U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program 96239 Joe 27 11-6-19

OMB No. 1660-0008

Expiration Date: November 30, 2018

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.

SECTION A - PROPERTY INFORMATION	FOR INSUR	ANCE COMPANY USE			
A1. Building Owner's Name	Policy Numl	Policy Number:			
/H AND H CONSTRUCTORS					
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Company N	AIC Number:			
1792 SAPPHIRE DRIVE					
City State LONGS South Carolina	ZIP Code 29568				
LONGS South Carolina A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	29300				
LOT 423 PLANTATION PINES PHASE 5C, PIN 304-15-04-0024, PLAT BOOK 285 PAGE 231					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL					
A5. Latitude/Longitude: Lat. 33D53'20.40" Long. 78D42'18.74" Horizontal Datu	ım: 🔲 NAD 1	927 🔀 NAD 1983			
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insu	rance.				
A7. Building Diagram Number 1A					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) NA sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above	e adjacent gra	de NA			
c) Total net area of flood openings in A8.b NA sq in					
d) Engineered flood openings? Yes No					
A9. For a building with an attached garage:					
a) Square footage of attached garage sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent	grade NA				
c) Total net area of flood openings in A9.b NA sq in		This is a second of the second			
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		South Carolina			
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date B8. Flood Zone(s) B9.	Base Flood El (Zone AO, use	evation(s) Base Flood Depth)			
45051C0415 J J 9-17-2003 J 3-30-2006 AE 20					
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: LOMR 06-04-B138X-450104					
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 X No					
Designation Date: CBRS OPA					

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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Sui 1792 SAPPHIRE DRIVE	Policy Number:						
City	State ZIP (Code	Company NAIC Number				
LONGS	South Carolina 2956	68					
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)							
		ling Under Constru	uction*				
*A new Elevation Certificate will be require							
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: GPS	Vertical Datum:	- IX IV-100 PROPERTY III					
Indicate elevation datum used for the eleva		V.					
☑ NGVD 1929 ☐ NAVD 1988 [rr					
Datum used for building elevations must be	e the same as that used for the B	FE.	Check the measurement used.				
a) Top of bottom floor (including basemer	it, crawlspace, or enclosure floor)		26.3 feet meters				
b) Top of the next higher floor	,		NA feet meters				
,			NA feet meters				
c) Bottom of the lowest horizontal structure	al member (v Zones only)						
d) Attached garage (top of slab)	and the state of t		25.8 X feet meters				
e) Lowest elevation of machinery or equipment and location (Describe type of equipment and location)	on in Comments)		25.5 feet meters				
f) Lowest adjacent (finished) grade next (o building (LAG)		24.1 feet meters				
g) Highest adjacent (finished) grade next	to building (HAG)		25.3 🔀 feet 🗌 meters				
 h) Lowest adjacent grade at lowest elevations structural support 	tion of deck or stairs, including		NA Geet meters				
SECTION D - SUF	RVEYOR, ENGINEER, OR ARC	HITECT CERTIF	ICATION				
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 provide	led by a licensed land surveyor?	Yes No	Check here if attachments.				
Certifier's Name	License Number						
JAN K. DALE	L-12236		CARO				
Title PROFESSIONAL LAND SURVEYOR			S OF ESSION 1				
Company Name		******	- 150° 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Company Name			\$ L-\$2\$36 \$\$				
Address							
891 COPAS ROAD			No sunte				
City	State	ZIP Code	ANSOR				
SHALLOTTE	North Carolina	28470					
Signature	Date 111-5-19	Telephone 9107544477	Ext.				
Copy all pages of this Elevation Certificate and al			agent/company, and (3) building owner.				
Samuella (moleculary type of equipment and lot	Comments (including type of equipment and location, per C2(e), if applicable)						

BUILDING PHOTOGRAPHS

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See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
Building Street Address (including 1792 SAPPHIRE DRIVE	Policy Number:			
City	State	ZIP Code	Company NAIC Number	
LONGS	South Carolina	29568		

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 Caption

FRONT VIEW 10-9-19

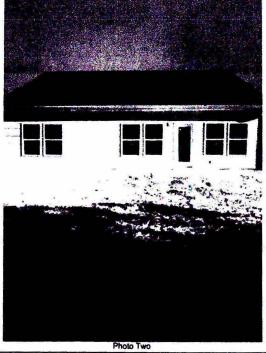


Photo Two Caption

REAR VIEW 10-9-19

BUILDING PHOTOGRAPHS

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***ELEVATION CERTIFICATE**

Continuation Page

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	IMPORTANT: In these spaces, copy	RTANT: In these spaces, copy the corresponding information from Section A.		FOR INSURANCE COMPANY USE	
V	Building Street Address (including Ap 1792 SAPPHIRE DRIVE	Policy Number:			
	Çitý	State	ZIP Code	Company NAIC Number	
/	LONGS	South Carolina	29568		

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.

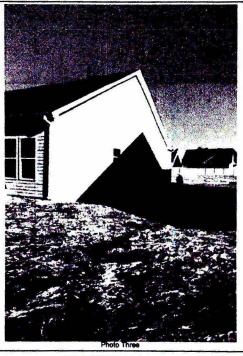


Photo Three Caption

LEFT VIEW 10-9-19



Photo Four Caption

RIGHT VIEW 10-9-19