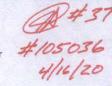
Horry County Government

Code Enforcement Department www.horrycounty.org



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.

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 c. Total net area of 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 B7. FIRM Panel B8. Flood Zone(s) A0, use base flood dept A0,			SECTION	N A - PROPERT	Y INFORMATIO	N	For Insurance Company Use:
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)	Building Owner's Name						Policy Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)	A2. Building Street Ad	A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Horizontal Datum:	City S	tate ZIP Code					
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number	A3. Property Description	on (Lot and Block Nu	mbers, Tax Parcel Numb	per, Legal Descript	ion, etc.)		
B1. NFIP Community Name & Community Number B2. County Name B3. State	A5. Latitude/Longitude A6. Attach at least 2 p A7. Building Diagram I A8. For a building with a) Square footag b) No. of perman enclosure(s) w c) Total net area	Lat Long. notographs of the bull humber a crawl space or end of crawl space or each flood openings in alls within 1.0 foot all of flood openings in all swithin 1.0	closure(s), provide nclosure(s) the crawl space or cove adjacent grade A8.b	being used to obta	A9. For a buildin a) Square f b) No. of pe walls with c) Total net	g with an attac cootage of attace ermanent flood hin 1.0 foot about area of flood of	ched garage, provide: ched garage sq ft openings in the attached garage ove adjacent grade openings in A9.b sq in
B1. NFIP Community Name & Community Number B2. County Name B3. State B4. Map/Panel Number B5. Suffix B6. FIRM Index Date Pffective/Revised Date Date Pffective/Revised Date B7. FIRM Panel Effective/Revised Date B8. Flood Zone(s) B9. Base Flood Elevation(s) AO, use base flood dept AO, use base flood dept B7. FIRM Panel B8. Flood Zone(s) B9. Base Flood Elevation(s) AO, use base flood dept B7. FIRM Panel B8. Flood Zone(s) B9. Base Flood Elevation(s) AO, use base flood dept B7. FIRM Panel B8. Flood Zone(s) B9. Base Flood Elevation(s) AO, use base flood dept B7. FIRM Panel B8. Flood Zone(s) B9. Base Flood Elevation(s) AO, use base flood dept B7. FIRM Panel B7	a) Engineered no						
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date Effective/Revised Date Zone(s) B9. Base Flood Elevation(s) AO, use base flood dept 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)		SEC	TION B - FLOOD INS	URANCE RATE	MAP (FIRM) IN	FORMATION	1
Date Da	B1. NFIP Community N	ame & Community N	Number B2.	. County Name			B3. State
FIS Profile FIRM Community Determined Other (Describe)	B4. Map/Panel Numb	er B5. Suffix	Date		100 Carry 17 (c)		B9. Base Flood Elevation(s) (Zon AO, use base flood depth)
1. Building elevations are based on: Construction Drawings* Building Under 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/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. Benchmark Utilized	 Indicate elevation d Is the building locat 	atum used for BFE ir ed in a Coastal Barri	n Item B9: NGVD er Resources System (C	1929 NAV BRS) area or Othe	D 1988 Otherwise Protected Ar		— □Yes ☑ No
*A new Elevation Certificate will be required when construction of the building is complete. 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.		SECTIO	N C - BUILDING ELE	VATION INFOR	RMATION (SURV	EY REQUIR	RED)
COMMENTS:	*A new Elevation Ce 2. Elevations – Zones A Items C2.a-h below a Benchmark Utilized	tificate will be required to the state of th	ed when construction of with BFE), VE, V1-V30, V ding diagram specified in	the building is com / (with BFE), AR, A Item A7. Vertical Datu	plete. R/A, AR/AE, AR/A m	1-A30, AR/AH	, AR/AO. Complete
	COMMENTS:						

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

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

OMB No. 1660-0008 Expiration Date: November 30, 2022

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

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

	-				2			(-,
		TION A - PROPERT	Y INFOR	MATION			FOR INSURA	ANCE COMPANY USE
A1. Building Owne LEWIS BOYS, LLC							Policy Number	er:
 Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. RIVER FRONT N. 						Company NA	JC Number:	
City		*****		State			ZIP Code	
CONWAY				South C	arolina		29527	
A3. Property Description # 170-17-01-0		nd Block Numbers, T	ax Parce	i Number, Le	gal Description, e	tc.)		
A4. Building Use (e.g., Resider	ntial, Non-Residential	, Addition	, Accessory,	etc.) RESIDEN	NTIAL	19	
A5. Latitude/Longit	ude: Lat. 3	3-43-52 N	Long. 7	9-03-16 W	Horizonta	al Datum	n: NAD 19	027 × NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	ne Certific	cate is being i	used to obtain floo	od insura	ance.	
A7. Building Diagra	m Number	6						
A8. For a building	vith a crawls	space or enclosure(s)						
		space or enclosure(s			747.00 sq ft			
		ood openings in the o	-			nt ahove	adjacent grad	de N/A
		penings in A8.b	историс	N/A sq ir			adjacom grad	
		ngs? Yes	No					
A9. For a building w								
				N/A og f				
		ned garage				-		
		ood openings in the a				ljacent g	rade N/A	
c) Total net are	a of flood o	penings in A9.b		N/A so	in			
d) Engineered	flood openir	ngs? Yes 🗵	No					
	SI	ECTION B - FLOOD	INSURA	ANCE RATE	MAP (FIRM) IN	FORMA	TION	
B1. NFIP Communi		Community Number		B2. County				B3. State
HORRY COUNTY	450104			HORRY				South Carolina
B4. Map/Panel Number	Number Date Effe			ective/ Zone(s)		B9. E	9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)	
45051CO660	Н	09-30-1988	08-23-	evised Date 1999	AE	6		
		Base Flood Elevation Community Dete				d in Iten	n B9:	
B11. Indicate eleva	ation datum	used for BFE in Item	B9: 🛛 N	NGVD 1929	☐ NAVD 1988	ot	her/Source:	
B12. Is the building	located in	a Coastal Barrier Res	ources S	vstem (CBRS	area or Otherwi	ise Prote	ected Area (O	PA)? Yes No
Designation I	20.0	Г	CBRS					
		-						

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding	information from S	ection A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or 494 RIVER FRONT N.	Bldg. No.) or P.O. R	oute and Box No.	Policy Number:
City Stat CONWAY Sou	Company NAIC Number		
SECTION C - BUILDING EL	EVATION INFORM	ATION (SURVEY R	EQUIRED)
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when construction		uilding Under Constru	uction*
 Elevations – Zones A1–A30, AE, AH, A (with BFE), Complete Items C2.a–h below according to the build 	VE, V1–V30, V (with fing diagram specifie	BFE), AR, AR/A, AR d in Item A7. In Puer	/AE, AR/A1–A30, AR/AH, AR/AO. to Rico only, enter meters.
Benchmark Utilized: VRS GPS		n: NAVD 1988	
Indicate elevation datum used for the elevations in it ✓ NGVD 1929 ☐ NAVD 1988 ☐ Other/S	Source:		
Datum used for building elevations must be the sam	e as that used for the	BFE.	Check the measurement used.
a) Top of bottom floor (including basement, crawlsp	ace or enclosure flo	or)	7.3 S feet meters
b) Top of the next higher floor			17.5 S feet meters
c) Bottom of the lowest horizontal structural membe	or (V/ Zonos only)		N/A feet meters
d) Attached garage (top of slab)	(v Zones only)		7.3 🛛 feet 🔲 meters
E. Dowest elevation of machinery or equipment services (Describe type of equipment and location in Communication in Comm	vicing the building		17.4 ⊠ feet ☐ meters
f) Lowest adjacent (finished) grade next to building			4.7 🔀 feet 🗌 meters
g) Highest adjacent (finished) grade next to building			6.9 🛭 feet 🔲 meters
h) Lowest adjacent grade at lowest elevation of dec structural support			6.7 ⋉ feet ☐ meters
SECTION D - SURVEYOR,	ENGINEED OF A	DOUITEST SERVICE	
This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment un Were latitude and longitude in Section A provided by a lice	veyor, engineer, or a my best efforts to ini der 18 U.S. Code, Si	rchitect authorized by terpret the data availablection 1001.	v law to certify elevation information.
Certifier's Name	License Number		
EVERRETT T. JOHNSON II	30766		H CARO
Title OWNER			ES PLACE
Company Name J & W Professional Land Surveyors, LLC.			- Place 7
Address 3370 TRULUCK JOHNSON ROAD			Here
City AYNOR	State South Carolina	ZIP Code 29511	THE TOP STATE OF THE PARTY OF T
Signature	Date 04-13-2020	Telephone (843) 241-3800	Ext.
Copy all pages of this Elevation Certificate and all attachme	nts for (1) community	official, (2) insurance	agent/company, and (3) building owner.
Comments (including type of equipment and location, per HVAC UNIT PLATFORM - LOCATION SHOWN IN ATTA	C2(e), if applicable)		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2022

			- Producti Bato. 11010111001 00, 2022
IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY US		
Building Street Address (including Apt 494 RIVER FRONT N.	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 03-16-2020 REAR VIEW (STREET SIDE)

Clear Photo One

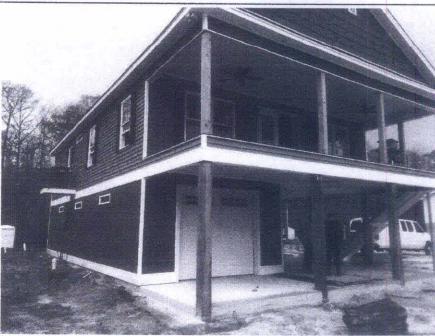


Photo Two

Photo Two Caption 03-16-2020 FRONT VIEW (RIVER SIDE)

Clear Photo Two