ELEVATION CERTIFICATE
Important: Read the instructions on pages 1–9.

SECTION A – PROPERTY INFORMATION

A1. Building Owner’s Name Carolyn Wilson
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 507 Jefferson Way
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) pt of TMS# 100-00-05-003
City Longs State SC ZIP Code 29569

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
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 N/A 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) Number of permanent flood openings in the attached garage N/A
   c) Total net area of flood openings in A9 b N/A sq in
   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 County
B3. State South Carolina

B4. Map/Panel Number 45051C039D
B5. Suffix J
B6. FIRM Index Date 09/17/2003
B7. FIRM Panel Effective/Revised Date 04/26/2007
B8. Flood Zone(s) AE
B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 20

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 Other/Source: ___
    Designation: ___, 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 on Real Time Network
   Vertical Datum: NAVD88
   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.
   a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 22.73
      □ feet □ meters
   b) Top of the next higher floor  N/A
      □ feet □ meters
   c) Bottom of the lowest horizontal structural member (V Zones only) N/A
      □ feet □ meters
   d) Attached garage (top of slab) N/A
      □ feet □ meters
   e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 21.00
      □ feet □ meters
   f) Lowest adjacent (finished) grade next to building (LAG) 18.61
      □ feet □ meters
   g) Highest adjacent (finished) grade next to building (HAG) 19.52
      □ feet □ meters
   h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 18.55
      □ 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 Kenneth D. Jordan License Number 21936
Title President Company Name K & R Land Surveyors, Inc.
Address 312 Laurel Street City Conway State SC ZIP Code 29526
Signature Date 01/06/2016 Telephone 843-248-4439

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: Elevations were determined using Real-Time Network GPS and converted to NGVD29 Datum using NGS Vertcon Software

Lowest piece of machinery is the A/C unit

Signature: [Signature]

Date: 01/06/2016

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 units, 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.

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 01/06/2016

Rear 01/06/2016
Building Photographs
Continuation Page

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.
507 Jefferson Rd

City: Longs  State: SC  ZIP Code: 29568

FOR INSURANCE COMPANY USE

Policy Number:

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.

Right 01/06/2016

Left 01/06/2016