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.

A1. Building Owner's Name Martin Land Holdings A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: City Conway State South Carolina A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TMS: 138-27-01-024 PIN: 366-03-04-0008 Bridgewater Subdivision Phase 1 Lot 30 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A5. Latitude/Longitude: Lat. N33° 49' 46" Long. W78° 59' 42" Horizontal Datum: NAD 1927 NAD 19 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 5 A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s): b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A c) Total net area of flood openings in A8.b N/A sq in d) Engineered flood openings? Yes No A9. For a building with an attached garage a) Square footage of attached garage b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A c) Total net area of flood openings in the attached garage within 1.0 foot above adjacent grade N/A c) Total net area of flood openings in the attached garage within 1.0 foot above adjacent grade N/A c) Total net area of flood openings in the attached garage within 1.0 foot above adjacent grade N/A c) Total net area of flood openings in Nab.b N/A sq in d) Engineered flood openings? Yes No SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number Horry County Horry County Horry County		SECTION A - PROPERTY	INFORMATION		FOR INSUF	RANCE COMPANY USE
City Conway State South Carolina 29526 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TMS: 138-27-01-024 PIN: 366-03-04-0008 Bridgewater Subdivision Phase 1 Lot 30 A5. Latitude/Longitude: Lat. N 33° 49′ 46″ Long. W 78° 59′ 42″ Horizontal Datum: NAD 1927 NAD 19 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 5 A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A C) Total net area of flood openings? Yes No A9. For a building with an attached garage: a) Square footage of attached garage N/A sq ft b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A C) Total net area of flood openings in the attached garage within 1.0 foot above adjacent grade N/A C) Total net area of flood openings in the attached garage within 1.0 foot above adjacent grade N/A C) Total net area of flood openings in A9.b N/A sq ft b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A C) Total net area of flood openings in A9.b N/A sq in 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	A1. Building Owner's Name		s√		Policy Num	ber:
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A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s)	A6. Attach at least 2 photo	graphs of the building if the	e Certificate is being	used to obtain flood	d insurance.	
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d) Engineered flood openings?					acent grade N/A	
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name B3. State	c) Total net area of floo	od openings in A9.b	N/A so	ų in		
B1. NFIP Community Name & Community Number B2. County Name B3. State	d) Engineered flood op	enings? Yes X	No			
B1. NFIP Community Name & Community Number B2. County Name B3. State		SECTION B - FLOOD	INSURANCE RATE	MAP (FIRM) INF	ORMATION	
Horry County 450104 Horry County South Carolina	B1. NFIP Community Name	B2. County	Name		The state of the s	
	Horry County 450104		He	orry County		South Carolina
B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ B8. Flood B9. Base Flood Elevation(s) (Zone AO, use Base Flood Dept		THE PARTY OF THE P		TERMINAL PROPERTY.	B9. Base Flood E	levation(s)
Revised Date		= 34	Revised Date			e Base Flood Deptil)
45051C 0530 H 09-17-2003 08-23-1999 AE 14	45051C 0530 H	09-17-2003	08-23-1999	AE	14	
B10- Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:	B10 Indicate the source of	f the Base Flood Flevation	(BFE) data or base t	lood depth entered	in Item B9:	
☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other/Source:						
The state of the s			NOVE 4000	□ NAVD 1000	Other/Seume	
B11. Indicate elevation datum used for BFE in Item B9: X NGVD 1929 NAVD 1988 Other/Source:	B11. Indicate elevation dat	um used for BFE in Item E	39: X NGVD 1929	☐ NAVD 1988	U Other/Source.	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes	B12 Is the building locator	d in a Coastal Barrier Reso	ources System (CBR	S) area or Otherwis	e Protected Area (0	OPA)? Yes X No
Designation Date: CBRS OPA	Die building located					27 A 10 A 10
			CBRS OPA			

ELEVATION CERTIFICATE

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

				LAPITAL	ion Date. I	November 30, 2010	
IMPORTANT: In these spaces, copy the corresponding information from Section A.					FOR INSURANCE COMPANY USE		
Building Street Address (including A 1728 Bridgewater Dr		Bldg. No.) or P.O.	Route and Box No.	Policy	Number:		
City	Star Sou		ZIP Code 29526	Compa	any NAIC	Number	
SECTIO	N C - BUILDING EL	EVATION INFORM	MATION (SURVEY R	EQUIRE	ED)		
 C1. Building elevations are based *A new Elevation Certificate v C2. Elevations – Zones A1–A30, Complete Items C2.a–h below Benchmark Utilized: GPS on 	vill be required when co AE, AH, A (with BFE), w according to the build	onstruction of the bu VE, V1–V30, V (wit ding diagram specifi	h BFE), AR, AR/A, AR	R/AE, AR	/A1–A30, /		
Indicate elevation datum used	for the elevations in it	ems a) through h) b	elow.		*		
Datum used for building eleva	tions must be the sam	e as that used for th				easurement used.	
a) Top of bottom floor (include		ace, or enclosure fl	oor)	18.9	x feet	☐ meters	
b) Top of the next higher floo				N/A	☐ feet	☐ meters	
Bottom of the lowest horiz		er (V Zones only)	-	N/A	☐ feet	☐ meters	
d) Attached garage (top of s			To the second	N/A	feet	meters	
Lowest elevation of machi (Describe type of equipme	nery or equipment sen ent and location in Com	vicing the building ments)		18.9		meters	
f) Lowest adjacent (finished)	grade next to building	(LAG)	-	15.0	× feet	meters	
g) Highest adjacent (finished) grade next to building	(HAG)		15.5	× feet	meters	
h) Lowest adjacent grade at structural support	lowest elevation of dec	k or stairs, including		N/A	feet	meters	
SECTI	ON D - SURVEYOR,	ENGINEER, OR A	ARCHITECT CERTIF	ICATIO	N		
This certification is to be signed an I certify that the information on this statement may be punishable by fi	Certificate represents ine or imprisonment un	my best efforts to it der 18 U.S. Code,	nterpret the data avail Section 1001.	y law to able. I ur	certify elevenderstand	vation information. that any false	
Were latitude and longitude in Sec	tion A provided by a lic		or? ⊠Yes ∐No		Check her	e if attachments.	
Certifier's Name Kenneth D Jordan		License Number 21936					
Title Preisdent						lace (
Company Name K & R Land Surveyors		/		1	Venns	BA Jordan	
Address 312 Laurel Street					Var	lere	
City Conway		State South Carolina	ZIP Code 29526				
Signature Henneth D.	Jordan	Date 11-28-2018	Telephone (843) 488-1804	Ext.			
Copy all pages of this Elevation Cer	tificate and all attachme	nts for (1) communit	y official, (2) insurance	agent/co	ompany, an	nd (3) building owner	
Comments (including type of equip Elevations were determined using				ng NGS S	Software.		
HVAC elevated pad is 18.9' / No H	VAC installed at this til	me					

ELEVATION CERTIFICATE

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

IMP	ORTANT: In these space	ces, copy the cor	responding information f	rom Section A.		FOR INSURAN	ICE COMPANY USE
Bui		eluding Apt., Unit, S vater Drive	Suite, and/or Bldg. No.) or I	P.O. Route and B	ox No.	Policy Number	
City	Conway		State South Carolina	ZIP Code		Company NAIC	Number
	SEC		ING ELEVATION INFOR			REQUIRED)	
con	Zones AO and A (without plete Sections A, B, and er meters.	ut BFE), complete C. For Items E1-E	Items E1–E5. If the Certific E4, use natural grade, if av	cate is intended to ailable. Check the	support a L measurem	OMA or LOMF ent used. In Pu	R-F request, uerto Rico only,
E1.	Provide elevation inform the highest adjacent gra a) Top of bottom floor	ade (HAG) and the	wing and check the apprope lowest adjacent grade (L/	riate boxes to sho AG).	w whether	the elevation is	above or below
	crawlspace, or encl b) Top of bottom floor	osure) is (including basemer		feet			below the HAG.
	crawlspace, or encl			leet		- C	below the LAG.
E2.	for Building Diagrams the next higher floor (el the diagrams) of the bu	evation C2.b in	nt flood openings provided		s 8 and/or 9		2 of Instructions), below the HAG.
E3.	Attached garage (top of	f slab) is		feet	meters	above or	below the HAG.
E4.	Top of platform of mach servicing the building is	ninery and/or equip	oment	[feet	meters	above or	below the HAG.
E5.			available, is the top of the Yes No Unknow				
	SECT	TION F - PROPER	TY OWNER (OR OWNER	'S REPRESENT	ATIVE) CER	RTIFICATION	
The	property owner or owner	r's authorized repr	esentative who completes	Sections A, B, ar	d E for Zon	e A (without a l	EMA-issued or
			here. The statements in S	Sections A, B, and	E are corre	ct to the best o	f my knowledge.
Pro	perty Owner or Owner's	Authorized Repres	entative's Name				13010
Add	iress		C	ity	Stat	е	ZIP Code
Sig	nature		D	ate	Tele	phone	
Con	nments						
						☐ Check h	nere if attachments.

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, S 1728 Bridgewater Drive	uite, and/or Bldg. No.) or P.	O. Route and Box No.	Policy Number:
City	State South Carolina	ZIP Code 29526	Company NAIC Number
SECTION	ON G - COMMUNITY INFO	RMATION (OPTIONA	L)
engineer, or architect who is authoriz data in the Comments area below.)	Certificate. Complete the a ster meters. en from other documentation ted by law to certify elevation ion E for a building located	applicable item(s) and some that has been signe on information. (Indicate in Zone A (without a Fi	d and sealed by a licensed surveyor, the the source and date of the elevation
G4. Permit Number	G5. Date Permit Issued	Ge	Date Certificate of Compliance/Occupancy Issued
 G7. This permit has been issued for: G8. Elevation of as-built lowest floor (including of the building: G9. BFE or (in Zone AO) depth of flooding at G10. Community's design flood elevation: 			feet meters Datum
Local Official's Name	Ti	tle	
Community Name	Te	elephone	
Signature	Da	ate	
Comments (including type of equipment and lo	cation, per C2(e), if applical	ble)	
			Check here if attachments.

BUILDING PHOTOGRAPHS

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.

1728 Bridgewater Drive

City

State

ZIP Code
Conway

South Carolina

29526

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

Rear

Clear Photo Two

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

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.

1728 Bridgewater Drive

State
Conway

South Carolina

FOR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number

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 Right

ELEVATION CERTIFICATE

Clear Photo Three



Photo Four

Photo Four Caption

Left

Clear Photo Four