

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

\$\$1,2.9.21

Ad D. 11.11	SECTION A – PROPERTY INFORMATION				FOR INSURANCE COMPANY US		
A1. Building Owner's Name LENNAR CAROLINAS, LLC				P	Policy Number:		
A2. Building Stree Box No. 387 HILLWOO	an and areas have been	uding Apt., Unit, Suite	e, and/or Bldg. No.) or P.O.	Route and C	ompany NAIC Number:		
City State LONGS SC				Z	ZIP Code 29568		
		Block Numbers, Tax PIN# 266-09-03-0002	x Parcel Number, Legal De	scription, etc.)			
A4. Building Use (e.g., Residentia	al, Non-Residential, A	Addition, Accessory, etc.)	RESIDENTIAL			
45. Latitude/Long	itude: Lat. 3	3°55'27"N	Long. 78°44'29"W	Horizontal Datum:	NAD 1927 X NAD 198		
46. Attach at leas	t 2 photographs	of the building if the	Certificate is being used to	obtain flood insuranc	e.		
A7. Building Diag	ram Number	1A					
		ace or enclosure(s):					
		pace or enclosure(s)	N/A sq ft				
			awispace or enclosure(s) w	ithin 1.0 foot above ac	fiacent grade N/A		
	2	enings in A8.b					
d) Engineere	d flood opening	as? □Yes ⊠aN	lo				
A9. For a building	with an attach	edgarage:					
a) Square for	otage of attache	ed garage 399	sq ft				
170 - 51							
 b) Number o 	f permanent flo	od openings in the at	tached garage within 1.0 for	ot above adjacent gra	de N/A		
			tached garage within 1.0 for	ot above adjacent gra	deN/A		
c) Total net a	area of flood op	enings in A9.b	N/A sq in	ot above adjacent gra	de <u>N/A</u>		
c) Total net a		enings in A9.b	N/A sq in	ot above adjacent gra	de <u>N/A</u>		
c) Total net a	area of flood op ed flood opening	enings in A9.b gs?	N/A sq in				
c) Total net a d) Engineere	area of flood op ed flood opening SEC nity Name & Co	enings in A9.b gs?	N/A sq in No	(FIRM) INFORMAT			
 c) Total net a d) Engineere B1. NFIP Commu 	area of flood op ed flood opening SEC nity Name & Co	enings in A9.b gs? Yes Xt CTION B – FLOOD	N/A sq in No INSURANCE RATE MAP B2. County Name	(FIRM) INFORMAT	B3. State		
 c) Total net a d) Engineere B1. NFIP Commu HORRY COUN 34. Map/Panel Number 45051C0415 B10. Indicate the 	area of flood op ed flood opening SE(nity Name & Co TY 450104 B5. Suffix J source of the B	enings in A9.b gs? Yes M CTION B – FLOOD pommunity Number B6. FIRM Index Date 09/17/2003 ase Flood Elevation	N/A sq in No INSURANCE RATE MAP B2. County Name HORRY B7. FIRM Panel Effective/ Revised Date 09/17/2003 (BFE) data or base flood de	(FIRM) INFORMAT B8. Flood Zone(s) *AE,X	B3. State SC B9. Base Flood Elevation(s (Zone AO, use Base Flood Depth) 21		
 c) Total net a d) Engineere B1. NFIP Commu HORRY COUN 4. Map/Panel Number 45051C0415 B10. Indicate the FIS Prof 	area of flood op ed flood opening SEC nity Name & Co TY 450104 B5. Suffix J Source of the B ile X FIRM	enings in A9.b gs? Yes Xt CTION B – FLOOD I ommunity Number B6. FIRM Index Date 09/17/2003 ase Flood Elevation Community Deter	N/A sq in No INSURANCE RATE MAP B2. County Name HORRY B7. FIRM Panel Effective/ Revised Date 09/17/2003 (BFE) data or base flood de mined □Other/Source:	(FIRM) INFORMAT B8. Flood Zone(s) *AE,X epth entered in Item E	B3. State SC B9. Base Flood Elevation(s (Zone AO, use Base Flood Depth) 21		
 c) Total net a d) Engineere B1. NFIP Commun HORRY COUN 4. Map/Panel Number 45051C0415 B10. Indicate the □ FIS Prof B11. Indicate ele 	area of flood op ed flood opening SEC nity Name & Co TY 450104 B5. Suffix J source of the B ile X FIRM vation datum u	enings in A9.b gs? Yes X CTION B – FLOOD I ommunity Number B6. FIRM Index Date 09/17/2003 ase Flood Elevation Community Deter sed for BFE in Item E	N/A sq in No INSURANCE RATE MAP B2. County Name HORRY B7. FIRM Panel Effective/ Revised Date 09/17/2003 (BFE) data or base flood de mined Other/Source: 39: X NGVD 1929 N	(FIRM) INFORMAT B8. Flood Zone(s) *AE,X epth entered in Item E AVD 1988 Other	B3. State SC B9. Base Flood Elevation(s (Zone AO, use Base Flood Depth) 21 99:		
 c) Total net a d) Engineere B1. NFIP Commun HORRY COUN 4. Map/Panel Number 45051C0415 B10. Indicate the □ FIS Prof B11. Indicate ele 	area of flood op ed flood opening SEC nity Name & Co TY 450104 B5. Suffix J source of the B ile X FIRM vation datum u	enings in A9.b gs? Yes X CTION B – FLOOD I ommunity Number B6. FIRM Index Date 09/17/2003 ase Flood Elevation Community Deter sed for BFE in Item E	N/A sq in No INSURANCE RATE MAP B2. County Name HORRY B7. FIRM Panel Effective/ Revised Date 09/17/2003 (BFE) data or base flood de mined Other/Source: 39: X NGVD 1929 N	(FIRM) INFORMAT B8. Flood Zone(s) *AE,X epth entered in Item E AVD 1988 Other	B3. State SC B9. Base Flood Elevation(s (Zone AO, use Base Flood Depth) 21 B9:		
 c) Total net a d) Engineere B1. NFIP Commun HORRY COUN 4. Map/Panel Number 45051C0415 B10. Indicate the □ FIS Prof B11. Indicate ele 	area of flood op ed flood opening SE(nity Name & Co TY 450104 B5. Suffix J source of the B ile X FIRM vation datum us ing located in a	enings in A9.b gs? Yes X CTION B – FLOOD I ommunity Number B6. FIRM Index Date 09/17/2003 ase Flood Elevation Community Deter sed for BFE in Item E	N/A sq in No INSURANCE RATE MAP B2. County Name HORRY B7. FIRM Panel Effective/ Revised Date 09/17/2003 (BFE) data or base flood de mined Other/Source: 39: X NGVD 1929 N	(FIRM) INFORMAT B8. Flood Zone(s) *AE,X epth entered in Item E AVD 1988 Other	B3. State SC B9. Base Flood Elevation(s (Zone AO, use Base Flood Depth) 21 99:		
 c) Total net a d) Engineere B1. NFIP Commu HORRY COUN 4. Map/Panel Number 45051C0415 B10. Indicate the FIS Prof B11. Indicate ele B12. Is the build 	area of flood op ed flood opening SE(nity Name & Co TY 450104 B5. Suffix J source of the B ile X FIRM vation datum us ing located in a	enings in A9.b gs? Yes X CTION B – FLOOD I ommunity Number B6. FIRM Index Date 09/17/2003 ase Flood Elevation Community Deter sed for BFE in Item E	N/A sq in No INSURANCE RATE MAP B2. County Name HORRY B7. FIRM Panel Effective/ Revised Date 09/17/2003 (BFE) data or base flood dermined Other/Source: 89: X NGVD 1929 N Durces System (CBRS) area	(FIRM) INFORMAT B8. Flood Zone(s) *AE,X epth entered in Item E AVD 1988 Other	B3. State SC B9. Base Flood Elevation(s (Zone AO, use Base Flood Depth) 21 99:		

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 Address (including Apt., 387 HILLWOOD COURT	Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box N	No. Polic	y Number:			
City LONGS	State SC	ZIP Code 29568	Com	pany NAIC N	lumber		
SECTION C	- BUILDING ELEVATION I	NFORMATION (SURV	EY REQUI	RED)			
 C1. Building elevations are based on: *A new Elevation Certificate will b C2. Elevations – Zones A1–A30, AE, Complete Items C2.a–h below ac Benchmark Utilized: <u>SC VERS OF</u> Indicate elevation datum used for 	e required when construction of AH, A (with BFE), VE, V1–V30 cording to the building diagran BSERVATION Vert	of the building is comple D, V (with BFE), AR, AR, n specified in Item A7. In tical Datum: <u>NGVD29</u>	te. /A, AR/AE, A	R/A1–A30, A	NR/AH, AR/AO. Meters.		
🔀 NGVD 1929 🗌 NAVD	1988 Other/Source:	20 A					
Datum used for building elevation a) Top of bottom floor (including			C 4.7	heck the me	asurement used.		
b) Top of the next higher floor		21/1/12	I/A	X feet	meters		
c) Bottom of the lowest horizonta	l structural member (V Zones (2000 - 2000 2000 - 2000	I/A	X feet	meters		
d) Attached garage (top of slab)			4.1	X feet	☐ meters		
e) Lowest elevation of machinery (Describe type of equipment a	or equipment servicing the bundle of the bun	1	3.7	Xfeet	meters		
f) Lowest adjacent (finished) gra	de next to building (LAG)	3	3.5	X feet	meters		
g) Highest adjacent (finished) gra	ade next to building (HAG)	3	3.9	X feet	meters		
 h) Lowest adjacent grade at lowe structural support 	est elevation of deck orstairs, in	ncludingN	/A	X feet	meters		
SECTION	D – SURVEYOR, ENGINEE	R, OR ARCHITECT CI	ERTIFICATI	ON			
This certification is to be signed and se I certify that the information on this Ce statement may be punishable by fine of Were latitude and longitude in Section	rtificate represents my best effort for imprisonment under 18 U.S.	forts to interpret the data Code, Section 1001.	a available. I —	understand t	tion information. <i>hat any false</i> e if attachments.		
Certifier's Name WALTER B. SHEETS	License N L-26959			/30/2021	L-26959		
Title LAND SURVEYOR				SOUTH SOUTH	SSIG T		
Company Name RLA ASSOCIATES, PA							
Address 14323 OCEAN HIGHWAY, STE 4139					URVERE		
City PAWLEYS ISLAND	State SC	ZIP Code 29585		Source State	B. S. Manner		
Signature Waltor B.S.heetz	Date 11/30/2021		091				
Copy all pages of this Elevation Certifica	te and all attachments for (1) co	mmunity official, (2) insur	rance agent/c	ompany, and	(3) building owner.		
Comments (including type of equipme B4). THIS AREA ALSO APPEARS ON FLOOD P *B8 & B9). STRUCTURE APPEARS TO BE LOC C2. BENCHMARK USED: SC VERS OBSERVA C2 e). HVAC UNIT. ELEVATION SHOT ON TOF *SECTION B. LOT WAS PERMITTED UNDER F 45051C0440K, EFFECTIVE DATE 11/15/2021 (EFF C2. ELEVATIONS CONVERTED TO NAVD88 PI	ANEL 45051C0395J EFFECTIVE DAT ATED IN FLOOD ZONE X; HOWEVEF TION CONVERTED TO NGVD29. P OF HVAC PAD. IRM PANEL 45051C0415J (INFORMA EFFECTIVE DATE PER HORRY COUNTY ECTIVE DATE PER HORRY COUNTY	"E 09/17/2003. R, LOT APPEARS TO BE LOC TION LISTED ABOVE IN SEC NTY PLANNING), LOT NOW A " PLANNING). BFE DATUM FC	TION B). PER C PPEARS TO BE OR CURRENT N	URRENT FEMA	FLOOD MAP IN FLOOD ZONE X.		

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Replaces all previous editions.

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ELEVATION CERTIFICATE				OMB No. 1660- Expiration Date:	November 30, 2022	
IMPORTANT: In these spaces, copy the corresponding information from Section A.					FOR INSURANCE COMPANY US	
Building Street Address (including Apt., Unit, Suite, and 387 HILLWOOD COURT	I/or Bldg. No.) or P.O.	Route and Bo	ox No.	Policy Number:		
	State SC	ZIP Code 29568		Company NAIC	Number	
SECTION E – BUILDING ELI FOR ZONE	EVATION INFORMA			REQUIRED)		
For Zones AO and A (without BFE), complete Items E1- complete Sections A, B,and C. For Items E1-E4, use na enter meters.						
 E1. Provide elevation information for the following and of the highest adjacent grade (HAG) and the lowest a a) Top of bottom floor (including basement, crawlspace, or enclosure) is 		-				
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 	······	feet	meters	_		
E2. For Building Diagrams 6–9 with permanent flood op	enings provided in S		-			
the next higher floor (elevation C2.b in the diagrams) of the building is	. <u> </u>	feet	meters	above or	below the HAG.	
E3. Attached garage (top of slab) is		feet	meters	above or	below the HAG.	
 Top of platform of machinery and/or equipment servicing the building is 	. <u></u>	feet	meters	above or	below the HAG.	
E5. Zone AO only: If no flood depth number is available floodplain management ordinance?					community's ation in Section G.	
SECTION F - PROPERTY OWN	NER (OR OWNER'S	REPRESENT	ATIVE) CE	RTIFICATION		
The property owner or owner's authorized representativ community-issued BFE) or Zone AO must sign here. The Property Owner or Owner's Authorized Representative's	ne statements in Sect	ctions A, B, and ions A, B, and	d E for Zor E are corr	ne A (without a F ect to the best o	EMA-issued or f my knowledge.	
Topeny Owner of Owner's Admonzed Representatives	STRAINE					
Address	City		Sta	te	ZIP Code	
Signature	Date		Tel	ephone		
Comments						
				Check I	nere if attachments.	
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LEVATION CERTIFICATE	OMB No. 1660-0008 Expiration Date: November 30, 202		
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Building Street Address (including Apt., Unit, Sui 387 HILLWOOD COURT	ite, and/or Bldg. No.)	or P.O. Route and Box	No. Policy Number:
City ONGS	State SC	ZIP Code 29568	Company NAIC Number
SECTIO	N G - COMMUNITY	INFORMATION (OPTIC	DNAL)
The local official who is authorized by law or ord Sections A, B, C (or E), and G of this Elevation (used in Items G8–G10. In Puerto Rico only, enter a The information in Section C was taken	Certificate. Complete er meters.	the applicable item(s) a	
engineer, or architect who is authorize data in the Comments area below.)	d by law to certify ele	evation information. (Indi	cate the source and date of the elevation
or Zone AO.			a FEMA-issued or community-issued BFE)
3. The following information (Items G4–C	G10) is provided for o	community floodplain ma	inagement purposes.
34. Permit Number	G5. Date Permit Iss	sued	G6. Date Certificate of Compliance/Occupancy Issued
7. This permit has been issued for:	New Construction [Substantial Improvem	ient
8. Elevation of as-built lowest floor (including		of ti	e building: feet
9. BFE or (in Zone AO) depth of flooding at th		ers Datum	□ feet □ meters Datum
10. Community's design flood elevation:			feet meters Datum
ocal Official's Name		Title	
Community Name		Telephone	
lignature		Date	
comments (including type of equipment and loc	ation, per C2(e), if ap	oplicable)	
			Check here if attachments

ELEVATION CERTIFICATE	See Instructions for Item A6.		OMB No. 1660-0008 Expiration Date: November 30, 2022	
PORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY US Policy Number:	
Building Street Address (including Apt., U 387 HILLWOOD COURT				
City LONGS	State SC	ZIP Code 29568	Company NAIC Number	
instructions for Item A6. Identify all photo		e, affix at least 2 building p Front View" and "Rear View"; a		





FRONT RIGHT VIEW 11/30/21

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ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

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City LONGS	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.



REAR RIGHT VIEW 11/30/21



REAR LEFT VIEW 11/30/21

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