U.S. DEPARTMENT OF HOMELAND SECURITY ELEVATION CERTIFICAT OMB No. 1660-0008 FEDERAL EMERGENCY MANAGEMENT AGENCY Expiration Date: July 31, 2015 IMPORTANT: Follow the instructions on pages 1-9 National Flood Insurance Program SECTION A - PROPERTY INFORMATION FOR INSURANCE COMPANY USE 1. Building Owner's Name BEAZER HOMES CORP. Policy Number M2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. 1312 CASCARILLA DRIVE Company NAIC Number: City State SC MYRTLE BEACH ZIP Code 29579 Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) **A3**. LOT 25 FOX HORN SUBDIVISION PHASE 2-C (TMS# 172-41-01-190) A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Latitude/Longitude: Lat. <u>33-43-11.5</u>. Long. <u>078-57-24.6</u> 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. AT. Building Diagram Number 1 A AS. For a building with a crawlspace or enclosure(s): 49. For a building with an attached garage: 0 a) Square footage of crawlspace or enclosure(s) 415 a) Square footage of attached garage b) No. of permanent flood openings in the crawlspace or Number of permanent flood openings in the attached garage 0 enclosure(s) within 1.0 foot above adjacent grade within 1.0 foot above adjacent grade 0 c) Total net area of flood openings in A8.b sq in Total net area of flood openings in A9.b Ω sq in d) Engineered flood openings? **X** No Engineered flood openings? □ Yes X No SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION NFIP Community Name & Community Number HORRY 450104 82. County Name HORRY B3. SC State #4. Map/Panel Number #85. Suffix B6, FIRM Index Date 87. FIRM Panel Effective/ 88. Flood Zone(s) B9. Base Flood Elevation(s) (Zone Revised Date AO, use base flood depth) 45051C 0680 09/17/2003 08/23/1999 X/AE 15' #10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: X PRM ☐ FIS Profile Community Determined Dther/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 _ CBRS ☐ OPA SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED 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. €2. 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/A0. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: TBM Vertical Datum: NGVD 1929 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) 🗷 feet meters 29 b) Top of the next higher floor X feet meters N/A c) Bottom of the lowest horizontal structural member (V Zones only) feet meters 18 d) Attached garage (top of slab) 🔀 feet ☐ meters e) Lowest elevation of machinery or equipment servicing the building 18 🗶 feet ☐ meters (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) X feet □ meters g) Highest adjacent (finished) grade next to building (HAG) 18

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

18

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. I Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a ☐ Check here if attachments licensed land surveyor? 🗷 Yes ☐ No

h) Lowest adjacent grade at lowest elevation of deck or stairs, including

Certifier's Name J. JASON COX License 26950 Number Company Name OWNER COX SURVEYORS & ASSOCIATES Adoress State SC ZIP Code 4761 HWY, 501 W. STE. MÝRTLE BEACH 29579 Signature \ Date. Telephone 07/14/2014 (843) 236-7200



X feet

🛛 feet

meters

meters

structural support

IMPORTANT: In these spaces, copy the corresponding information from Section A.					FOR INSURANCE COMPANY USE		
Building Street Address (inclu 1157 BETHPAGE DRI	iding Apt., Unit, S	uite, and/or Bldg. No.) or				Policy Number:	
City MYRTLE BEACH		State SC	ZIP Code 29579		c	ompany NAIC Nu	mber;
· · · · · · · · · · · · · · · · · · ·	FCTION D - SI	URVEYOR, ENGINEER		CERTIFICA	TION (OO)	(TIMES)	
Copy both sides of this Elevat	tion Certificate for	(1) community official (2) insurance agent/cr	Moanu and i	3) building o	IIMUED)	
Comments Item C2e is an	air eanditionne		,	and the same of	or building o	W/ICI.	
Signature			Date 06/2				
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SECTION E BUILDII							
or Zones AO and A (without B or Items E1E4, use natural a	grade, if available	. Check the measuremen	ate is intended to sup it used. In Puerto Rici	iport a LOMA o only, enter i	or LOMR-Fire neters.	equest, comple	te Sections A, B,and C.
 Provide elevation informati grade (HAG) and the lowes 	ion for the followi	ng and check the appropr				ove or below ti	ne highest adjacent
a) Top of bottom floor (inc)				[] feet	meters	above or	below the HAG,
b) Top of bottom floor (incl							Delow the LAG.
For Building Diagrams 6–9						_	
the next higher floor (eleva 3. Attached garage (top of sla		regramms) of the building			meters meters		☐ below the HAG. ☐ below the HAG.
4. Top of platform of machine		ent servicing the building	=				below the HAG.
5. Zone AO only: If no flood d							
ordinance? 🗌 Yes 🔠 N	lo 🔲 Unknown.	The local official must co	ertify this information	in Section G.		u	outries and agentical
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ELEVATION CERTIFICATE, page 2

				
IMPORTANT: In these spaces, copy the corr		OR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit. 1312 CASCARILLA DRIVE				Palicy Number:
MYRTLE BEACH	State SC	ZIP Code 29579		Company NAIC Number:
SECTION D -	SURVEYOR, ENGINEER, OR A	RCHITECT CER	TIFICATION (CO	NTINUED)
Copy both sides of this Elevation Certificate f	_ 	ance agent/compai	ny, and (3) building o	wher,
Comments Item C2e is the air conditioned	er pad.			
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Signature		Date 07/14/20	114	
SECTION E - BUILDING ELEVATION	N INFORMATION (SURVEY	NOT REQUIRED)	FOR ZONE AO A	ND ZONE A (WITHOUT BFE)
For Zones AO and A (without BFE), complete I For Items E1-E4, use natural grade, if availab		• •		equest, complete Sections A, B, and C.
E1. Provide elevation information for the folio grade (HAG) and the lowest adjacent grade		exes to show wheth	er the elevation is a	bove or below the highest adjacent
a) Top of bottom floor (including basemen	•		☐ feet ☐ meters	above or below the HAG.
b) Top of bottom floor (including basemer	, ,		☐ feet ☐ meters	
E2. For Building Diagrams 6–9 with permaner		on A Items 8 and/o		
the next higher floor (elevation C2.b in the	- ·	·	feet meters	<u> </u>
E3. Attached garage (top of slab) is	-	,	feet meters	above or Delow the HAG.
E4. Top of platform of machinery and/or equi	pment servicing the building is	,	☐ feet ☐ meters	above or below the HAG.
E5. Zone A0 only: If no flood depth number is ordinance? Yes No Unknown	s available, is the top of the botton vn. The local official must certify th			community's floodplain management
SECTION F - I	PROPERTY OWNER (OR OWI	NER'S REPRESE	NTATIVE) CERTI	FICATION
The property owner or owner's authorized rep Zone AO must sign here. The statements in S				MA-issued or community-issued BFE) or
Property Owner or Owner's Authorized Repres		the best of my kno	meuge.	
				
Address		City 	State	ziP Code
Signature		Date	Tele	phone
Comments				
				 Check here if attachments.
	SECTION G - COMMUNITY	INFORMATION ((OPTIONAL)	
The local official who is authorized by law or or G of this Elevation Certificate. Complete the a				
G1. The information in Section C was ta who is authorized by law to certify e G2. A community official completed Section 2.	elevation information. (Indicate the tion E for a building located in Zon	e source and date of a A (without a FEMA	of the elevation data Aissued or communi	in the Comments area below.)
G3. The following information (Items G4	<u> </u>			
G4. Permit Number	G5. Date Permit Issued		Date Certificate Of C	ompliance/Occupancy Issued
		ial Improvement	□ fo.m.t □	Datum
G8. Elevation of as-built lowest floor (include	- · · · · · · · · · · · · · · · · · · ·	·	☐ feet ☐ meters ☐ feet ☐ meters	
G9. BFE or (in Zone A0) depth of flooding at G10. Community's design flood elevation:	. the banding Site:	··	feet meters	
Local Official's Name		Title 		HATTA CAROLINA
Community Name	<u> </u>	Telephone		COX
Signature		Date		Em & ASSOCIATES OF
Comments				No. 4099
				Check here if attachments.