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

76122

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,

| | SECT | ION A - PROPERTY | / INFORMATION | | FOR INSURAN | ICE COMPANY USE |
|--|--|---|--|---|---|--------------------------------|
| A1. Building Owner RS PARKER HOM | | / | | | Policy Number | : |
| A2. Building Street Box No. 1937 Pine Cone La | / | cluding Apt., Unit, Suit | te, and/or Bldg. N | lo.) or P.O. Route and | Company NAI | Number: |
| City Longs | / | | Sta Sou | te uth Carolina | ZIP Code 29568 | |
| | | nd Block Numbers, Ta es phase 5b, PIN# 30 | | r, Legal Description, et | c.) | |
| A4. Building Use (| e.g., Residen | tial, Non-Residential, | Addition, Access | sory, etc.) RESIDEN | TIAL | |
| A5. Latitude/Longi | tude: Lat. 33 | 3d53'22.988" | Long. 78d42'17 | 632" Horizonta | Datum: NAD 192 | 7 × NAD 1983 |
| A6. Attach at least | t 2 photograpl | hs of the building if th | e Certificate is be | eing used to obtain floo | d insurance. | |
| A7. Building Diagra | am Number | 1A | | | | |
| A8. For a building | with a crawls | pace or enclosure(s): | | | | |
| a) Square foo | tage of crawls | space or enclosure(s) | | N/A sq ft | | |
| b) Number of | permanent flo | ood openings in the cr | awlspace or enc | losure(s) within 1.0 foot | above adjacent grade | N/A |
| | | penings in A8.b | | sq in | | |
| d) Engineered | | | No. | | | |
| | | | | | | |
| A9. For a building | with an attach | ed garage: | | | | |
| | | | | | | |
| a) Square foo | tage of attach | | 440.00 | sq ft | | |
| | | ed garage | ARTERVAL | sq ft ithin 1.0 foot above adj | acent grade N/A | |
| b) Number of | permanent flo | ed garage | ttached garage w | | acent grade N/A | |
| b) Number of | permanent flore | ned garageod openings in the at | ttached garage w | rithin 1.0 foot above adj | acent grade N/A | |
| b) Number of c) Total net ar | permanent flo rea of flood op I flood openin | ed garage ood openings in the at penings in A9.b gs? | ttached garage w | rithin 1.0 foot above adj | | |
| b) Number of c) Total net ar d) Engineered | permanent florea of flood op I flood openin | ed garage ood openings in the at penings in A9.b gs? | No INSURANCE R | rithin 1.0 foot above adj | ORMATION | 33. State |
| b) Number of c) Total net ar d) Engineered | permanent florea of flood opening. SE nity Name & C | ped garage pod openings in the at the penings in A9.b gs? | NO INSURANCE R | atte MAP (FIRM) INF | ORMATION | 33. State South Carolina |
| b) Number of c) Total net ar d) Engineered B1. NFIP Commun HORRY COUNTY B4. Map/Panel Number | permanent florea of flood opening flood opening SE mity Name & C 450104 B5. Suffix | ped garage | NO INSURANCE R B2. CC HORR B7. FIRM Pane Effective/ Revised Da | ATE MAP (FIRM) INFounty Name AY COUNTY BB. Flood Zone(s) | B9. Base Flood Elev (Zone AO, use B | South Carolina |
| b) Number of c) Total net ar d) Engineered B1. NFIP Commur HORRY COUNTY | permanent florea of flood opening flood opening SE hity Name & C 450104 | pod openings in the attention in A9.b gs? Yes X I CCTION B – FLOOD Community Number B6. FIRM Index | NO INSURANCE R B2. CC HORR B7. FIRM Pane Effective/ | ATE MAP (FIRM) INFOUNTY BB. Flood Zone(s) | B9. Base Flood Elev | outh Carolina vation(s) |
| b) Number of c) Total net ar d) Engineered B1. NFIP Commur HORRY COUNTY B4. Map/Panel Number 45051COC0415 | permanent florea of flood opening. SEINITY Name & C 450104 B5. Suffix J source of the | pod openings in the attention and openings in A9.b gs? Yes X I CCTION B – FLOOD Community Number B6. FIRM Index Date 09-17-2003 Base Flood Elevation | NO INSURANCE R B2. Co HORR B7. FIRM Pane Effective/ Revised Da 03-30-2006 | ATE MAP (FIRM) INFounty Name AY COUNTY BB. Flood Zone(s) | B9. Base Flood Elev (Zone AO, use B | outh Carolina vation(s) |
| b) Number of c) Total net ar d) Engineered B1. NFIP Commur HORRY COUNTY B4. Map/Panel Number 45051COC0415 B10. Indicate the: | permanent florea of flood opening flood open | pod openings in the attention and openings in A9.b gs? Yes X I CCTION B – FLOOD Community Number B6. FIRM Index Date 09-17-2003 Base Flood Elevation | B2. Co HORR B7. FIRM Pane Effective/ Revised Da 03-30-2006 | ATE MAP (FIRM) INFOUNTY BI BB. Flood Zone(s) AE ase flood depth entered r/Source: LOMR 06-04 | B9. Base Flood Elev (Zone AO, use B | outh Carolina vation(s) |
| b) Number of c) Total net ar d) Engineered B1. NFIP Commun HORRY COUNTY B4. Map/Panel Number 45051COC0415 B10. Indicate the sign of th | permanent florea of flood opening. SE Dity Name & C 450104 B5. Suffix J source of the de FIRM | pod openings in the attention and openings in A9.b gs? Yes X I CCTION B – FLOOD Community Number B6. FIRM Index Date 09-17-2003 Base Flood Elevation Community Determined the BFE in Item Entered Section 1.5 In Item Entered | B7. FIRM Pane Effective/ Revised Da 03-30-2006 | ATE MAP (FIRM) INFOUNTY BI BB. Flood Zone(s) AE ase flood depth entered r/Source: LOMR 06-04 | B9. Base Flood Elev (Zone AO, use B 20.5 I in Item B9: 4-B138X-450104 Other/Source: | ration(s) Base Flood Depth) |
| b) Number of c) Total net ar d) Engineered B1. NFIP Commun HORRY COUNTY B4. Map/Panel Number 45051COC0415 B10. Indicate the sign of th | permanent florea of flood opening flood open | pod openings in the attention and openings in A9.b gs? Yes X I CCTION B – FLOOD Community Number B6. FIRM Index Date 09-17-2003 Base Flood Elevation Community Determined the BFE in Item Entered Section 1.5 In Item Entered | B7. FIRM Pane Effective/ Revised Da 03-30-2006 | A sq in ATE MAP (FIRM) INFOUNTY BI B8. Flood Zone(s) AE B8. Flood Zone(s) AE | B9. Base Flood Elev (Zone AO, use B 20.5 I in Item B9: 4-B138X-450104 Other/Source: | ration(s) Base Flood Depth) |

76122 3-2-2018 RMCevi22

ELEVATION CERTIFICATE

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

| MPORTANT: In these spaces, copy the co | FOR INSURANCE COMPANY US | | | | | | |
|---|--|---|-------------------------|---------------------------|------------------|-------------------------|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1937 Pine Cone Lane | | | | | Policy Number: | | |
| ity ongs | State South Carolina | ZIP Code 29568 | Company NAIC Number | | er | | |
| SECTION C - B | UILDING ELEVATION INFOR | MATION (SURVEY | REQUIR | D | | | |
| C1. Building elevations are based on: *A new Elevation Certificate will be red | | Building Under Consoulding is complete. | truction* | ⊠ Finis | ned C | onstruction | |
| C2 Elevations – Zones A1–A30, AE, AH, A Complete Items C2.a–h below accordi | ng to the building diagram speci | fied in Item A7. In Pu | R/AE, AR erto Rico d | /A1–A30, / only, enter | AR/AF meter | H, AR/AO. | |
| Benchmark Utilized: SCVRS | | tum: NGVD 1929 | | | | | |
| Indicate elevation datum used for the | ACCUPATION AND ADDRESS OF THE PARTY OF THE P | below. | | | | | |
| NGVD 1929 NAVD 198 Datum used for building elevations mu | | the BFF | | | - | | |
| Datum used for building elevations mu | st be the same as that used for | the bit E. | Ch | eck the me | easure | ement used | |
| a) Top of bottom floor (including base | ment, crawlspace, or enclosure | floor) | 27.48 | × feet | | meters | |
| b) Top of the next higher floor | | - | N/A | feet | | meters | |
| c) Bottom of the lowest horizontal stru | ctural member (V Zones only) | | N/A | ☐ feet | | meters | |
| d) Attached garage (top of slab) | | 1244 | 26.98 | × feet | | meters | |
| e) Lowest elevation of machinery or e (Describe type of equipment and lo | quipment servicing the building cation in Comments) | | 27.15 | | | meters | |
| 1) Lowest adjacent (finished) grade n | ext to building (LAG) | | 26.30 | × feet | | meters | |
| g) Highest adjacent (finished) grade n | | | 26.60 | × feet | | meters | |
| Lowest adjacent grade at lowest el structural support | | ng | N/A | ☐ feet | | meters | |
| SECTION D - | SURVEYOR, ENGINEER, OR | ARCHITECT CERT | IFICATIO | N | | | |
| This certification is to be signed and sealed I certify that the information on this Certificant statement may be punishable by fine or im, | ate represents my best efforts to | interpret the data av | by law to ailable. I u | certify ele- nderstand | vation that a | information ny false | |
| Were latitude and longitude in Section A pr | ovided by a licensed land surve | yor? ⊠Yes □N | | Check her | e if at | ttachments | |
| Certifier's Name JACQUES J. BONNETT | License Numbe 21431 | r | | mili | III), | 211. | |
| Title PLS | | | | II OU | LLA | 0.1 | |
| Company Name LOWER CAROLINA SURVEYING, INC. | | (8) | WHITE, | PROFE | 2143 | DRIVEY | |
| Address 3127 HWY 348 | | | 11. | CO | ier de | 1 | |
| City LORIS | State South Carolina | ZIP Code 29569 | | THES | J. BC | William | |
| Signature | Date 02-26-2018 | Telephone (843) 319-816 | Ext. | | | | |
| Copy all pages of this Elevation Certificate at | nd all attachments for (1) commun | nity official, (2) insuran | ce agent/c | ompany, a | nd (3) | building ow | |
| Comments (including type of equipment and LOWEST MACHINERY WILL BE A/C UNIT B138X-450104. | nd location, per C2(e), if application. THE BFE AND EFFECTIVE D | ole) DATE WAS ADJUSTE | ED ACCOR | RDING TO | LOMI | R 06-04- | |

76122 3-2.2018 RMLEVI 22

ELEVATION CERTIFICATE

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

| SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) or ZONEs AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, omplete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Ricc only, neter meters. 1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawlspace, or enclosure) is | MPORTANT: In these spaces, copy the correspond | | | | | FOR INSURAN | ICE CO | MPANY US |
|--|---|---|------------------------------|----------------------|-----------------------|----------------------------------|------------------------|---|
| Section E - Building ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO And A (without BFE), complete Items 51–55. If the Certificate is intended to support a LOMA or LOMR-F request, maniplets Sections A, B, and C. For Items 61–64, use natural grade, if available. Check the measurement used. In Puerto Rico only, their meters. 1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). 3. Top of bottom floor (including basement, craw/space, or enclosure) is N/A feet meters above or below the H 5. For Building Diagrams 5-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1-2 of Instructions the next higher floor (levation C2 b in the diagrams) of the building is N/A feet meters above or below the H 4. Too of platform of machinery and/or equipment servicing the building is N/A feet meters above or below the H 5. Zone AO only. If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodglain management ordinance? Yes No Unknown. The local official must certify this information in Section SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION he property owner or owner's authorized representative's Name A NA South Carolina NA South Carolina NA Telephone Telephon | duilding Street Address (including Apt., Unit, Suite, an 937 Pine Cone Lane | d/or Bldg. No.) or | P.O. Route | e and Bo | ox No. | Policy Number: | | |
| SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZOME AO AND ZONE A (WITHOUT BEE). or Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, amplete Sections A, B, and C. For Items E1–E4, use natural grade, if available, Check the measurement used. In Puerto Ricc only, there meters. 1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (LAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawlspace, or enclosure) is crawlspace of the provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions the next higher floor (elevation C2 b in the diagrams) of the building is N/A deet meters above or below the H the diagrams of the building is N/A deet meters above or below the H the diagrams of the building is N/A deet meters above or below the H the diagrams of the building is N/A deet meters above or below the H the diagrams of the building is N/A deet meters above or below the H the diagrams of the building is N/A deet meters above or below the H the diagrams of the building is N/A deet meters above or below the H to diagrams of the building is N/A deet meters above or below the H to diagrams of the building is N/A deet meters above or below the H to diagrams of the building is N/A deet meters above or below the H to diagrams of the building is N/A deet meters above or below the H to diagrams of the building is N/A deet meters above or below the H to diagrams of the building is N/A deet meters above or below the H to diagrams of the building is N/A deet meters deet deet deet d | ity | | | | / | Company NAIC | Numbe | er |
| FOR ZONE AO AND ZONE A (WITHOUT BFE). complete Items E1—E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C, For Items E1—E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, ther meters. 1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). 2. Top of bottom floor (including basement, craw/space, or enclosure) is 2. For Building Diagrams 6—9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1—2 of Instructions the next higher floor (elevation C2 b in the diagrams) of the building is 3. Attached garage (top of slab) is 4. Top of platform of machinery and/or equipment servicing the building is 5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community servicing the building is SECTION F — PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or mominity-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge roperty Owner or Owner's Authorized Representative's Name A NA South Carolina NA South Carolina NA South Carolina NA Signature Date Telephone | | | | | | | | |
| implete Sections A, B, and C. For Items Et1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, iter meters. 1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (LAG). a) Top of bottom floor (including basement, crawlspace, or enclosure) is including including is including including is including is including | | | | | | REQUIRED) | | |
| the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is L. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions the next higher floor (elevation C2.b in the diagrams) of the building is N/A feet meters above or below the Hamber of the diagrams of the building is N/A feet meters above or below the Hamber of the diagrams of the building is N/A feet meters above or below the Hamber of the building is N/A feet meters above or below the Hamber of platform of machinery and/or equipment servicing the building is N/A feet meters above or below the Hamber of platform of machinery and/or equipment servicing the building is N/A feet meters above or below the Hamber of platform of machinery and/or equipment servicing the building is N/A feet meters above or below the Hamber of platform of machinery and/or equipment servicing the building is N/A feet meters above or below the Hamber of platform of machinery and/or equipment servicing the building is N/A feet meters above or below the Hamber of platform of machinery and/or equipment servicing the building is N/A feet meters above or below the Hamber of platform of the building is N/A feet meters above or below the Hamber of platform of the building is N/A feet meters above or below the Hamber of platform of the building is N/A feet meters above or below the Hamber of platform of the building is N/A feet meters above or below the Hamber of platform of the building is N/A feet meters above or below the Hamber of platform of the building is N/A feet meters above or below the Hamber of platform of pl | emplete Sections A, B, and C. For Items E1-E4, use | 1–E5. If the Certifi natural grade, if a | cate is inte vailable. Cl | ended to neck the | support a measurer | LOMA or LOMF ment used. In Pu | R-F requirents Richard | iest, co only, |
| crawfspace, or enclosure) is | the highest adjacent grade (HAG) and the lowest | | | s to sho | w whether | the elevation is | above | or below |
| crawlspace, or enclosure) is | | | N/A | feet | meters | s above or | bel | ow the HAG |
| the next higher floor (elevation C2.b in the diagrams) of the building is N/A | Top of bottom floor (including basement, crawlspace, or enclosure) is | | N/A | feet | meter | s above or | □ bel | low the LAG |
| the diagrams) of the building is N/A Geet meters above or below the H 3. Attached garage (top of slab) is N/A Geet meters above or below the H 4. Top of platform of machinery and/or equipment servicing the building is N/A Geet meters above or below the H 5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or operty Owner or Owner's Authorized Representative's Name A Na South Carolina NA State ZIP Code A NA South Carolina NA Ignature Date Telephone Te | | openings provided | I in Section | A Item | s 8 and/or | 9 (see pages 1- | -2 of Ins | tructions), |
| 4. Top of platform of machinery and/or equipment servicing the building is N/A feet meters above or below the H servicing the building is N/A feet meters above or below the H servicing the building is N/A feet meters above or below the H servicing the building is N/A feet meters above or below the H servicing the building is N/A feet meters above or below the H servicing the building is N/A feet meters above or below the H servicing the building is N/A feet meters above or below the H servicing the building is N/A feet meters above or below the H servicing the building is N/A feet meters above or below the H servicing the building is N/A feet meters above or below the H servicing the building is N/A feet meters above or below the H servicing the building is N/A feet meters above or below the H servicing the building is N/A feet meters above or below the H servicing the building is N/A feet meters above or below the H servicing the servicing the building is N/A feet meters above or below the H servicing the servic | | | N/A | feet | meter | s above or | bel | ow the HAG |
| servicing the building is N/A feet meters above or below the H 5. Zone AO only. If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION Reproperty owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or ommunity-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge roperty Owner or Owner's Authorized Representative's Name A City State ZIP Code A NA South Carolina NA Ignature Date Telephone Omments | 3. Attached garage (top of slab) is | | N/A | feet | meter | s above or | bel | ow the HAG |
| SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or ommunity-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge roperty Owner or Owner's Authorized Representative's Name A City State ZIP Code A NA South Carolina NA signature Date Telephone | Top of platform of machinery and/or equipment servicing the building is | 30 | N/A | feet | meter | s above or | bel | ow the HAG |
| SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION the property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or ommunity-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge representative's Name IA IA IA IA IA IA IA IA IA I | 5. Zone AO only: If no flood depth number is availat | ole, is the top of th | e bottom fl | oor elev | rated in acciding | cordance with the | e comm | nunity's |
| the property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or ommunity-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge roperty Owner or Owner's Authorized Representative's Name A ddress City State ZIP Code NA South Carolina NA Signature Date Telephone | noodpan management ordinaries : [100 [| _ 140 | | loodi oii | iolai iiiaot (| scrary and mileri | idioi ii | Occion C. |
| Signature Date Telephone Comments | JA ddress | | | | | | | 100000000000000000000000000000000000000 |
| comments | | | | | | | INA | |
| | igriature | | Date | | 10 | герпопе | | |
| | omments | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| [[hock here it attachme | | | | | | Check | here if | attachmente |

76123 J-2-2019 RMLeui22

ELEVATION CERTIFICATE

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

| IMPORTANT: In these spaces, copy to | the corresponding information for | rom Section A. | FOR INSURANCE COMP | ANY USE |
|---|--|--------------------------|---|-----------|
| Building Street Address (including Apt. 1937 Pine Cone Lane | . Policy Number: | | | |
| City Longs | State South Carolina | ZIP Code 29568 | Company NAIC Number | |
| | SECTION G - COMMUNITY INFO | ORMATION (OPTION | AL) | |
| The local official who is authorized by Sections A, B, C (or E), and G of this E used in Items G8–G10. In Puerto Rico | Elevation Certificate. Complete the only, enter meters. | applicable item(s) and | sign below. Check the measure | ement |
| engineer, or architect who is data in the Comments area b | | ion information. (Indica | te the source and date of the ele | evation |
| or Zone AO. | ted Section E for a building located ems G4–G10) is provided for comr | | | ed BFE) |
| G3. The following information (Ite | erns G4–G 10) is provided for confi | numity hoodplain mana | gement purposes. | |
| G4. Permit Number | G5. Date Permit Issued | 0 | 66. Date Certificate of Compliance/Occupancy Issu | ued |
| G7. This permit has been issued for: | ☐ New Construction ☐ S | ubstantial Improvemen | 1 | |
| G8. Elevation of as-built lowest floor (of the building: | (including basement) | | feet meters Datum | |
| G9. BFE or (in Zone AO) depth of floor | oding at the building site: | | feet meters Datum | |
| G10. Community's design flood elevat | ion: | | feet meters Datum | |
| Local Official's Name | | Title | | |
| Community Name | | Telephone | | |
| Signature | 1 | Date | | |
| Comments (including type of equipment | nt and location, per C2(e), if applic | able) | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | ☐ Check here if att | achments. |

76122

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

ZMLEU. 22 OMB No. 1660-0008

Expiration Date: November 30, 2018

| IMPORTANT: In these spaces, cop | FOR INSURANCE COMPANY US | | | |
|--|--------------------------|----------|---------------------|--|
| Building Street Address (including Ap 1937 Pine Cone Lane | Policy Number: | | | |
| City | State | ZIP Code | Company NAIC Number | |

South Carolina

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.

29568



Photo One

Photo One Caption FRONT

ELEVATION CERTIFICATE

Longs

Clear Photo One



Photo Two

BUILDING PHOTOGRAPHS

Continuation Page

76122 3-2-2019 RMLevi22 OMB No. 1660-0008

ELEVATION CERTIFICATE

Expiration Date: November 30, 2018 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: 1937 Pine Cone Lane City 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 Photo Three Photo Three Caption Clear Photo Three Photo Four Photo Four Photo Four Caption Clear Photo Four