U.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.

	SEC	TION A - PROPERT	Y INFOR	MATION			FOR INSUF	RANCE COMPANY USE
A1. Building Owr Bill & Karen Buhr							Policy Num	ber:
A2. Building Stre Box No. 1216 Sharks Tool		cluding Apt., Unit, Su	ite, and/o	r Bldg. No.) (	or P.O.	Route and	Company N	IAIC Number:
City State Myrtle Beach South Carolina				ZIP Code 29576				
		and Block Numbers, T 911030301, Site #121			Palling			
A4. Building Use	(e.g., Resider	ntial, Non-Residential,	, Addition	, Accessory,	etc.)	Residential		
A5. Latitude/Long	gitude: Lat. 3	3° 37' 21.6" N	Long. 7	8° 57' 43.8" \	W	Horizontal [	Datum: NAD	1927 X NAD 1983
A6. Attach at leas	st 2 photograp	hs of the building if th	ne Certific	cate is being	used to	obtain flood	insurance.	
A7. Building Diag	ram Number	6						
A8. For a build no	g with a crawls	space or enclosure(s)	:					
a) Square fo	otage of crawl	Ispace or enclosure(s	;)		182.0	0 sq ft		
b) Number of	f permanent fle	ood openings in the c	rawlspac	e or enclosur	re(s) wi	thin 1.0 foot a	bove adjacent gra	ade N/A
c) Total net a	area of flood o	penings in A8.b		N/A sqi	in			
d) Engineere	ed flood openir	ngs? Yes 🗵	No					
	- W. W.	STATE OF STATE						
A9. For a building								
a) Square for	otage of attach	ned garage		N/A sq t	ft			
b) Number of	f permanent flo	ood openings in the a	ttached g	garage within	1.0 foc	ot above adjac	ent grade N/A	
c) Total net a	rea of flood of	penings in A9.b	100	N/A so	q in			
d) Engineere	d flood openin	ngs? Yes 🗵	No					
	SI	ECTION B - FLOOD	INSURA	ANCE RATE	MAP	(FIRM) INFO	RMATION	
B1. NFIP Commu Horry County	nity Name & 0	Community Number 450104		B2. County Horry	/ Name			B3. State South Carolina
B4. Map/Panel Number 45051C0752	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel fective/ evised Date 1999	B8. F Zone	e(s)	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Dept	
	100000		14				4	
The state of the s	The second second	Base Flood Elevation				pth entered in	1 Item B9:	
☐ FIS Prot	lie X FIRM	Community Dete	rmined [	Other/Sol	urce: _		-	
B11. Indicate ele	vation datum (	used for BFE in Item I	B9: ⊠ N	IGVD 1929	□ NA	VD 1988	Other/Source:	
B12. Is the buildi	ng located in a	a Coastal Barrier Res	ources S	vstem (CBRS	S) area	or Otherwise	Protected Area (	OPA)? ☐ Yes ☒ No
Designation			CBRS	□ OPA	o) area	or otherwise	Totected Area (	SIA): [ Tes K NO
Doolghanon	Date.		CBRS	☐ OPA				
Sant Land			4					

1/8/18 7/7/21 BLEVATION CERTIFICATE

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MPORTANT: In these spaces, copy the corresponding information from Section A.	FOR INSURANCE	OMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1216 Sharks Tooth Trail	Policy Number:	
City State ZIP Code Myrtle Beach South Carolina 29576	Company NAIC Nun	per
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY)	REQUIRED)	100
C1. Building elevations are based on: Construction Drawings* Building Under Const *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, A Complete Items C2.a–h below according to the building diagram specified in Item A7. In Pue Benchmark Utilized: SCCC 5200B Vertical Datum: NGVD 1929	R/AE, AR/A1–A30, AR/	Construction  H, AR/AO.
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) b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support  SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERT	Check the measure 14.3	meters
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized I certify that the information on this Certificate represents my best efforts to interpret the data ava 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? Yes No	by law to certify elevation illustration in the state of	any false
Certifier's Name License Number Ira Hardwick 25085	annun a	A POCINIA
Company Name Nelson L. Hardwick & Associates, Inc.  Address PO Box 15909  City Surfside Beach South Carolina  NELSON L HARDWICK PASSOCIATE No. 1033	Pla Pla He	CO SO CONTRACTOR OF THE PARTY O
Signature Date Telephone (843) 238-1142	PERSONAL MICHAEL	20.00
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance Comments (including type of equipment and location, per C2(e), if applicable)  1) A8(a) is the total square feet of the storage enclosure and the elevator shaft enclosure.  2) C2(a) refers to a nonstructural, unfinished storage enclosure.  3) C2(e) refers to the A/C unit stand.  4) Building has a 39 sq.ft. elevator shaft, sump elevation is 13.7.	agenicompany, and (	Julium Gowner.

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## **ELEVATION CERTIFICATE**

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.					FOR INSURANCE COMPANY USE		
Building Street Add 1216 Sharks Tooth	dress (including Apt., Unit, Suite, a h Trail	and/or Bldg. No.) or F	<sup>2</sup> .O. Route and Bo	ox No.	Policy Number	<b>C</b>	
City Myrtle Beach		State South Carolina	ZIP Code 29576		Company NAI	C Number	
	SECTION E – BUILDING FOR ZO	ELEVATION INFOR			REQUIRED)		
	A (without BFE), complete Items A, B,and C. For Items E1–E4, us	s E1–E5. If the Certific	cate is intended to	o support a			
E1. Provide elevat the highest ad	ation information for the following a djacent grade (HAG) and the lowe			ow whether	the elevation is	s above or below	
crawlspace	tom floor (including basement, be, or enclosure) is tom floor (including basement,	- 10 Table	feet	meters	s above o	or below the HAG.	
	tom floor (including basement, ee, or enclosure) is	1-	feet	meters	s above o	or below the LAG.	
the next highe	Diagrams 6–9 with permanent floo er floor (elevation C2.b in ) of the building is	od openings provided		ns 8 and/or		I–2 of Instructions), or □ below the HAG.	
E3. Attached garage			A State of the Sta	meters		or below the HAG.	
	m of machinery and/or equipment	t	leet			or below the HAG.	
E5. Zone AO only:	/: If no flood depth number is avail	ilable, is the top of the	e bottom floor elev	vated in acc	cordance with the	the community's	
	SECTION F - PROPERTY O	Mary and the Sale	Land Review	CHARL.			
community-issued	er or owner's authorized represent BFE) or Zone AO must sign here Owner's Authorized Representat	ntative who completes e. The statements in S	Sections A, B, an	nd E for Zoi	ne A (without a	a FEMA-issued or	
Address		The Ewil	City	Sta	ate	ZIP Code	
					7 - 1	<b>□</b>	
Signature		D	Date	Tel	lephone		
Comments			1 7.74				
al-							
F. M. Service						XX Dis	
					Check	here if attachments.	

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## **ELEVATION CERTIFICATE**

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

			Empiration Date (10)	THE OF CO, ECLE
IMPORTANT: In these spaces, copy the			FOR INSURANCE C	DMPANY USE
Building Street Address (including Apt., U 1216 Sharks Tooth Trail	nit, Suite, and/or Bldg. No.) or F	P.O. Route and Box No.	Policy Number:	
City	State	ZIP Code	Company NAIC Num	per
Myrtle Beach	South Carolina	29576	The second second	
S	ECTION G - COMMUNITY INF	ORMATION (OPTIONA	L)	
The local official who is authorized by law Sections A, B, C (or E), and G of this Ele used in Items G8–G10. In Puerto Rico or	vation Certificate. Complete the	community's floodplain applicable item(s) and s	management ordinance c sign below. Check the me	in complete isurement
	as taken from other documentat uthorized by law to certify elevat ow.)			
G2. A community official completed or Zone AO.	Section E for a building located	d in Zone A (without a F	EMA-issued or community	issued BFE)
G3.  The following information (Item	s G4–G10) is provided for comr	munity floodplain manag	ement purposes.	703
G4. Permit Number	G5. Date Permit Issued	l G	Date Certificate of Compliance/Occupancy	Issued
G7. This permit has been issued for:	☐ New Construction ☐ S	ubstantial Improvement		
G8. Elevation of as-built lowest floor (incof the building:	cluding basement)		feet  meters Datum	
G9. BFE or (in Zone AO) depth of floodi	ing at the building site:		feet meters Datum	
G10. Community's design flood elevation	·		feet  meters Datum	
Local Official's Name	1	Title		
Community Name		Telephone		1
Signature		Date		186
Comments (including type of equipment a	and location, per C2(e), if applic	able)		
				1 1
				307
			☐ Check here	f attachments.

#### **BUILDING PHOTOGRAPHS**

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#### **ELEVATION CERTIFICATE**

See Instructions for Item A6.

IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE Policy Number:		
Building Street Address (including 1216 Sharks Tooth Trail			
City	State	ZIP Code	Company NAIC Number
Myrtle Beach	South Carolina	29576	

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 Front View 06-23-2021

Clear Photo One

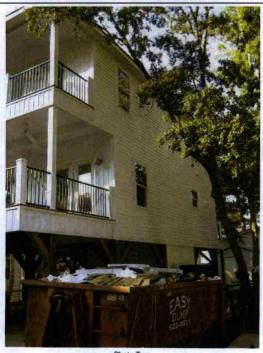


Photo Two

Photo Two Caption Right Side View

06-23-2021

Clear Photo Two



### **ELEVATION CERTIFICATE**

#### **BUILDING PHOTOGRAPHS**

Continuation Page

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IMPORTANT: In these spaces, co	FOR INSURANCE	OMPANY USE		
Building Street Address (including 1216 Sharks Tooth Trail	Policy Number:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
City	State	ZIP Code	Company NAIC Nun	ber
Myrtle Beach	South Carolina	29576	1 S. 181 1	

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.

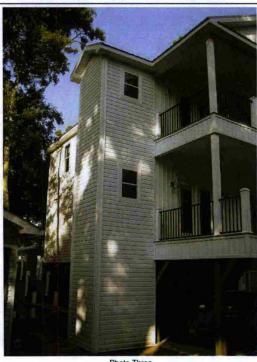


Photo Three

Photo Three Caption Left Side View

06-23-2021

lear Photo Three



Photo Four

Photo Four Caption Rear View

06-23-2021

Clear Photo Four