood Zone	(a) B9. Base Flood Elevation(s) (Zone AO, use base flood depth
H 09/17/2003 B10. Indicate the source of the Base Flood Elevation (BFE) data or	08/23/1999	AE	13
FIS Profile (FIRM) Community Determined Cother		m nem 199:	
B11. Indicate elevation datum used for BFE in Item B9: (NGV)			
B12. Is the building located in a Coastal Barrier Resources System Designation Date: CBRS COP/		Protected A	ea (OPA)? (Yes (F No
SECTION C - BUILDING ELEVAT	TION INFORMATION (SUR	VEY REQUI	(ED)
C1. Building elevations are based on: (Construction Drawings* A new Elevation Certificate will be required when construction of the C2. Elevations: Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, Items C2.a-h below according to the building diagram specified in	the building is complete. , V (with BFE), AR, AR/A, A	NR/AE, AR/A1	A30, ARIAH ARIAO. Complete
Benchmark Utilized: SCVRS	Vertical Datum: NG		
Indicate elevation datum used for the elevations in items a) through	h h) below. (© NGVD 1929	9 CNAV	988 CUILERLAND
C Other/Source:			NO. 4690
Datum used for building elevations must be the same as that used	for the BFE.	*	Check the ment used
a) Top of bottom floor (including basement, crawlapace, or enclosi			Minimum Autor (meters
b) Top of the next higher floor	15	5	_
c) Bottom of the lowest horizontal structural member (V Zones onl	ly) N/A		feet (meters
d) Attached garage (top of slab)	N/A		Cfeet C meters
e) Lowest elevation of machinery or equipment servicing the build (Describe type of equipment and location in Comments)	ling14	/	(* feet (* meters
f) Lowest adjacent (finished) grade next to building (LAG)	7	.3_ 1	⑥ feet ← meters
g) Highest adjacent (finished) grade next to building (HAG)	•	/2	© feet (meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, incl structural support	luding N/A	/	_ Cleet C meters
	Muhal	17 G	llan

ELEVATION CERTIFICATE, page 2

FEMA Form 086-0-33 (7/15)

OMB Control Number: 1660-0008 Expiration: 11/30/2018

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IMPORTANT: In these spaces, copy the con	responding inform	nation	n from S	ection A.	· · ·	FOR IN	SURANCI	E COMPANY USE
Building Street Address (including Apt., Unit, S 630 NORTH CREEK SIDE DRIVE					x No.	Policy Nun		2 COMITANT COL
City MURRELLS INLET	State	SC .	Zip (ode 29576		Company I Number:	NAIC	
SECTION D -	SURVEYOR, ENG	INEE	R. OR A	RCHITECT	CERTIF			
This certification is to be signed and sealed by a that the information on this Certificate represent punishable by fine or imprisonment under 18 U.	land surveyor, eng s my best efforts to	ginee: inten	r. or arch	itect author	ized by la	w to certify	elevation any false	information. I certify statement may be
Check here if attachments.	Were latitude and provided by a lice	d long ensed `No	itude in Isind su	Section A rveyor?				
Certifier's Name MICHAEL S CULLER, I#		Licer	nse Nurr 2:	iber 9114		00	THE RESERVE	
Title PRESIDENT	Company Name	RVEYI	NG III, II	IC.			UKN	
Address 1010 5th AVE. NW EXT	City SC		State	Zip Code 29575		NAS:		
Signature	Date REV. 6/13 5/27/2016	3/16	1	one 88-2333	1			
Copy all pages of this Elevation Certificate for (1) community officia	l, (2) i	insuranc	e agent/cor	npany, ar	nd (3) buildi	ng owner.	
Comments (including type of equipment and loc ITEM C2-A REFERS TO FLOOR LEVEL OF BELOW I NOTE ITEM A8-E (ENGINEERED FLOOD VENT "CR 205sq.ft. x 9 = 1845sq.ft. ENGINEERED CERTIFIC	ENCLOSURE; ITEM (IAWL SPACE DOOR	C2-E R SYST	EFERS T EM" MO	DEL 816CS P	IVEL OF M	VÁC SYSTE 105sq.in. x	M: 9 = 945sq	j.in.; RATED FOR
	•			V				•
Signature Mah Chille	M	•		•			Date	5/27/2016
SECTION E - BUILDING ELEVATION INFO	DRMATION (SURV	ÆY N	OT REC	QUIRED) FO	R ZONE	AO AND Z	ONE A (V	MTHOUT BFE)
For Zones AO and A (without BFE), complete Ite Sections A, B, and C. For Items E1-E4, use natu	ms E1-E5. If the Ciral grade, if availab	ertifica de. Ci	ate is int	ended to su measureme	pport a L ent used.	OMA or LO	MR-F requires	uest, complete enter meters.
E1. Provide elevation information for the following highest adjacent grade (HAG) and the lowest	g and check the ap	ргорг		•				
a) Top of bottom floor (including basement, or enclosure) is	xawispace,			(feet	(meter	s 🗌 abo	ove or	below the HAG.
b) Top of bottom floor (including basement, of or enclosure) is	crawlspace,	<u>.</u> -		(feet	(meter	e 🔲 ebo	ove or - E-	below the LAG.
E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next nigher 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	C meter	s 🔲 abo	ve or	below the HAG.
E4. Top of platform of machinery and /or equipment servicing the building is	<u></u>	<u> </u>			C meter		we or [below the HAG.
E5. Zone AO only: If no flood depth number is av management ordinance? Yes No C	ailable, is the top o Unknown. The loca	f the I al offic	bottom fi cial must	certify this	d in accor informatio	rdance with on in Sectio	the comm n G.	nunity's floodplain
SECTION F - PROPER	TY OWNER (OR C	OWNE	R'S RE	PRESENT/	TIVE) C	ERTIFICAT	ION	
The property owner or owner's authorized repres community-issued BFE) or Zone AO must sign h	sentative who comp ere. The statemen	oletes ts in S	Sections	s A, B, and A, B, and E	E for Zon	e A (withou	t a FEMA	-issued or knowledge.
Property Owner or Owner's Authorized Represe	ntative's Name					,	<u> </u>	·
Address	• City			State			ZIP Cod	le
Signature	- Date			Teleph	one			
Comments	•							
						_	T Check !	nere if attachments

Replaces all previous editions.

ELEVATION CERTIFICATE, page 3

OMB Control Number: 1660-0008 Expiration: 11/30/2018

IMPORTANT: In these spaces, copy the corre	shouging intolmst	ion from Se	CTION A.		FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suited 630 NORTH CREEK SIDE DRIVE	ite, and/or Bldg. No.) or P.O. Ro	ute and Box I		Policy Number:
City MURRELLS INLET	State SC	Zip Cod			Company NAIC
SECTION G - COMMUNITY INFORMATION (OPTION)					lumber:
SECTION The local official who is authorized by law or ording					tement ordinance can accordate
Sections A, B, C (or E), and G of this Elevation C Items G8-G10. In Puerto Rico only, enter meters.	ertificate. Complete	the applicab	le item(s) and	mana(sign be	elow. Check the measurement used in
G1. The information in Section C was taken or architect who is authorized by law to Comments area below.)					sealed by a licensed surveyor, engineer, date of the elevation data in the
G2. A community official completed Section or Zone AO.	E for a building loca	ited in Zone	A (without a	FEMA-is	ssued or community-issued BFE)
G3. The following information (Items G4-G1	0) is provided for co	mmunity floo	dplain mana	gement (purposes.
G4. Permit Number	G5. Date Permit Iss	sued	G6. Date C	ertificate	e of Compliance/Occupancy Issued
G7. This permit has been issued for: New Co	nstruction (Subs	stantial Impro	ovement		
G8. Elevation of as-built lowest floor (including boot of the building:	asement)	-· <u>-</u>	← 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	e		
Signature		Date			
				•	
					Check here if attachments.
					

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE, page 4

See instructions for Item A6.

OMB Control Number: 1660-0008

IMPORTANT: In these seconds of			Expiration: 173	
IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY (SE
Building Street Address (including Apt., Unit, 630 NORTH CREEK SIDE DRIVE	Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:	
City MURRELLS INLET	State	Zip Code 29576	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 (STREET SIDE) PHOTO TAKEN 5/27/2016



RIGHT SIDE VIEW PHOTO TAKEN 5/27/2016



REAR VIEW (CREEK SIDE) PHOTO TAKEN 5/27/2016

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE, page 5

Continuation Page

OMB Control Number: 1660-0008 Expiration: 11/30/2018

IMPORTANT: In these spaces, copy the	e corresponding information	n from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit,Suite, and/or Bldg. No.) or P.O.Route and Box No. 630 NORTH CREEK SIDE DRIVE			Policy Number:
City MURRELLS INLET	State SC	Zip Code 29576	Company NAIC Number:

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.



LEFT SIDE VIEW PHOTO TAKEN 5/27/2016

Certification of Engineered Flood Openings

In accordance with NFIP, FEMA TB 1-08, and ASCE/SEI 24-05

I hereby certify that the Crawl Space Door Systems flood vents 816CS, 1220CS, 1232CS, 1616CS, 1624CS, 1632CS, 2032CS, 2424CS, and 2436CS are designed in accordance with the requirements of the NFIP "Flood Insurance Manual" (2011) to provide automatic equalization of hydrostatic flood forces by allowing for the entry and exit of floodwaters, when properly installed and sized as set forth below. This certification follows the design requirements and specifications established in FEMA Technical Bulletin 1-08. "Openings in Foundation Walls and Walls of Enclosures Below Elevated Buildings in Special Flood Hazard Areas", and the ASCE Standard for "Flood Resistant Design and Construction" (ASCE/SEI 24-05).

Design Characteristics

Section 2.6.2.2 of ASCE 24 provides an equation to determine the required <u>net area</u> of engineered openings (A_o) for a given <u>enclosed area</u> (A_e). This equation is based on the hydraulic formula for the flow rate across sharp edged orifices. I have utilized this equation to calculate 1) the respected flow rate through the individual openings between louvers; 2) the flow rate through the main frame opening in case the louver is blown out during a flood event; and 3) the flow rate of water flowing through louver blades following hydraulic short tube theory. The ultimate maximum total enclosed area (A_e) that can be serviced by a single vent has then been determined by utilizing the lowest flow rate of the three assessed scenarios for each vent and is listed in Table 1.

These values are based on the following assumptions:

- In absence of reliable data, the rates of rise and fall have been assumed with 5 feet/hour;
- The (maximum) difference between the exterior and interior floodwater levels has been assumed with 1 foot during base flood conditions:
- A factor of safety of 5 has been assumed, which is consistent with design practices related to protection of life and property;
- The net area of openings (A_c) as provided by the manufacturer.

Installation Requirements and Limitations

This certification will be voided if the following installation requirements and limitations are not enforced:

- There shall be a minimum of two openings on different sides of each enclosed area;
- The bottom of each required opening shall be no more than 1ft above the adjacent ground level;
- Table 1 Maximal total <u>enclosed area</u> (A_e) that can be served by each individual model based on the given <u>net area</u> of engineered openings (A_o)

H x W

[in]

8 x 16

12 x 20

12 x 32

16 x 16

16 x 24

16 x 32

20 x 32

24 x 24

24 x 36

Model

816CS

1220CS

1232CS

1616CS

1624CS

1632CS

2032CS

2424CS

2436CS

A

 $[in^2]$

105

235

305

180

310

405

630

570

850

Α,.

[ft⁴]

205

500

645

395

670

835

1240

1230

1765

- No temporary (e.g. during cold weather) or permanent solid cover may be placed into or over the flood vent that would block
 the automatic entry or exit of floodwaters at any time;
- Where analysis indicates rates of rise and fall greater than 5 ft/hr, the total enclosed area as given in Table 1 shall be reduced accordingly to account for the higher rates of rise and fall.

Identification of the Building and Installed Flood Vents

The flood vent models marked in Table 1*) are being installed at the following building: Building Address

Certifying De	esign Professional	WITH CAROLINA
Name	Frederick Allen House	HOUSE I
Title	President-House Engineering P.C.	
Address	P O Box 466, Kitty Hawk, NC 2794	9 No. 3900
Type of License	Professional Engineer	EDEALTH IN
License #	26841	Signature 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Issuing State	South Carolina	2/wal // How //23/12 "MINION MANOR A