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 P# 123867 N324 8/20/21

MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

n 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 tems which are noted here.

	SECTION	A - PROPERTY INFO	RMATION	For Insurance Company Use:
A1. Building Owner's Name	GESTION	THE ENTINE OF		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg.	No.) or P.O. Route and Bo	x No.	Company NAIC Number
City State	ZIP Code			
A3. Property Description (Lot	and Block Numbers, Tax Parcel Numbers	er, Legal Description, etc.)		
A5. Latitude/Longitude: Lat.	aphs of the building if the Certificate is b			NAD 1927 NAD 1983
a) Square footage of crb) No. of permanent floor	enings?	sq ft a) b) sq in c) d)	walls within 1.0 foot ab Total net area of flood Engineered flood open	ched garage sq ft openings in the attached garage ove adjacent grade sq in openings in A9.b sq in nings?
	SECTION B - FLOOD INSI	DRANCE RATE MAP (FIRM) INFORMATION	
B1. NFIP Community Name 8	& Community Number B2.	County Name		B3. State
B4. Map/Panel Number	B5. Suffix B6. FIRM Index Date 9/17/2003	B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
311. Indicate elevation datum	a Coastal Barrier Resources System (Cl	1929 NAVD 1988	Other/Source: _	
	SECTION C - BUILDING ELE	VATION INFORMATIO	N (SURVEY REQUIE	RED)
C2. Elevations – Zones A1-A3(Items C2.a-h below accord Benchmark Utilized		be building Un Building Un the building is complete. (with BFE), AR, AR/A, AR Item A7. Vertical Datum	der Construction* /AE, AR/A1-A30, AR/AH	☐ Finished . I, AR/AO. Complete
COMMENTS: COREE	CTRD A7, B6, B7			
Date of Review: 8	20/21 co	ommunity Official:	Manh	X

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.

N324 8/20/21

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 Own DR HORTON, IN	The latest the second s	E STATE OF THE STA				Policy Num	ber:
A2. Building Stree Box No. 445 MCALISTER		cluding Apt., Unit, Sui	te, and/or	r Bldg. No.) o	P.O. Route and	Company N	IAIC Number:
City LITTLE RIVE	R		May Be	State South C	arolina	ZIP Code 29566	
		nd Block Numbers, T N #307-15-02-0032	ax Parcel	Number, Le	gal Description, e	tc.)	A Company
A4. Building Use	(e.g., Resider	ntial, Non-Residential,	Addition	Accessory,	etc.) RESIDE	NTIAL	
A5. Latitude/Long	itude: Lat. 3	3-53-24.35	Long. 7	8-36-13.84	Horizonta	al Datum: NAD	1927 🗷 NAD 1983
A6. Attach at leas	st 2 photograp	hs of the building if th	e Certific	ate is being u	sed to obtain floo	od insurance.	
A7. Building Diag	ram Number	1B					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square fo	otage of craw	space or enclosure(s)		N/A sq ft		
b) Number of	permanent flo	ood openings in the c	rawlspace	e or enclosure		ot above adjacent gr	ade N/A
r Strawy				N/A sq ir		1944 Jan 18	
	The second second	ngs? Yes	and the same				
	1250		140				
A9. For a building	A STATE OF THE STA	A VENEZUE REPORT					
a) Square for	otage of attack	ned garage	N. and	417.00 sq ff			
b) Number of	permanent fle	ood openings in the a	ttached g	arage within	1.0 foot above ad	ljacent grade N/A	
c) Total net a	rea of flood o	penings in A9.b		N/A sq	in		
d) Engineere	d flood openin	igs? Yes	No				
	SI	ECTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM) IN	FORMATION	TO MINES WE STOLE
B1. NFIP Commu		Community Number	E I	B2. County		- 1 TO 12 TO	B3. State
HORRY 450104				HORRY			South Carolina
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood B (Zone AO, us	Elevation(s) e Base Flood Depth)
45051 0438	н	08-23-1999			AE	12	
	The state of the s	Base Flood Elevation				d in Item B9:	
☐ FIS Prof	ie 🗶 FIRM	Community Dete	rmined [Other/Sou	rce:		
B11. Indicate ele	vation datum (used for BFE in Item I	B9: 🗷 N	GVD 1929	☐ NAVD 1988	Other/Source:	
B12. Is the building	ng located in a	Coastal Barrier Res	ources Sy	ystem (CBRS) area or Otherwi	se Protected Area (OPA)? Yes 🗷 No
Designation	Date:		CBRS	☐ OPA			
	100				7/1	8/12/21	
and the same of the same			A SHOW		1000	11614	

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/o 445 MCALISTER DRIVE	Policy Number:		
City Sta LITTLE RIVER So	Company NAIC Number		
SECTION C – BUILDING E	EVATION INFORMA	TION (SURVEY R	EQUIRED)
 C1. Building elevations are based on: Construct *A new Elevation Certificate will be required when a complete Items C2.a—h below according to the building construction. 	construction of the build , VE, V1–V30, V (with B	FE), AR, AR/A, AR	VAE, AR/A1-A30, AR/AH, AR/AO,
Benchmark Utilized: SITE CONTROL	Vertical Datum		
Indicate elevation datum used for the elevations in		ow.	
▼ NGVD 1929 ☐ NAVD 1988 ☐ Other Datum used for building elevations must be the sar		BFE	
			Check the measurement used.
 a) Top of bottom floor (including basement, crawls 	space, or enclosure floor	r)	24.1 x feet meters
b) Top of the next higher floor			N/A feet meters
c) Bottom of the lowest horizontal structural memb	per (V Zones only)		N/A feet meters
d) Attached garage (top of slab)			23.6 x feet meters
 e) Lowest elevation of machinery or equipment se (Describe type of equipment and location in Co 	rvicing the building mments)		23.7 x feet meters
f) Lowest adjacent (finished) grade next to building	g (LAG)		22.9 x feet meters
g) Highest adjacent (finished) grade next to building	ng (HAG)		24.1 x feet meters
 h) Lowest adjacent grade at lowest elevation of de structural support 	eck or stairs, including		N/A feet meters
SECTION D - SURVEYOR	R. ENGINEER, OR AR	CHITECT CERTIF	ICATION
This certification is to be signed and sealed by a land s I certify that the information on this Certificate represen statement may be punishable by fine or imprisonment to Were latitude and longitude in Section A provided by a	ts my best efforts to inte under 18 U.S. Code, Sec	rpret the data availation 1001.	y law to certify elevation information. able. I understand that any false Check here if attachments.
Certifier's Name	License Number	100	
MATTHEW D. SVEJKOVSKY	21233		Manual Ma
Title SURVEY DEPARTMENT MANAGER			THO OF ESS ON
Company Name THOMAS & HUTTON			NO 21233 >
Address 611 BURROUGHS & CHAPIN BLVD. SUITE 202		Variable Section	8/12/2021 8 SURVE 10 11
City MYRTLE BEACH	State South Carolina	ZIP Code 29577	D. SVEJIM
Signature Ntto D 8 16	Date 08-11-2021	Telephone (843) 839-8463	Ext.
Copy all pages of this Elevation Certificate and all attachn	nents for (1) community of	official, (2) insurance	agent/company, and (3) building owner.
Comments (including type of equipment and location, p	er C2(e), if applicable)		
ELEVATIONS SHOWN ARE OF FINISHED CONSTRU SITE IS THE HEAT PUMP PAD. ELEVATION SHOWN		SURVEY. THE LOW	/EST MACHINERY LOCATED ON

ELEVATION CERTIFICATE

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

MPORTANT: In the	se spaces, copy the corresponding information from	m Section A.		FOR INSURA	NCE COMPANY USE
Building Street Address 445 MCALISTER D	ess (including Apt., Unit, Suite, and/or Bldg. No.) or P.C RIVE	. Route and Box	No.	Policy Number)T
City	State	ZIP Code		Company NA	IC Number
LITTLE RIVER	South Carolina	29566			
	SECTION E - BUILDING ELEVATION INFORM FOR ZONE AO AND ZONE A			REQUIRED)	
	(without BFE), complete Items E1–E5. If the Certificate, B,and C. For Items E1–E4, use natural grade, if available				
the highest adja	on information for the following and check the appropriation to the control of th	te boxes to show).	whether	the elevation	is above or below
crawlspace,	or enclosure) is	feet [meters	above	or Delow the HAG.
	m floor (including basement, or enclosure) is	feet [meters	above	or below the LAG.
E2. For Building Dia	grams 6–9 with permanent flood openings provided in	Section A Items	8 and/or 9	(see pages	1-2 of Instructions),
the diagrams) o	floor (elevation C2.b in f the building is	feet [meters	above	or below the HAG.
E3. Attached garage	e (top of slab) is	feet [meters	above	or below the HAG.
E4. Top of platform servicing the bu	of machinery and/or equipment	□6at [7	□ abaua	as Delaw the MAC
	f no flood depth number is available, is the top of the bo		meters	THE RESERVE	or below the HAG.
community-issued B	SECTION F – PROPERTY OWNER (OR OWNER'S or owner's authorized representative who completes Section or Zone AO must sign here. The statements in Section of Section 20	ections A. B. and	E for Zon	e A (without a	FEMA-issued or
Address	City		Sta	le	ZIP Code
Signature	Date		Tele	ephone	
Comments					
				☐ Check	here if attachments.

ELEVATION CERTIFICATE

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

MPORTANT: In these spaces, copy the correspon			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, ar 445 MCALISTER DRIVE	Policy Number:		
city	State	ZIP Code	Company NAIC Number
LITTLE RIVER South Carolina 29566			A STATE OF THE STA
SECTION G -	COMMUNITY INFOR	MATION (OPTIONAL)	
the local official who is authorized by law or ordinance tections A, B, C (or E), and G of this Elevation Certificated in Items G8–G10. In Puerto Rico only, enter me	icate. Complete the ap iters.	plicable item(s) and sig	n below. Check the measurement
engineer, or architect who is authorized by data in the Comments area below.)	law to certify elevation	information. (Indicate t	the source and date of the elevation
or Zone AO.		400	of a state of
3. The following information (Items G4–G10)	is provided for commun	nty noodplain manager	ment purposes.
4. Permit Number G5.	Date Permit Issued	G6.	Date Certificate of Compliance/Occupancy Issued
7. This permit has been issued for:	Construction Subs	stantial Improvement	A Constitution
			the same of the same of the
 Elevation of as-built lowest floor (including base of the building: 		fe	et meters Datum
9. BFE or (in Zone AO) depth of flooding at the bu	ilding site:	fe	et meters Datum
10. Community's design flood elevation:	44.	fe	et meters Datum
ocal Official's Name	Title		
ommunity Name	Tele	ephone	
			142.6
ignature	Dat	е	
comments (including type of equipment and location	, per C2(e), if applicabl	e)	
w*			
			☐ Check here if attachments

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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

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.

FOR INSURANCE COMPANY USE

Policy Number:

445 MCALISTER DRIVE

City State

LITTLE RIVER South Carolina ZIP Code

29566

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

FRONT ELEVATION 8-11-2021 GARAGE ELEVATION 23.6' FFE: 24.1' **Photo One Caption**

Clear Photo One



Photo Two

Photo Two Caption REAR ELEVATION 8-11-2021

MS 8/12/21

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including A 445 MCALISTER DRIVE	Policy Number:		
City	State	ZIP Code	Company NAIC Number
LITTLE RIVER	South Carolina	29566	The state of the state of

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 HEAT PUMP PAD 8-11-2021 ELEVATION 23.7' (LOWEST MACHINERY ON SITE)

Clear Photo Three

Photo Four

Photo Fou

MIS 3/12/21

Photo Four Caption

Clear Photo Four