96129

Horry County Government

Code Enforcement Department
www.horrycounty.org

Horry County
Committed to Excellence

Horry County Government & Justice Center
1301 Second Avenue / Suite 1D09
Conway, South Carolina 29526
Phone 843.915.5090 || Fax 843.915.6090

MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

In accordance with this community's participation in the National Flood Insurance Program's Community Rating System, all FEMA Elevation Certificates must be correct and complete. The attached Certificate has some incorrect items which are noted here.

SECTION A - PROPERTY INFORMATION	For Insurance Company Use:
A1. Building Owner's Name	Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Company NAIC Number
City State ZIP Code 29527	

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
PIN# 431600000016 TMS# 1760001054

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

A5. Latitude/Longitude: Lat. _____ Long. _____ Horizontal Datum: ☐ NAD 1927 ☐ NAD 1983

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), provide
- a) Square footage of crawl space or enclosure(s) _____ sq ft
- b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____
- c) Total net area of flood openings in A8.b _____ sq in
- d) Engineered flood openings? ☐Yes ☐No

A9. For a building with an attached garage, provide:
- a) Square footage of attached garage _____ sq ft
- b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____
- c) Total net area of flood openings in A9.b _____ sq in
- d) Engineered flood openings? ☐Yes ☐No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number	B2. County Name	B3. State

B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
			09-17-2003		

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 (Describe) _____

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

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.

Benchmark Utilized _____ Vertical Datum _____

Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other/Source: _____

COMMENTS: Corrected B7, A2 for zipcode, A3 and A4.

Date of Review: 5-31-19 **Community Official:** [signature], CFM

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.

96128
JG43
5-30-19

U.S. DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
National Flood Insurance Program

ELEVATION CERTIFICATE

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 8-15

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

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

dH 5-31-19

SECTION A - PROPERTY INFORMATION

	FOR INSURANCE COMPANY USE
A1. Building Owner's Name: SILVER JEFFREY K	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 1450 PEE DEE HWY	Company NAIC Number:

City: CONWAY | State: SC | Zip Code: 29,527

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

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

A5. Latitude/Longitude: Lat. 33-41-17N Long. 79-07-28W Horizontal Datum: ○ NAD 1927 ◉ NAD 1983

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

A7. Building Diagram Number 5

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 within 1.0 foot above adjacent grade 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	B2. County Name	B3. State
HORRY COUNTY 450104	HORRY	SC

B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/ Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth
45051C0655	H	8/23/1999	9/30/1988	A	N/A

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

Designation Date: ☐ 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.

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: VRS-GPS Vertical Datum: NAVD 1988

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)	16 . 49	☒ feet	☐ meters
b) Top of the next higher floor	NA .	☐ feet	☐ meters
c) Bottom of the lowest horizontal structural member (V Zones only)	NA .	☐ 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)	16 . 50	☒ feet	☐ meters
f) Lowest adjacent (finished) grade next to building (LAG)	12 . 20	☒ feet	☐ meters
g) Highest adjacent (finished) grade next to building (HAG)	13 . 16	☒ feet	☐ meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	12 . 20	☒ feet	☐ meters

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

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.: 1450 PEE DEE HWY

Policy Number:

City: CONWAY | State: SC | Zip Code: 29,527

Company NAIC Number:

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. Code, Section 1001.*

☐ Check here if attachments.

Were latitude and longitude in Section A provided by a licensed land surveyor? ◉ Yes ○ No

Certifier's Name: EVERRETT T. JOHNSON II		License Number: 30766	
Title: OWNER	Company Name: J&W Prof. Land Surveyors, LLC		
Address: 3370 TRULUCK JOHNSON RD	City: AYNOR	State: SC	Zip Code: 29511
Signature	Date: 4/12/2019	Telephone: 843-241-3800	

SOUTH CAROLINA PROFESSIONAL LAND SURVEYOR No. 30766 EVERRETT JOHNSON II

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

Comments (including type of equipment and location, per C2(e), if applicable)

BREAKER BOX (LOCATION SHOWN IN ATTACHED PHOTOS)

Signature | Date 12-Apr-2019

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 3 . 33 ◉ feet ☐ meters ☑ above or ☐ below the HAG.

b) Top of bottom floor (including basement, crawlspace, or enclosure) is 4 . 29 ◉ 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 page 8 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 1 . 17 ◉ 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: 1450 Pee Dee Hwy	City: Conway	State: S-C	ZIP Code: 29527
Signature	Date: 5/16/19	Telephone	

Comments

☐ Check here if attachments.

ELEVATION CERTIFICATE, page 4

BUILDING PHOTOGRAPHS

See instructions for Item A6.

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

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. 1450 PEE DEE HWY			Policy Number:
City CONWAY	State SC	Zip Code 29,527	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.