



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.

| SECTION A - PROPERTY INFORMATION |                  |                                      |             | FOR INSUR               | ANCE COMPANY USE     |                    |                                      |
|----------------------------------|------------------|--------------------------------------|-------------|-------------------------|----------------------|--------------------|--------------------------------------|
| A1. Building Owner's Name        |                  |                                      |             |                         | Policy Numb          | er:                |                                      |
| CK CARR BROTH                    | ERS 2, LLC       |                                      |             |                         |                      |                    |                                      |
| A2. Building Stree<br>Box No.    | t Address (inc   | luding Apt., Unit, Suite             | e, and/or   | Bldg. No.) or           | P.O. Route and       | Company N          | AIC Number:                          |
| 236 GLOUCESTE                    | R WAY            |                                      |             |                         |                      |                    |                                      |
| City                             |                  |                                      |             | State                   |                      | ZIP Code           |                                      |
| LITTLE RIVER                     | ?                |                                      |             | South Ca                | irolina              | 29566              |                                      |
| A3. Property Desc                | cription (Lot ar | d Block Numbers, Ta                  | x Parcel    | Number, Leg             | al Description, etc  | 0.)                |                                      |
| UNIT 3CAPE COL                   | COTTAGES         | @ MARKER 350                         |             |                         |                      |                    |                                      |
| A4. Building Use                 | (e.g., Resident  | tial, Non-Residential,               | Addition,   | Accessory, 6            | etc.) RESIDEN        | TIAL               |                                      |
| A5. Latitude/Long                | itude: Lat. 33   | D51'13.050"                          | Long. 78    | 3D39'23.637"            | Horizonta            | I Datum: NAD 1     | 927 × NAD 1983                       |
| A6. Attach at leas               | t 2 photograph   | ns of the building if the            | e Certifica | ate is being u          | sed to obtain floor  | d insurance.       |                                      |
| A7. Building Diagr               | ram Number       | 6                                    |             |                         |                      |                    |                                      |
| A8. For a building               | with a crawls    | pace or enclosure(s):                |             |                         |                      |                    | 1                                    |
| a) Square for                    | otage of crawls  | space or enclosure(s)                |             | 1                       | 144.00 sq ft         |                    |                                      |
| b) Number of                     | permanent flo    | od openings in the cra               | awispace    | or enclosure            | e(s) within 1.0 foot | above adjacent gra | ide 6                                |
| c) Total net a                   | rea of flood op  | enings in A8.b                       | 1           | 230.00 sq in            | 1                    |                    |                                      |
|                                  |                  | gs? 🗵 Yes 🗌 N                        |             |                         |                      |                    |                                      |
|                                  |                  |                                      | 10          |                         |                      |                    |                                      |
| A9. For a building               | with an attach   | ed garage:                           |             | 2005                    |                      |                    |                                      |
| a) Square foo                    | tage of attach   | ed garage                            |             | N/A sq ff               |                      |                    |                                      |
| b) Number of                     | permanent flo    | ood openings in the at               | tached g    | arage within            | 1.0 foot above ad    | acent grade N/A    |                                      |
| c) Total net a                   | rea of flood op  | penings in A9.b                      |             | N/A so                  | in                   |                    |                                      |
| d) Engineere                     | d flood openin   | gs? Yes 🛛 Yes                        | No          |                         |                      |                    |                                      |
| o/ Ligitions                     | - 11000 000      | 3- L - L                             |             |                         |                      |                    |                                      |
|                                  | SE               | CTION B - FLOOD                      | INSURA      | NCE RATE                | MAP (FIRM) IN        | FORMATION          |                                      |
| B1. NFIP Commu                   | nity Name & 0    | Community Number                     |             | B2. County              |                      |                    | B3. State                            |
| HORRY COUNT                      | Y 450104         |                                      |             | HORRY CO                | YTAUC                |                    | South Carolina                       |
| B4. Map/Panel                    | B5. Suffix       | B6. FIRM Index                       |             | RM Panel                | B8. Flood            | B9. Base Flood B   | Elevation(s)<br>se Base Flood Depth) |
| Number                           |                  | Date                                 | 1/25/3/     | fective/<br>evised Date | Zone(s)              |                    | ic bass ( loss beptil)               |
| 45051C0581                       | н                | 09-17-2003                           | 08-23-      | 1999                    | AE                   | 12                 |                                      |
|                                  |                  |                                      | (855)       |                         | and death saters     | d in Itam BO:      |                                      |
|                                  |                  | Base Flood Elevation  Community Dete |             | Other/So                |                      | d in item 65.      |                                      |
| ☐ FIS Pro                        | file X FIRM      | Community Dete                       | mineu       | _ Others                |                      |                    |                                      |
| B11. Indicate ele                | evation datum    | used for BFE in Item                 | B9: ⊠ N     | NGVD 1929               | □ NAVD 1988          | Other/Source       |                                      |
| R12 Is the build                 | ing located in   | a Coastal Barrier Res                | ources S    | System (CBR)            | S) area or Otherw    | ise Protected Area | (OPA)? ☐ Yes ⊠ No                    |
|                                  | n Date: N/A      |                                      | CBRS        |                         |                      |                    |                                      |
| Designatio                       | II Date. NIA     |                                      | 1 00110     |                         |                      |                    |                                      |
|                                  |                  |                                      |             |                         |                      |                    |                                      |

## **ELEVATION CERTIFICATE**

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| MPORTANT: In these spaces, copy the corresponding Street Address (including Apt., Unit, Suite,   |  |  |                       | NSURANC<br>Number: | E COMPANY USE   |  |  |
|--|--|--|-----------------------|--------------------|---|--|--|
| 236 GLOUCESTER WAY   |  |  |                       |                    |   |  |  |
| City State ZIP Code Countries South Carolina 29566   |  |  |                       |                    | Company NAIC Number                                   |  |  |
| SECTION C - BUILDIN  | IG ELEVATION INFORMA   | TION (SURVEY RI                            | EQUIRE                | ED)                |   |  |  |
| <ol> <li>Building elevations are based on: Cons         *A new Elevation Certificate will be required w</li> <li>Elevations – Zones A1–A30, AE, AH, A (with Complete Items C2.a–h below according to the Benchmark Utilized: SC VRS</li> </ol> | when construction of the building  | FE), AR, AR/A, AR/<br>in Item A7. In Puert | AE, AR                | /A1-A30, A         | AR/AH, AR/AO. meters.                                 |  |  |
| Indicate elevation datum used for the elevation  | ns in items a) through h) belo   | w.   |                       |                    |   |  |  |
|  |  | BFE.                                       |                       | -                  | asurement used.                                       |  |  |
| <ul> <li>a) Top of bottom floor (including basement, or</li> </ul>   | crawlspace, or enclosure floor   | )  | 10.4                  | x  feet            | meters  |  |  |
| b) Top of the next higher floor  |  |  | 20.7                  | × feet             | meters  |  |  |
| c) Bottom of the lowest horizontal structural r  | member (V Zones only)  |  | N/A                   | feet               | meters  |  |  |
| d) Attached garage (top of slab)   |  |  | N/A                   | × feet             | meters  |  |  |
| <ul> <li>e) Lowest elevation of machinery or equipmed<br/>(Describe type of equipment and location</li> </ul>  | ent servicing the building in Comments)                                      |  | 14.7                  |                    | meters  |  |  |
| f) Lowest adjacent (finished) grade next to b  | ouilding (LAG)   |  | 9.4                   | × feet             | meters  |  |  |
| g) Highest adjacent (finished) grade next to   | building (HAG)   |  | 10.2                  | × feet             | meters  |  |  |
| Lowest adjacent grade at lowest elevation<br>structural support  |  |  | N/A                   | _ feet             | meters  |  |  |
| SECTION D - SURV   | EYOR, ENGINEER, OR AR  | CHITECT CERTIF                             | ICATIO                | N                  |   |  |  |
| This certification is to be signed and sealed by a land certify that the information on this Certificate reputatement may be punishable by fine or imprison.  Were latitude and longitude in Section A provided                                | resents my best efforts to inte<br>ment under 18 U.S. Code, Se               | ction 1001.                                | y law to<br>able. I u | nderstand          | vation information. that any false re if attachments. |  |  |
|  | License Number   |  |                       |                    |   |  |  |
| Certifier's Name<br>JACQUES J. BONNETT   | 21431  |  |                       |                    | amm.  |  |  |
| Title<br>PLS   |  |  |                       | 11111              | ace   |  |  |
| Company Name<br>SITE SURVEYING, LLC  |  |  |                       | ME                 | Seah & S  |  |  |
| Address<br>111 WHITE OAK FOREST PL   |  |  |                       | THE PARTY          | were of   |  |  |
| City   | State<br>South Carolina  | ZIP Code<br>29527                          |                       | Thin               | NIJOH NIN   |  |  |
| Signature Bman   | Date<br>04-27-2021   | Telephone<br>(843) 319-8169                | Ext                   |                    |   |  |  |
| Copy all pages of this Elevation Certificate and all a   | attachments for (1) community  | official, (2) insurance                    | e agent/              | company, a         | nd (3) building owne                                  |  |  |
| Comments (including type of equipment and local LOWEST MACHINERY WILL BE AC UNIT. FLO SHEET. THE NET ARE OF OPENINGS IS 630 STO MATCH ENGINEERED RELIEF AREA OF OGARAGE ON FOUNDATION AND FRAMING CO   | OOD VENTS ARE ENGINEER<br>SQUARE INCHES. THE COU<br>PENINGS. THIS UNIT IS NO | OT ON PILES, BUT                           | BOTTO                 | UAKE INC           | HES OF OPENING  |  |  |
|  |  |  |                       |                    |   |  |  |

## **ELEVATION CERTIFICATE**

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

| MPORTANT: 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  |         |
|--|-------------------------|--|--|---------|
| Building Street Address (including Apt., Unit, Suite, and<br>36 GLOUCESTER WAY   | d/or Bldg. No.) or F    | P.O. Route and Box No.                               | Policy Number:   |         |
|  | State<br>South Carolina | ZIP Code<br>29566                                    | Company NAIC Number  |         |
| SECTION E – BUILDING EL<br>FOR ZONI  |                         | RMATION (SURVEY N<br>A (WITHOUT BFE)                 | OT REQUIRED)   |         |
| or Zones AO and A (without BFE), complete Items E1 complete Sections A, B,and C. For Items E1–E4, use noter meters.  | -E5. If the Certific    | cate is intended to suppo                            |  |         |
| <ol> <li>Provide elevation information for the following and<br/>the highest adjacent grade (HAG) and the lowest a</li> </ol>  |                         |  | ther the elevation is above or below   | ,       |
| <ul> <li>Top of bottom floor (including basement,<br/>crawlspace, or enclosure) is</li> </ul>  |                         |  | eters above or below the l   | 140     |
| b) Top of bottom floor (including basement, crawlspace, or enclosure) is  b) Top of bottom floor (including basement, crawlspace, or enclosure) is   | -                       |  | eters above or below the l   |         |
| Carter St. 1977 Carter Tall Colours St. 1715 Carter Carter St. Car |                         |  |  |         |
| <ol><li>For Building Diagrams 6–9 with permanent flood of<br/>the next higher floor (elevation C2.b in<br/>the diagrams) of the building is</li></ol>  | ppenings provided       |  | stor 9 (see pages 1–2 of Instructions  eters □ above or □ below the I                  |         |
| Attached garage (top of slab) is   |                         | ☐ feet ☐ m   | eters above or below the l   | AAG     |
|  |                         | leet [] iii  | eters  | iAO.    |
| <ol> <li>Top of platform of machinery and/or equipment<br/>servicing the building is</li> </ol>  |                         | feet _ m   | eters above or below the l   | HAG     |
| <ol> <li>Zone AO only: If no flood depth number is availab<br/>floodplain management ordinance? Yes</li> </ol>   | le, is the top of the   | bottom floor elevated in<br>wn. The local official m | accordance with the community's<br>ust certify this information in Section             | G.      |
| SECTION F - PROPERTY OW  | NED OR OWNER            | DIE OFODERENTATIVE                                   | CERTIFICATION  |         |
| ommunity-issued BFE) or Zone AO must sign here. T  | he statements in S      | Sections A, B, and E for<br>Sections A, B, and E are | r Zone A (without a FEMA-issued o correct to the best of my knowledge                  | r<br>e. |
| ommunity-issued BFE) or Zone AO must sign here. To property Owner or Owner's Authorized Representative   | he statements in S      | Sections A, B, and E for Sections A, B, and E are    | r Zone A (without a FEMA-issued o correct to the best of my knowledge)  State ZIP Code | r<br>e. |
| The property owner or owner's authorized representationmunity-issued BFE) or Zone AO must sign here. To property Owner or Owner's Authorized Representative Address  | he statements in S      | Sections A, B, and E are                             | State ZIP Code   | r<br>e. |
| ommunity-issued BFE) or Zone AO must sign here. To be a community-issued BFE or Zone AO must sign here. To be a community-issued BFE or Zone AO must sign here. To be a community-issued BFE or Zone AO must sign here. To be a community-issued BFE or Zone AO must sign here. To be a community-issued BFE or Zone AO must sign here. To be a community-issued BFE or Zone AO must sign here. To be a community-issued BFE or Zone AO must sign here. To be a community-issued BFE or Zone AO must sign here. To be a community-issued BFE or Zone AO must sign here. To be a community-issued BFE or Zone AO must sign here. To be a community is a community is a community in the community in the community is a community in the community in the community is a community in the community in the community is a community in the community in the community is a community in the community in the community is a community in the community in the community is a community in the community in the community is a community in the community in the community is a community in the community in the community is a community in the community in the community is a community in the communit | he statements in S      | Sections A, B, and E are                             | correct to the best of my knowledge  | r<br>e. |
| ommunity-issued BFE) or Zone AO must sign here. To roperty Owner or Owner's Authorized Representative address  | he statements in S      | Sections A, B, and E are                             | State ZIP Code   | r e.    |
| ommunity-issued BFE) or Zone AO must sign here. To roperty Owner or Owner's Authorized Representative address  | he statements in S      | Sections A, B, and E are                             | State ZIP Code   | ree.    |
| community-issued BFE) or Zone AO must sign here. To<br>Property Owner or Owner's Authorized Representative   | he statements in S      | Sections A, B, and E are                             | State ZIP Code   | ree.    |

FEMA Form 086-0-33 (12/19)

# **ELEVATION CERTIFICATE**

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

| MPORTANT: In these spaces, copy the co   | FOR INSURANCE COMPANY USE          |                         |   |
|--|------------------------------------|-------------------------|---|
| Building Street Address (including Apt., Unit,<br>236 GLOUCESTER WAY   | Policy Number:                     |                         |   |
| City<br>LITTLE RIVER   | State<br>South Carolina            | ZIP Code<br>29566       | Company NAIC Number   |
| SECT   | TION G - COMMUNITY INFOR           | RMATION (OPTIONAL)      |   |
| The local official who is authorized by law or<br>Sections A, B, C (or E), and G of this Elevati<br>used in Items G8–G10. In Puerto Rico only, | on Certificate. Complete the ap    |                         |   |
| G1. The information in Section C was t<br>engineer, or architect who is autho<br>data in the Comments area below.                              | rized by law to certify elevation  |                         | and sealed by a licensed surveyor,<br>ne source and date of the elevation |
| G2. A community official completed Se or Zone AO.  | ection E for a building located in | Zone A (without a FEM   | IA-issued or community-issued BFE)  |
| G3. The following information (Items G   | 4–G10) is provided for commu       | nity floodplain managen | nent purposes.  |
| G4. Permit Number  | G5. Date Permit Issued             |                         | Date Certificate of<br>Compliance/Occupancy Issued                        |
| G7. This permit has been issued for:   | ☐ New Construction ☐ Sub           | stantial Improvement    |   |
| G8. Elevation of as-built lowest floor (include of the building:   | ling basement)                     | fee                     | t  meters Datum   |
| G9. BFE or (in Zone AO) depth of flooding  | at the building site:              | fee                     | et 🗌 meters Datum   |
| G10. Community's design flood elevation:   | -                                  | fee                     | et  meters Datum  |
| Local Official's Name  | Tit                                | le                      |   |
| Community Name   | Te                                 | lephone                 |   |
| Signature  | Da                                 | ite                     |   |
| Comments (including type of equipment and  | location, per C2(e), if applicat   | ole)                    |   |
|  |                                    |                         |   |
|  |                                    |                         |   |
|  |                                    |                         |   |
|  |                                    |                         |   |
|  |                                    |                         |   |
|  |                                    |                         |   |
|  |                                    |                         |   |
|  |                                    |                         | 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, co                             | FOR INSURANCE COMPANY US                  |                      |                     |
|--|---|----------------------|---------------------|
| Building Street Address (including a<br>236 GLOUCESTER WAY | Apt., Unit, Suite, and/or Bldg. No.) or F | O. Route and Box No. | Policy Number:      |
| City   | State                                     | ZIP Code             | Company NAIC Number |
| LITTLE RIVER   | South Carolina                            | 29566                |                     |

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

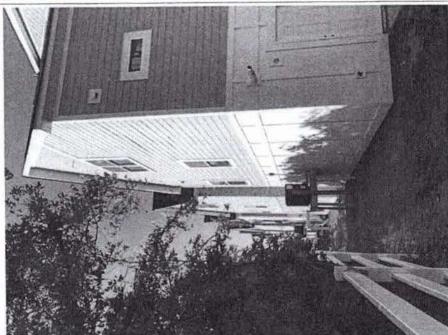


Photo Two Caption BACK

Clear Photo Two

FEMA Form 086-0-33 (12/19)

Replaces all previous editions.

Form Page 5 of 6

### BUILDING PHOTOGRAPHS

### **ELEVATION CERTIFICATE**

Continuation Page

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

| IMPORTANT: In these spaces, co                          | py the corresponding information for      | rom Section A.         | FOR INSURANCE COMPANY USE |
|---|---|------------------------|---------------------------|
| Building Street Address (including a 236 GLOUCESTER WAY | Apt., Unit, Suite, and/or Bldg. No.) or F | P.O. Route and Box No. | Policy Number:            |
| City<br>LITTLE RIVER                                    | State<br>South Carolina                   | ZIP Code<br>29566      | 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 FLOOD VENTS

Clear Photo Three

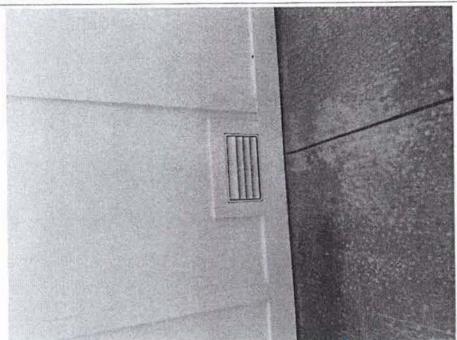


Photo Four Caption FLOOD VENT

Clear Photo Four Form Page 6 of 6

Replaces all previous editions

FEMA Form 086-0-33 (12/19)

# Certification of Engineered Flood Openings

In accordance with the Code of Federal Regulations for the National Flood Insurance Program

I hereby certify that the Crawl Space Door Systems flood vents 816CS, 1220CS, 1232CS, 1616CS, 1624CS, 1632CS, 2032CS, 2424CS, and 2436CS are designed are designed in accordance with the requirements of the Code of Federal Regulations for the National Flood Insurance Program (NFIP) to provide automatic equalization of hydrostatic flood forces by allowing for the entry and exit of floodwaters, when properly installed and sized as set forth below. Vent opening measurements were measured and certified by Mr. Christopher Mark Loney, Virginia P.E. NO. 029000. Detailed calculations were prepared as outlined In "Review of certification of Engineered Flood Openings," prepared by Dr. Georg Reichard, Associate Professor of Building Construction, Virginia Tech (available upon request from Crawl Space Door Systems, Inc. billy@crawlspacedoors.com)

### **Design Characteristics**

Section 2.6.2.2 of ASCE/SEI 24-05 provides an equation to determine the required <u>net area</u> of engineered openings (A<sub>o</sub>) for a given <u>enclosed area</u> (A<sub>e</sub>). This equation is based on the hydraulic formula for the flow rate across sharp edged orifices. I have utilized this equation to calculate 1) the restricted flow rate through the main frame opening in case the louver is blown out during a flood event; 2) the flow rate through the individual openings between louver blades; and 3) the flow rate through projected openings between louver blades following hydraulic short-tube theory. The maximum total enclosed area (A<sub>e</sub>) that can be serviced by a single vent has then been determined by utilizing the lowest flow rate of the three assessed scenarios for each vent and is listed in Table 1.

These values are based on the following assumptions:

- In absence of reliable data, the rates of rise and fall have been assumed at a minimum rate of 5 feet/hour;
- The (maximum) difference between the exterior and interior floodwater levels shall not exceed 1 foot during base flood conditions:
- A factor of safety of 5 has been assumed, which is consistent with design practices related to protection of life and property;
- The net area of openings (A<sub>0</sub>) as provided by the manufacturer.

| Installation | Requirements | and Limitations |
|--------------|--------------|-----------------|
|--------------|--------------|-----------------|

This certification will be voided if the following installation requirements and limitations are not enforced:

- There shall be a minimum of two openings on different sides of each enclosed area subject to flooding;
- The bottom of all openings shall be no higher than one foot
   above the higher of the interior or exterior grade that is immediately under each opening;
- No temporary (e.g. during cold weather) or permanent solid cover may be placed into or over the flood vent that would block the automatic entry or exit of floodwaters at any time;
- Where data or analyses indicate more rapid rates of rise and fall, the required number of openings shall be increased to account
  for those different conditions. The number or size of the openings may be decreased if data or analyses indicate rates of rise and
  fall are less than 5 feet per hour.

| *) | Model  | H x W<br>[in] | A <sub>o</sub><br>[in <sup>2</sup> ] | A <sub>e</sub><br>[ft <sup>2</sup> ] |
|----|--------|---------------|--------------------------------------|--------------------------------------|
| Ø  | 816CS  | 8 x 16        | 105                                  | 205                                  |
|    | 1220CS | 12 x 20       | 235                                  | 500                                  |
|    | 1232CS | 12 x 32       | 305                                  | 645                                  |
|    | 1616CS | 16 x 16       | 180                                  | 395                                  |
|    | 1624CS | 16 x 24       | 310                                  | 670                                  |
|    | 1632CS | 16 x 32       | 405                                  | 835                                  |
|    | 2032CS | 20 x 32       | 630                                  | 1240                                 |
|    | 2424CS | 24 x 24       | 570                                  | 1230                                 |
|    | 2436CS | 24 x 36       | 850                                  | 1765                                 |

Table 1 Maximum total <u>enclosed area</u> (A<sub>e</sub>) that can be serviced by each individual model based on the given <u>net area</u> of engineered openings (A<sub>o</sub>)

| Certifyi  | ng Design Professional           | TH CARO                          |
|-----------|----------------------------------|----------------------------------|
| Name      | Frederick Allen House            | Title President HOUSE            |
| Company   | House Engineering P.C.           | ENGINEERING, P.C.                |
| Address   | PO Box 466, Kitty Hawk, NC 27949 | No. 3900<br>No. 26841            |
| License   | South Carolina                   | License No. 26841 OF AUTHURING   |
| Signature | " Studd altones P.E.             | Date: 11/17/2017 RICK A HOUSEING |

Identification of the Building and Installed Flood Vents (By Others)

The flood vent models marked in Table 1\*) are being installed at the following building:

Building Address

Ver. 2.0