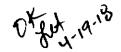
U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program



OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

72285

Copy 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	FOR INSURANCE COMPANY USE				
A1. Building Owner's Name James M. McLain, Etal.	Policy Number:				
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 402 River Front South	Company NAIC Number:				
City State Conway South Carolina	ZIP Code 29527				
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Buckslvill Ac, Lots 59 & 60 PIN 429-01-01-0012					
A4_Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential					
A5: Latitude/Longitude: Lat. 33-43' 36.07" Long. 79-02'42.9" Horizontal Datu	um: ☐ NAD 1927 ⊠ NAD 1983				
Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insu	ırance.				
AT. Building Diagram Number5					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) N/A sq ft	- 1				
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above	re adjacent grade / V/A				
c) Total net area of flood openings in A8.bsq in					
d) Engineered flood openings?					
A9. For a building with an attached garage:					
a) Square footage of attached garageN/A sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent	t grade ///A				
c) Total net area of flood openings in A9.b V/A < sq in					
d) Engineered flood openings?					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORM	IATION				
B1. NFIP Community Name & Community Number B2. County Name	B3. State				
Horry County, SC 450104 Horry	South Carolina				
B4. Map/Panel Number B5. Suffix Date B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date B8. Flood Zone(s) B9. 45041C0660 H 09-17-2003 08-23-1999 AE 6	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:					
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					

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the co	orresponding information from Sec	tion A.	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit 402 River Front South	, Suite, and/or Bldg. No.) or P.O. Rout	e and Box No.	Policy Number:			
City /	State ZIP (South Carolina 2952		Company NAIC Number			
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. In Puerto Rico only, enter meters. Benchmark Utilized: NGS 26.406 PID DD2396 Vertical Datum: NAVD 88						
Indicate elevation datum used for the	 -					
✓ 🖂 NGVD 1929 🦳 NAVD 198		••				
Datum used for building elevations mu		FE.	Charle the measurement used			
த) Top of bottom floor (including base	ment crawispace or enclosure floor)		Check the measurement used. 16.3 X feet T meters			
Top of the next higher floor	mon, statilopass, or endicade hoor,		N/A feet meters			
Bottom of the lowest horizontal stru	ictural member (V Zones only)		N/A ☐ feet ☐ meters			
d) Attached garage (top of slab)	ctural member (v Zones only)		N/A feet meters			
Lowest elevation of machinery or e (Describe type of equipment and lo			14.5 ⋉ feet ☐ meters			
✓f) Lowest adjacent (finished) grade n	, i		4.2 X feet meters			
	• • •		5.0 ⊠ feet ☐ meters			
Highest adjacent (finished) grade r Di Lowest adjacent grade at lowest ei						
structural support	<u>,</u>					
SECTION D -	SURVEYOR, ENGINEER, OR ARC	HITECT CERTIFI	CATION			
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.						
Were latitude and longitude in Section A pr	rovided by a licensed land surveyor?	⊠Yes □ No	Check here if attachments.			
Certifier's Name	License Number		Manning.			
Franklin Williams, Jr.	31200		TH CARO			
Title Owner						
Company Name			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Franklin Williams Professional. Land Surve	eying, LLC		No. 31200 A			
Address 1609 Bridgebrook Lane			5			
City Conway	State South Carolina	ZIP Code 29527	WILLIAM.			
Signature Sufficiel Qu	Date 04-17-2018	Telephone (843) 516-2286	Ext.			
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.						
Comments (including type of equipment an Elevations were converted from NAVD 88 C2.E is an air conditioner unit pad on the NC2. H is the bottom step on river side of the	to NGVD 29 using the NGS Vertcon s orth-Eastern side of the house.	oftware.				

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information 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. Policy Number: 402 River Front South State ZIP Code Company NAIC Number Conway South Carolina 29527 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, 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 1–2 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 or Owner's Authorized Representative's Name Address City State ZIP Code Signature Date Telephone Comments Check here if attachments.

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

MPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, S 402 River Front South	No. Policy Number:					
City Conway	State ZIP Code South Carolina 29527	Company NAIC Number				
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.)						
or Zone AO.	ion E for a building located in Zone A (without					
G3. The following information (Items G4-	-G10) is provided for community floodplain ma	nagement 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 of the building:	g basement)	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 (including type of equipment and lo	cation, per C2(e), if applicable)	☐ Check here if attachments.				
		Check here it attachments.				

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information 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. 402 River Front South				Policy Number:
City Conway		State South Carolina	ZIP Code 29527	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.



Photo One

Photo One Caption South(Road Side View) 10-26-2017

Clear Photo One



Photo Two

Photo Two Caption North (river Side) View 10-26-2017

Clear Photo Two