

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

46048 9/2/15  
 OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <u>RONNEL STEPHEN PARKER JR ETAL</u>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>5002 SOUTH OCEAN BLVD</u>		Company NAIC Number:
City <u>MYRTLE BEACH</u>	State <u>SC</u>	ZIP Code <u>29575</u>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>LOT 2 BLOCK 7 LONG BAY ESTATES, TM# 192-02-01-017</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>		
A5. Latitude/Longitude: Lat. <u>33D38'27.100"</u> Long. <u>-78D56'21.810"</u>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 <u>5</u>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <u>NA</u> sq ft		a) Square footage of attached garage <u>NA</u> sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>NA</u>		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>NA</u>
c) Total net area of flood openings in A8.b <u>NA</u> sq in		c) Total net area of flood openings in A9.b <u>NA</u> sq in
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <u>HORRY COUNTY 450104</u>		B2. County Name <u>HORRY COUNTY</u>		B3. State <u>SOUTH CAROLINA</u>	
B4. Map/Panel Number <u>45051C00694</u>	B5. Suffix <u>H</u>	B6. FIRM Index Date <u>SEPTEMBER 17, 2003</u>	B7. FIRM Panel Effective/Revised Date <u>AUGUST 23, 1999</u>	B8. Flood Zone(s) <u>VE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>17</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> 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: SCVRS 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.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>22.3</u>	Check the measurement used.
b) Top of the next higher floor	<u>36.13</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>20.0</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>NA</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>22.4</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>8.0</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>8.5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>7.5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> 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. 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  
 Check here if attachments.

Certifier's Name <u>JACQUES J. BONNETT</u>	License Number <u>21431</u>
Title <u>OWNER/PLS</u>	Company Name <u>LOWER CAROLINA SURVEYING, INC.</u>
Address <u>4612 RED BLUFF RD.</u>	City <u>LORIS</u> State <u>SC</u> ZIP Code <u>29569</u>
Signature 	Date <u>8-28-15</u> Telephone <u>843-756-6889</u>



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5002 SOUTH OCEAN BLVD	Policy Number:
City MYRTLE BEACH State SC ZIP Code 29575	Company NAIC Number:

**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 ENGINEERED BREAK AWAY WALLS (SEE ATTACHED DOCUMENTS). LOWEST MACHINERY IS AC UNIT.

Signature Date 8-28-15

**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 \_\_\_\_\_  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
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- 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.

# Building Photographs

See Instructions for Item A6.

**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.  
5002 SOUTH OCEAN BLVD

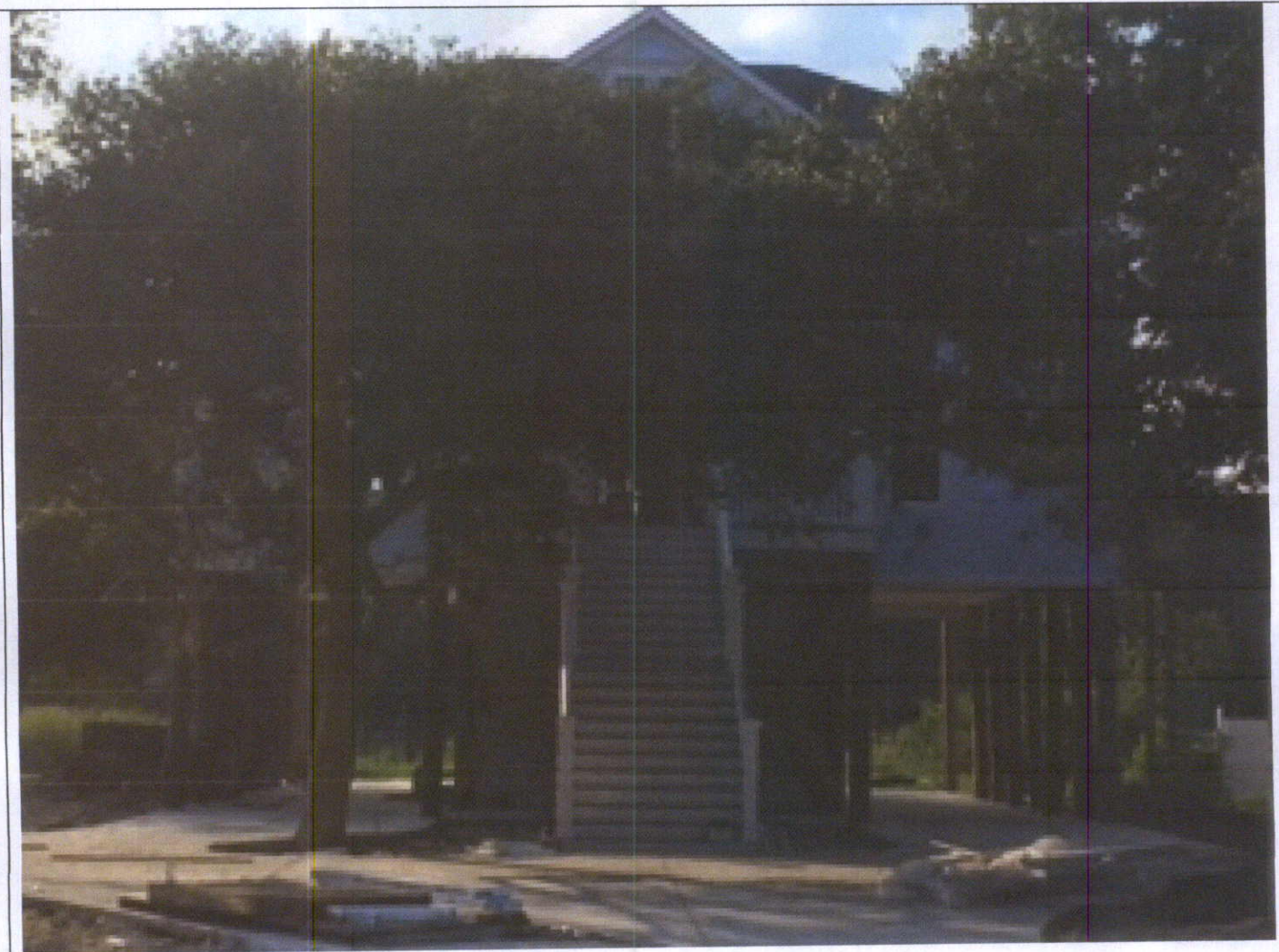
Policy Number:

City MYRTLE BEACH

State SC ZIP Code 29575

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.



# Building Photographs

Continuation Page

**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.  
5002 SOUTH OCEAN BLVD

Policy Number:

City MYRTLE BEACH

State SC

ZIP Code 29575

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.



HORRY COUNTY V-ZONE BREAKAWAY WALL DESIGN CERTIFICATE

PRE-CONSTRUCTION \_\_\_\_\_ AS BUILT \_\_\_\_\_ XXXX \_\_\_\_\_

Name of Property Owner RS PARKER HOMES LLC Permit No. \_\_\_\_\_  
Building Address 5002 SOUTH OCEAN BLVD  
TMS # 192-02-01-017  
City MYRTLE BEACH State SC Zip Code 29575

*Handwritten signature and initials*

**Flood Insurance Rate Map (FIRM) Information**

Community Number 450104 Panel Number 45051C0694 Suffix H  
Date of FIRM Index 9-17-2003

**Elevation Information**

- 1. Base Flood Elevation (BFE) 17 feet (NGVD)
- 2. Bottom of Lowest Horizontal Structural Member 20 feet (NGVD)
- 3. Elevation of Lowest Adjacent Grade 8.0 feet (NGVD)
- 4. Datum Used: NGVD 29 X NAVD 88 Other \_\_\_\_\_

**BREAKAWAY WALL CERTIFICATION STATEMENT**

**NOTE: Certificate must be signed and sealed by a registered professional engineer or architect. Breakaway wall construction details must be shown on construction plans that are signed and sealed by a registered professional engineer or architect.**

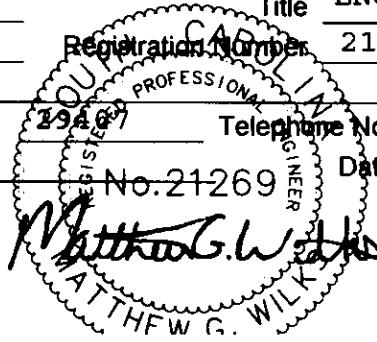
I certify that I have developed or reviewed the structural design, plans and specifications for construction of breakaway walls. The design and methods of construction to be used for the breakaway walls are in accordance with accepted standards of practice for meeting the following provisions:

- Breakaway walls have a design safe loading resistance of not less than 10 and no more than 21 pounds per square foot.
- Breakaway walls' collapse shall result from water loads less than that which would occur during the base flood; and
- The elevated portion of the building and supporting foundation system shall not be subject to collapse, displacement, or other structural damage due to the combined effects of wind and water loads acting simultaneously on all building components, structural and non-structural. Wind loading values used shall be those associated with the base flood. Such enclosed space shall be useable solely for parking of vehicles, building access or limited storage of maintenance items.

For "As Built" certifications, I am certifying that the construction has been done in accordance with the design parameters indicated above.

**Certification**

Certifier's Name: MATTHEW WILKS Title ENGINEER  
Company Name: MWDESIGN LLC Registration Number 21269  
Street Address: 1527 HURTES ISLAND DRIVE  
City CHARLESTON State SC Zip Code \_\_\_\_\_ Telephone No. 843-410-8778  
Signature \_\_\_\_\_ Date 8-24-2015  
SEAL: \_\_\_\_\_



HORRY COUNTY V-ZONE DESIGN CERTIFICATE

PRE-CONSTRUCTION \_\_\_\_\_ AS BUILT XXXX

Name of Property Owner RS PARKER HOMES LLC Permit No. \_\_\_\_\_  
Building Address 5002 SOUTH OCEAN BLVD  
TMS# 192-02-01-017  
City MYRTLE BEACH State SC Zip Code 29575

**Flood Insurance Rate Map (FIRM) Information**

*OK'd  
9-2-15*

Community Number 450104 Panel Number 45051C00694 Suffix H  
Date of FIRM Index 9-17-2003

**Elevation Information**

1. Base Flood Elevation (BFE) 17 feet (NGVD)
2. Bottom of Lowest Horizontal Structural Member 20 feet (NGVD)
3. Elevation of Lowest Adjacent Grade 8.0 feet (NGVD)
4. Approximate Depth of Anticipated Scour/Erosion used for Foundation Design is 2 feet
5. Embedment Depth of Pilings/Columns/Footing Below Lowest Adjacent Grade is 30 feet
6. Datum Used: NGVD 29 X NAVD 88 Other \_\_\_\_\_

**V-Zone Certification Statement**

**NOTE: Certificate must be signed and sealed by a registered professional engineer or architect. Construction plans must be in accordance with this certification and must be signed and sealed by a registered professional engineer or architect.**

I certify that I have developed or reviewed the structural design, plans and specifications for construction. The design and methods of construction to be used are in accordance with accepted standards of practice for meeting the following provisions:

- The bottom of the lowest horizontal structural member of the lowest floor (excluding piles and columns) is elevated to a minimum at one (1) foot above the BFE; and
- The pile or column foundation and structure attached thereto is anchored to resist flotation, collapse, and lateral movement due to the combined effects of wind and water loads acting simultaneously on all building components. Water loading values used are those associated with the base flood. Wind loading values used are those required by the applicable state or local building code. The potential for scour and erosion at the foundation has been anticipated for conditions associated with the base flood, including wave action.

For "As Built" certification, I am certifying that the construction has been done in accordance with the design parameters indicated above.

**Certification**

Certifier's Name: MATTHEW WILKS Title ENGINEER  
Company Name: MW DESIGN, LLC  
Street Address: 1527 HURTES ISLAND DRIVE  
City CHARLESTON State SC Zip Code 29407 Telephone No. 843-410-8778  
Signature \_\_\_\_\_ No. 21269 Date 8-24-2015  
SEAL: \_\_\_\_\_

