84858

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.

	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		
A3.	Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)		
A5. A6.	Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Latitude/Longitude: Lat Long Horizontal Datum: Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.	□ NAD 1927 □ NAD 1983	
A8.	Building Diagram Number For a building with a crawl space or enclosure(s), provide a) Square footage of crawl space or enclosure(s) 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 d) Engineered flood openings? SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	ned garage sq ft openings in the attached garage we adjacent grade penings in A9.b sq in	
B1.	NFIP Community Name & Community Number B2. County Name	33. State	
310. li 311. li 312. li	B5. Suffix B6. FIRM Index Date Effective/Revised Date Zone(s) Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source: Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date CBRS OPA		
	SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRE	ED)	
A C2. El Ite	uilding elevations are based on: Construction Drawings Building Under Construction* 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, Amount of the building diagram specified in Item A7. Elenchmark Utilized		
СОМ	IMENTS:		
Date	of Review: Community Official:		
	evation certificates shall be maintained by the community and copies with the attached memo made available		

U.S. DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency National Flood Insurance Program

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.

SE	CTION A - PROPERT	Y INFOR	MATION		FOR INSUR	ANCE COMPANY USE
A1. Building Owner's Name CAVINESS AND CATES BUI	LDING & DEVELOPME	NT OF G	REENVILLE	LLC	Policy Numb	per:
A2. Building Street Address (Box No. 834 WACCAMAW RIVER RO		te, and/or	Bldg. No.) o	r P.O. Route and	Company N	AIC Number:
City MYRTLE BEACH			State South Ca	arolina	ZIP Code 29588	
A3. Property Description (Lo				gal Description, et	c.)	
A4. Building Use (e.g., Resid	lential, Non-Residential,	Addition,	Accessory,	etc.) RESIDEN	TIAL	
A5 Latitude/Longitude: Lat. A6. Attach at least 2 photogr						927 × NAD 1983
AT. Building Diagram Number	***					
A8. For a building with a craw	vispace or enclosure(s)					
a) Square footage of cra	wispace or enclosure(s)		N/A sq ft		_
b) Number of permanent	flood openings in the c	rawlspace	e or enclosur	e(s) within 1.0 foo	t above adjacent gra	ide N/A
c) Total net area of flood	openings in A8.b	4	N/A sq ir	1		
d) Engineered flood ope	nings? Yes 🗵	No /				
A9. For a building with an atta	ached garage:					
a) Square footage of atta	ached garage	/	608.00 sq f			
b) Number of permanent	flood openings in the a	ttached g	arage within	1.0 foot above ad	acent grade N/A	
c) Total net area of flood	openings in A9.b		N/A so	in		
d) Engineered flood ope	nings? Yes 🗵	No /				
	SECTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM) IN	ORMATION	
B1. NFIP Community Name of HORRY COUNTY 450104	& Community Number		B2. County HORRY CO			B3. State South Carolina
B4. Map/Panel B5. Suffi	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
45051COC0732 H	09-17-2003	03-30-	2006	AE	23	
B10. Indicate the source of t	he Base Flood Elevation					
B11. Indicate elevation datu	m used for BFE in Item	B9: ⊠ N	IGVD 1929	☐ NAVD 1988	Other/Source:	
B12. Is the building located	in a Coastal Barrier Res	ources S	ystem (CBRS	S) area or Otherwi	se Protected Area (0	OPA)? ☐ Yes ⊠ No
Designation Date: N/A] CBRS	□ ОРА			

9-7-18

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 20

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. Policy Number: 834 WACCAMAW RIVER ROAD Company NAIC Number State ZIP Code City 29588 MYRTLE BEACH South Carolina SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) Construction Drawings* Building Under Construction* X Finished Construction C1. Building elevations are based on: *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 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. |X | feet meters 26.37 a) Top of bottom floor (including basement, crawlspace, or enclosure floor) meters N/A b) Top of the next higher floor N/A feet meters Bottom of the lowest horizontal structural member (V Zones only) x feet 25.44 meters d) Attached garage (top of slab) Lowest elevation of machinery or equipment servicing the building 25.66 feet meters (Describe type of equipment and location in Comments) X 24.25 feet meters Lowest adjacent (finished) grade next to building (LAG) 24.75 × feet meters Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs, including feet meters N/A structural support 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. Were latitude and longitude in Section A provided by a licensed land surveyor? X Yes No Check here if attachments. License Number Certifier's Name JACQUES J. BONNETT 21431 Title PLS Company Name LOWER CAROLINA SURVEYING, INC. Address 3127 HWY 348 City State ZIP Code South Carolina 29569 LORIS Date Telephone Ext. Signature 09-06-2018 (843) 319-8169 Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner. Comments (including type of equipment and location, per C2(e), if applicable) LOWEST MACHINERY WILL BE A/C UNIT.

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

MPORTANT: In these spaces, copy the co	rresponding information from	om Section A.		FOR INSURAN	CE COMPANY USE
Building Street Address (including Apt., Unit, 334 WACCAMAW RIVER ROAD	Suite, and/or Bldg. No.) or P.	O. Route and B	ox No.	Policy Number:	
City	State	ZIP Code		Company NAIC	Number
MYRTLE BEACH	South Carolina	29588			
	DING ELEVATION INFOR OR ZONE AO AND ZONE			REQUIRED)	
For Zones AO and A (without BFE), complete complete Sections A, B,and C. For Items E1-enter meters.					
E1. Provide elevation information for the following the highest adjacent grade (HAG) and the highest grade (HAG)	e lowest adjacent grade (LA		ow whether	the elevation is	above or below
a) Top of bottom floor (including baseme crawlspace, or enclosure) is b) Top of bottom floor (including baseme		N/A [] feet	meters	s ☐ above or	below the HAG
crawlspace, or enclosure) is	ent, ————	N/A [] feet	meters	s 🔲 above or	below the LAG
E2. For Building Diagrams 6–9 with permane the next higher floor (elevation C2.b in	ent flood openings provided in	Section A Item	ns 8 and/or	9 (see pages 1-	2 of Instructions),
the diagrams) of the building is		N/A feet	meters	s above or	below the HAG
E3. Attached garage (top of slab) is		N/A feet	meters	s above or	below the HAG
 Top of platform of machinery and/or equ servicing the building is 	ipment	N/A [] feet	meters	s above or	below the HAG
E5. Zone AO only: If no flood depth number floodplain management ordinance?					
SECTION E PROPE	RTY OWNER (OR OWNER	e DEDDECENT	ATIVE) CE	PTIEICATION	
The property owner or owner's authorized recommunity-issued BFE) or Zone AO must sign	gn here. The statements in So	Sections A, B, a ections A, B, and	nd E for Zor d E are corr	ne A (without a rect to the best o	FEMA-issued or of my knowledge.
Property Owner or Owner's Authorized Repre	esentative's Name				
Address	Ci		Sta		ZIP Code
NA	N/	4		uth Carolina	NA
Signature	Da	nte	Tel	ephone	
Comments					
					here if attachments.

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

MPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Un 334 WACCAMAW RIVER ROAD	Policy Number:		
City	State	ZIP Code	Company NAIC Number
MYRTLE BEACH	South Carolina	29588	
SE	CTION G - COMMUNITY INF	FORMATION (OPTIONA	AL)
The local official who is authorized by law sections A, B, C (or E), and G of this Elevaused in Items G8–G10. In Puerto Rico only	ation Certificate. Complete the	e community's floodplain e applicable item(s) and	management ordinance can complete sign below. Check the measurement
	norized by law to certify eleva		ed and sealed by a licensed surveyor, te the source and date of the elevation
A community official completed sor Zone AO.	Section E for a building locate	d in Zone A (without a F	EMA-issued or community-issued BFE)
33. The following information (Items	G4-G10) is provided for com	munity floodplain manaç	gement purposes.
G4. Permit Number	G5. Date Permit Issued	d G	6. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	☐ New Construction ☐ S	Substantial Improvement	
 Elevation of as-built lowest floor (inclined of the building: 		feet meters Datum	
39. BFE or (in Zone AO) depth of flooding	g at the building site:		feet meters Datum
G10. Community's design flood elevation:			feet meters Datum
ocal Official's Name		Title	
Community Name		Telephone	
Signature		Date	
Comments (including type of equipment ar	nd location, per C2(e), if applic	cable)	
			Check here if attachments

BUILDING PHOTOGRAPHS

9-7-18

ELEVATION CERTIFICATE See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

834 WACCAMAW RIVER ROAD

City
State
South Carolina
South Carolina
South Carolina
Section A.

FOR INSURANCE COMPANY USE
Policy Number:

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 Caption FRONT

Clear Photo One



Photo Two

Photo Two Caption BACK

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

MPORTANT: In these spaces, copy to		FOR INSURANCE C	UMPANT US	
Building Street Address (including Apt., 834 WACCAMAW RIVER ROAD	Policy Number:			
City MYRTLE BEACH	State South Carolina	ZIP Code 29588	Company NAIC Num	ber
If submitting more photographs than with: date taken; "Front View" and photographs must show the foundation	vill fit on the preceding page, af 'Rear View'; and, if required, with representative examples of	fix the additional photogr "Right Side View" and the flood openings or ven	aphs below. Identify all "Left Side View." Whe ts, as indicated in Section	photographs n applicable, on A8.
	Photo Th	ree		
	Photo Three			
Photo Three Caption		W 41 11215 W.		Clear Photo Th
	Photo Fo	our		
	Photo Fo	our		
	Photo Four			