

# HORRY COUNTY PERMIT

## APPLICATION

(Must be fully completed in ink)

FLOOD ZONE AE  
BFE 13  
PANEL# 509  
ECERT REQ yes  
APPROVED MORAN

DATE IN \_\_\_\_\_  
FEES PD \$ \_\_\_\_\_ P/R \_\_\_\_\_ Z \_\_\_\_\_  
CLERK \_\_\_\_\_  
PLAN CASE # \_\_\_\_\_  
REF \_\_\_\_\_  
APPD MORAN DATE 11-16-15  
Telephone \_\_\_\_\_

Events Required

Name of Owner (as listed on Tax Records) Stephanie G. Paglia

Mailing Address 1361 Riverside Drive Conway, SC 29526

Site Address \_\_\_\_\_ Subdivision /Phase # \_\_\_\_\_ Lot# \_\_\_\_\_

Project Name Paglia Residence elevation Bldg. # \_\_\_\_\_ # of Units \_\_\_\_\_ Occupant Load \_\_\_\_\_

Type of Work: New ( ) Addition ( ) Alter (  ) Repair (  ) Move ( ) Demolish ( ) Other \_\_\_\_\_

Use of Improvements: Single Family ( ) Mobile Home ( ) Duplex ( ) Apartment ( ) Commercial ( ) Institutional ( ) Utility ( )

Warehouse ( ) Manufacturing ( ) Condo ( ) Industrial ( ) Farm Building ( ) Sign ( ) Other \_\_\_\_\_

Type of Construction: Metal ( ) Wood ( ) Steel ( ) Concrete ( ) Other \_\_\_\_\_

Exterior: Brick ( ) Conc. Block ( ) Stone ( ) Brick Veneer ( ) Stucco ( ) Metal ( ) Wood ( ) Glass ( ) Vinyl ( ) Other \_\_\_\_\_

No of Stories \_\_\_\_\_ No. of Bedrooms \_\_\_\_\_ No. of Baths \_\_\_\_\_ No. of Half Baths \_\_\_\_\_ Total # Rooms \_\_\_\_\_

Type of Heating: Central Air Cond. ( ) Heat Pump ( ) Other \_\_\_\_\_ Sprinkler Req \_\_\_\_\_ Provided \_\_\_\_\_ N/A \_\_\_\_\_

Type of Fuel: Oil ( ) Gas ( ) Electricity ( ) Wood ( ) Other \_\_\_\_\_

Unheated areas: Garage ( ) Carport ( ) Porches ( ) Decks ( ) Masonry Fireplaces # \_\_\_\_\_

Total No. of Square Feet \_\_\_\_\_ Heated Space \_\_\_\_\_ Unheated \_\_\_\_\_

Description of Work repair home due to flood damage and elevate to make conforming structure see attached scope of work and engineer's letter

Value of Construction \$ 210,000 elevation \$ 76,000 Permit # 53961

Building Permit Fees \$ 790- repairs \$ 134,000 Mobile Home Sticker # \_\_\_\_\_

Zoning Fees \$ 0 (interior & exterior) Farm # \_\_\_\_\_

MIGC Fire Fee \$ 0 MIGC Fire Receipt # \_\_\_\_\_

\$ 100.00 Plan / Bin # \_\_\_\_\_

TOTAL FEES \$ 890 App Code \_\_\_\_\_

Contractor or Builder Stephanie Paglia Tele # ( ) \_\_\_\_\_ State License # \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Architect or Engineer \_\_\_\_\_ Tele # ( ) \_\_\_\_\_ Fax # ( ) \_\_\_\_\_

Address 138-00-01-008 Email \_\_\_\_\_

Est Date of Completion \_\_\_\_\_ TMS # / PIN # 36601030002 Dist. # 100 Zone SR40 RW Verified \_\_\_\_\_

THIS PERMIT MAY BE SUSPENDED OR REVOKED FOR VIOLATION OF ANY REGULATION IN EFFECT BY ORDINANCE OR OTHERWISE BUILDING PERMITS ARE NOT REFUNDABLE OR TRANSFERABLE.

Issued By: [Signature]  
Date 11/16/15

Signature [Signature]  
Owner ( ) Contractor ( ) Agent ( )

Print name \_\_\_\_\_

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-8.

OMB No. 1680-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name Stclair & Linda Hackett

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
1361 Riverside Drive  
 City Conway State SC ZIP Code 29526

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
TMS0138-00-01-008 *Keep in file*

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A5. Latitude/Longitude: Lat. N33° 49' 44.87" Long. W79° 09' 36.86" Horizontal Datum:  NAD 1927  NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number g

A8. For a building with a crawlspace or enclosure(s):  
 a) Square footage of crawlspace or enclosure(s) 3694 sq ft  
 b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 16  
 c) Total net area of flood openings in A8.b 2048 sq in  
 d) Engineered flood openings?  Yes  No

A9. For a building with an attached garage:  
 a) Square footage of attached garage 847 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  
Horry County 450104

B2. County Name  
Horry County

B3. State  
South Carolina

B4. Map/Panel Number <u>45051C0809</u>	B5. Buffer <u>H</u>	B6. FIRM Index Date <u>08/23/1999</u>	B7. FIRM Panel Effective/Revised Date <u>08/17/2003</u>	B8. Flood Zone(s) <u>AE&amp;Roadwa</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>13</u>
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B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.  
 FIS Profile  FIRM  Community Determined  Other/Source: \_\_\_\_\_

B11. Indicate elevation datum used for BFE in Item B9:  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Yes  No  
 Designation Date: \_\_\_\_\_  CBRS  OPA

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction  
 \*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, ARA, ARAE, ARA1-A30, ARAH, ARAO. Complete items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  
 Benchmark Utilized: Conway Map L24880/9 Vertical Datum: 28-224 NGVD28  
 Indicate elevation datum used for the elevations in Items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>8.64</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>10.83</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>9.14</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>11.50</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>8.34</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>8.64</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>8.64</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters

## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No

Check here if attachments.

Certifier's Name Kenneth D. Jordan License Number 21836

Title President Company Name K & R Land Surveyors, Inc.

Address 312 Laurel Street City Conway State SC ZIP Code 29526

Signature *[Signature]* Date 08/08/2013 Telephone 843-241-7842



**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.  
1381 Riverside Dr

City Conway

State SC ZIP Code 29526

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments The lowest piece of machinery servicing this building is the hot water heater.

A/C unit 13.74'

Signature

Date 06/05/2013

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zones AO and 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, enter meters.

- E1. 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 \_\_\_\_\_  feet  meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A items 8 and/or 9 (see pages 8-9 of instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E5. 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 G.

**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 community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner's or Owner's Authorized Representative's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in items G6-G10. In Puerto Rico only, enter meters.

- G1.  The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.  A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3.  The following information (items G4-G10) is provided for community floodplain management purposes.

G4. Permit Number _____	G5. Date Permit issued _____	G6. Date Certificate Of Compliance/Occupancy issued _____
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- G7. This permit has been issued for:  New Construction  Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.

# Building Photographs

See instructions for Item A8.

**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.  
1381 Riverside Dr

Policy Number:

City Conway

State SC

ZIP Code 29526

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 A8. 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.



Front 06/08/2013



Rear 06/08/2013

# Building Photographs

Continuation Page

**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.  
1361 Riverside Drive

Policy Number:

City Conway

State Sc

ZIP Code 29526

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.



Right 08/08/2013



Left 08/08/2013

# RECEIPT

Horry County Code Enforcement  
1301 Second Avenue  
Suite 1D09  
Conway, SC 29526  
843-815-5090

Permit Number: RES-11-15-53961

Permit Type: Residential Permit

Receipt Number: RES-11-15-391020

Parcel Number: 36601030002

Plan Case Number:

Property Owner: STEPHANIE G PAGLIA

Lot:

Project Name: <NONE>

## FEES

DATE	FEE NAME	FEE AMOUNT
11/16/2015	Alteration Permit Fee	\$790.00
11/16/2015	Change of Service Fee	\$100.00

## PAYMENTS

DATE	PAY TYPE	PAYER	RECEIVED BY	AMOUNT RECEIVED	AMOUNT APPLIED	CHANGE
11/16/2015	Check # 1037		Karen Owens	\$890.00	\$890.00	\$0.00
MEMO:				TOTAL PAYMENTS:		\$890.00
				TOTAL CHANGE:		\$0.00

November 13, 2015

Re: Requirements to Raise Home

Stephanie Paglia  
1361 Riverside Drive  
Horry County, SC

To whom it may concern:

Upon a physical inspection of the structure located at 1361 Riverside Drive, the raising of the structure will meet the 2012 IRC with the following specifications:

The existing foundation shall be continuous with #4 dowels epoxied into every 48" O/C for vertical support. A bond beam (2- #5 rebar continuous) is required with every 4' of rise. The cells of the CMU shall be filled with 3,000 psi concrete. A Simpson PA51 strap every 48" embedded to attach foundation to existing floor system shall be installed.

7/16" OSB sheathing shall reach from the top of existing top plate to the bottom of the existing bottom plate. The sheathing shall be nailed with 8D common nails. The nailing pattern for the edges shall be 4" O/C and the interior shall be 8" O/C.

Simpson H10 Clips shall be installed at each truss per manufactures' specifications to attach trusses to walls.

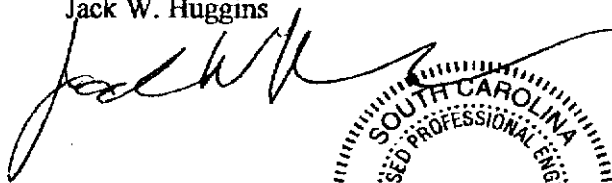
The brick veneer shall set on existing brick ledge with ladder reinforcing every 16" O/C. The veneer shall be constructed per 2012 IRC.

Additional items may need to be addressed as the construction progresses. .

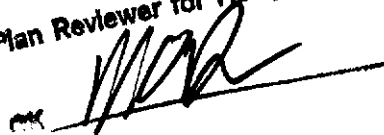
If you should have any questions, I can be reached at (843) 421-3840.

Sincerely,

Jack W. Huggins



Plan Reviewer for Horry County



SCOPE OF WORK FOR ALTERATIONS / REPAIRS / ADDITIONS

           COMMERCIAL

  ✓   RESIDENTIAL

SITE LOCATION 1361 Riverside Drive Conway, SC 29526

APPLICANT PLEASE DESCRIBE IN DETAIL EXACTLY WHAT YOU ARE DOING:

elevation: raise home - install new foundation walls on existing footing per engineer letter. Install OSB Sheeting on exterior of home. Replace one exterior door and all exterior brick.

interior repairs: insulation on walls & ceilings, replace baseboard & all floor coverings. Replace sheet rock as needed. Kitchen cabinets & bathroom vanity.

Stephanie Paglia  
APPLICANT

11/16/15  
DATE

REVIEWER COMMENTS:

All work 2012 IRC/ IECC 2009  
Raising home to be conforming.  
work per scope  
swells required  
work IAW engineer letter

Moh  
REVIEWER

11-16-15  
DATE

PERMIT#



November 13, 2015

Re: Requirements to Raise Home

Stephanie Paglia  
1361 Riverside Drive  
Horry County, SC

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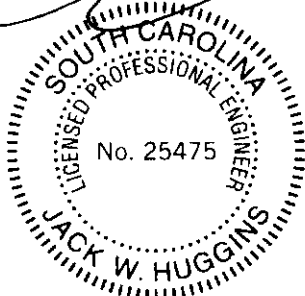
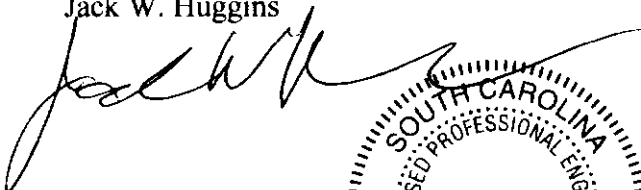
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Additional items may need to be addressed as the construction progresses. .

If you should have any questions, I can be reached at (843) 421-3840.

Sincerely,

Jack W. Huggins



Plan Reviewer for Horry County



A handwritten signature in black ink, appearing to be "MOR", written over a horizontal line.

# HORRY COUNTY CODE ENFORCEMENT DIVISION

1301 2nd Ave Suite 1D09 Conway, SC 29526

(843) 915-5090 / (843) 205-5090 921954

PERMIT # 53961

DATE 11/30/2015

POWER PERMIT # \_\_\_\_\_

NAME Pasler

LOCATION 1361 RIVERSIDE DR

TIME ARRIVE 9:05 TIME DEPART 9:50

SETBACKS: FR \_\_\_\_\_ LT \_\_\_\_\_ RT \_\_\_\_\_ RR \_\_\_\_\_

TYPE INSPECTION P I P I

TEMP SERVICE — — FOUNDATION — —

PILASTER — — SLAB / POLY WIRE — —

BOND BEAM — — ROUGH PLUMBING — —

SLAB PLUMBING — — ROUGH ELECTRICAL — —

NAILING — X BRICK FLASHING — —

FRAMING — — WINDOW FLASHING — —

ROUGH MECHANICAL — — ROUGH FIRE — —

INSULATION — — FINAL — —

FINAL FIRE — — C/OCCUPANCY — —

MOBILE HOME — — TUB INSULATION — —

MOBILE HOME UNDERPINNING — — SWIMMING POOL — —

SIGN — — POOL / DECK GROUNDING — —

C/O/S — — METER SERVICE — —

POST FOUNDATION — — EROSION SEDIMENT — —

DRYWALL / NAILING — — OTHER — —

REMARKS EXTERIOR WALLS ON Existing Dwelling  
OK. Will Need TO INSPECT Sitching on  
Connection TO New Foundation.  
OK TO COVER Existing walls

INSPECTOR Harold R. Edge #53

RECEIVED BY \_\_\_\_\_

# HORRY COUNTY CODE ENFORCEMENT DIVISION

1301 2nd Ave Suite 1D09 Conway, SC 29526

(843) 915-5090 / (843) 205-5090

899051

PERMIT # 53941

DATE 12/22/2015

POWER PERMIT #

NAME Paslin,

LOCATION 1361 RIVERSIDE DR.

TIME ARRIVE 11:35

TIME DEPART 12:15

SETBACKS: FR LT RT RR

TYPE INSPECTION P I P I

TEMP SERVICE FOUNDATION

PILASTER SLAB / POLY WIRE

BOND BEAM ROUGH PLUMBING

SLAB PLUMBING ROUGH ELECTRICAL

NAILING BRICK FLASHING

FRAMING WINDOW FLASHING

ROUGH MECHANICAL ROUGH FIRE

INSULATION  FINAL

FINAL FIRE C/OCCUPANCY

MOBILE HOME ZONING C/OCCUPANCY

MOBILE HOME UNDERPINNING SWIMMING POOL

SIGN POOL / DECK GROUNDING

C/O/S METER SERVICE

POST FOUNDATION EROSION SEDIMENT

REMARKS WALL INSULATION OK AT THIS TIME.  
OK TO DRYWALL.  
NEED TO SET UNDER FLOOR INSULATION.

INSPECTOR Harold R. Edson #53

RECEIVED BY

# HORRY COUNTY CODE ENFORCEMENT DIVISION

1301 2nd Ave Suite 1D09 Conway, SC 29526

(843) 915-5090 / (843) 205-5090 931331

PERMIT # 53961

DATE 2/1/16

POWER PERMIT # \_\_\_\_\_

NAME PAGLIA

LOCATION 1361 RIVERSIDE DR.

TIME ARRIVE 1530 TIME DEPART 1555

SETBACKS: FR \_\_\_\_\_ LT \_\_\_\_\_ RT \_\_\_\_\_ RR \_\_\_\_\_

TYPE INSPECTION	P	I	P	I
TEMP SERVICE	—	—	—	—
PILASTER	—	—	—	—
BOND BEAM	—	—	—	—
SLAB PLUMBING	—	—	—	—
NAILING (R)	—	X	—	—
FRAMING	—	—	—	—
ROUGH MECHANICAL	—	—	—	—
INSULATION	—	—	—	—
FINAL FIRE	—	—	—	—
MOBILE HOME	—	—	—	—
MOBILE HOME UNDERPINNING	—	—	—	—
SIGN	—	—	—	—
C/O/S	—	—	—	—
POST FOUNDATION	—	—	—	—
DRYWALL / NAILING	—	—	—	—
FOUNDATION	—	—	—	—
SLAB / POLY WIRE	—	—	—	—
ROUGH PLUMBING	—	—	—	—
ROUGH ELECTRICAL	—	—	—	—
BRICK FLASHING	—	—	—	—
WINDOW FLASHING	—	—	—	—
ROUGH FIRE	—	—	—	—
FINAL	—	—	—	—
C/OCCUPANCY	—	—	—	—
TUB INSULATION	—	—	—	—
SWIMMING POOL	—	—	—	—
POOL / DECK GROUNDING	—	—	—	—
METER SERVICE	—	—	—	—
EROSION SEDIMENT	—	—	—	—
OTHER	—	—	—	—

REMARKS CONNECTION TO NEW FOUNDATION  
OK ON FRONT - NEED TO SEE STRAPS  
ON REAR  
OK TO COVER FRONT.

INSPECTOR Don Hall 17

RECEIVED BY \_\_\_\_\_

# HORRY COUNTY CODE ENFORCEMENT DIVISION

1301 2nd Ave Suite 1D09 Conway, SC 29526

(843) 915-5090 / (843) 205-5090 931710

PERMIT # 53961

DATE 2/3/2016

POWER PERMIT # \_\_\_\_\_

NAME Paula

LOCATION 1361 RIVERSIDE DR

TIME ARRIVE 8:15 TIME DEPART 9:00

SETBACKS: FR \_\_\_\_\_ LT \_\_\_\_\_ RT \_\_\_\_\_ RR \_\_\_\_\_

TYPE INSPECTION	P		I			P		I	
TEMP SERVICE	—	—	—	—	FOUNDATION	—	—	—	—
PILASTER	—	—	—	—	SLAB / POLY WIRE	—	—	—	—
BOND BEAM	—	—	—	—	ROUGH PLUMBING	—	—	—	—
SLAB PLUMBING	—	—	—	—	ROUGH ELECTRICAL	—	—	—	—
NAILING <u>(B)</u>	—	—	✓	—	<u>BRICK FLASHING</u>	—	—	✓	—
FRAMING	—	—	—	—	WINDOW FLASHING	—	—	—	—
ROUGH MECHANICAL	—	—	—	—	ROUGH FIRE	—	—	—	—
INSULATION	—	—	—	—	FINAL	—	—	—	—
FINAL FIRE	—	—	—	—	C/OCCUPANCY	—	—	—	—
MOBILE HOME	—	—	—	—	TUB INSULATION	—	—	—	—
MOBILE HOME UNDERPINNING	—	—	—	—	SWIMMING POOL	—	—	—	—
SIGN	—	—	—	—	POOL / DECK GROUNDING	—	—	—	—
C/O/S	—	—	—	—	METER SERVICE	—	—	—	—
POST FOUNDATION	—	—	—	—	EROSION SEDIMENT	—	—	—	—
DRYWALL / NAILING	—	—	—	—	OTHER	—	—	—	—

REMARKS Brick Flashing OK

MET with MR. Paula and Flood Control OFFICER R TO ADDRESS Hydrostatic Vent Requirements. ADVISED MR Paula of 1 sq. in. per 1 sq. ft vent requirements and He agreed to comply.

INSPECTOR Harold R. Edge #53

RECEIVED BY \_\_\_\_\_

# HORRY COUNTY CODE ENFORCEMENT DIVISION

1301 2nd Ave Suite 1D09 Conway, SC 29526

(843) 915-5090 / (843) 205-5090 941400

PERMIT # 53961

DATE 5/4/16

POWER PERMIT # 163605

NAME Stephanie Paylor

LOCATION 1361 Riverside Dr

TIME ARRIVE 1245 TIME DEPART 1105

SETBACKS: FR \_\_\_\_\_ LT \_\_\_\_\_ RT \_\_\_\_\_ RR \_\_\_\_\_

TYPE INSPECTION	P	I	P	I
TEMP SERVICE	—	—	—	—
PILASTER	—	—	—	—
BOND BEAM	—	—	—	—
SLAB PLUMBING	—	—	—	—
NAILING	—	—	—	—
FRAMING	—	—	—	—
ROUGH MECHANICAL	—	—	—	—
INSULATION	—	—	—	—
FINAL FIRE	—	—	—	—
MOBILE HOME	—	—	—	—
MOBILE HOME UNDERPINNING	—	—	—	—
SIGN	—	—	—	—
C/O/S	—	✓	—	—
POST FOUNDATION	—	—	—	—
DRYWALL / NAILING	—	—	—	—
FOUNDATION	—	—	—	—
SLAB / POLY WIRE	—	—	—	—
ROUGH PLUMBING	—	—	—	—
ROUGH ELECTRICAL	—	—	—	—
BRICK FLASHING	—	—	—	—
WINDOW FLASHING	—	—	—	—
ROUGH FIRE	—	—	—	—
FINAL	—	—	—	—
C/OCCUPANCY	—	—	—	—
TUB INSULATION	—	—	—	—
SWIMMING POOL	—	—	—	—
POOL / DECK GROUNDING	—	—	—	—
METER SERVICE	—	—	—	—
EROSION SEDIMENT	—	—	—	—
OTHER	—	—	—	—

REMARKS Ok to power clots

Roster Card left for final/clo

INSPECTOR Daniel J. [Signature]

RECEIVED BY \_\_\_\_\_

# HORRY COUNTY CODE ENFORCEMENT DIVISION

1301 2nd Ave Suite 1D09 Conway, SC 29526

(843) 915-5090 / (843) 205-5090 **941410**

PERMIT # 53961

DATE 5/5/16

POWER PERMIT # \_\_\_\_\_

NAME Stephanie Paplis

LOCATION 136 Riverside Dr

TIME ARRIVE 1040 TIME DEPART 1110

SETBACKS: FR \_\_\_\_\_ LT \_\_\_\_\_ RT \_\_\_\_\_ RR \_\_\_\_\_

<u>TYPE INSPECTION</u>	<u>P</u>	<u>I</u>		<u>P</u>	<u>I</u>
TEMP SERVICE	—	—	FOUNDATION	—	—
PILASTER	—	—	SLAB / POLY WIRE	—	—
BOND BEAM	—	—	ROUGH PLUMBING	—	—
SLAB PLUMBING	—	—	ROUGH ELECTRICAL	—	—
NAILING	—	—	BRICK FLASHING	—	—
FRAMING	—	—	WINDOW FLASHING	—	—
ROUGH MECHANICAL	—	—	ROUGH FIRE	—	—
<u>INSULATION</u> <sup>Ⓟ</sup>	✓	—	<u>FINAL</u>	—	X
FINAL FIRE	—	—	<u>C/OCCUPANCY</u>	—	X
MOBILE HOME	—	—	TUB INSULATION	—	—
MOBILE HOME UNDERPINNING	—	—	SWIMMING POOL	—	—
SIGN	—	—	POOL / DECK GROUNDING	—	—
C/O/S	—	—	METER SERVICE	—	—
POST FOUNDATION	—	—	EROSION SEDIMENT	—	—
DRYWALL / NAILING	—	—	OTHER	—	—

REMARKS ① Nail connectors between posts + beams at rear porch  
② Need license numbers on Ristar Oak as marked  
③ Need Engineer letter for foundation

INSPECTOR Donald J. 42

RECEIVED BY \_\_\_\_\_

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015  
 #53961  
 5/5/16  
 02/12

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name: STEPHANIE G. PAGLIA		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1361 RIVERSIDE DRIVE		Company NAIC Number:
City CONWAY	State SC	ZIP Code 29526
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TMS #138-00-01-008		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>33-49-45.8 N</u> Long. <u>79-00-35.4 W</u>		Horizontal Datum: NAD 1927 X NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number 8		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <u>2700</u> sq ft		a) Square footage of attached garage <u>1610</u> sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>34</u>		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>1</u>
c) Total net area of flood openings in A8.b <u>3916</u> sq in		c) Total net area of flood openings in A9.b <u>16,128</u> sq in
d) Engineered flood openings? No		d) Engineered flood openings? No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

A.

B1. NFIP Community Name & Community Number HORRY COUNTY 450104		B2. County Name HORRY COUNTY		B3. State SC	
B4. Map/Panel Number 0509	B5. Suffix H	B6. FIRM Index Date 9/17/2003	B7. FIRM Panel Effective/Revised Date AUGUST 12, 1999	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 13

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.  
 FIS Profile       FIRM      Community Determined      Other/Source:

B11. Indicate elevation datum used for BFE in Item B9:  NGVD 1929      NAVD 1988      Other/Source:

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  
 Designation Date: \_\_\_\_\_      CBRS      OPA      Yes       No

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on:      Construction Drawings\*      Building Under Construction\*       Finished Construction  
 \*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  
 Benchmark Utilized: GPS-VRS      Vertical Datum: 1988  
 Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929      NAVD 1988      Other/Source:  
 Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

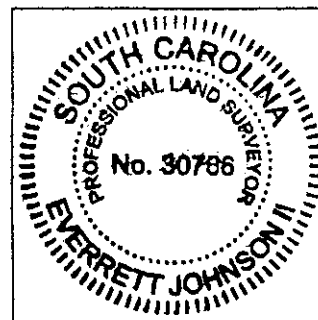
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	16.11	<input checked="" type="checkbox"/> feet	meters
b) Top of the next higher floor	NA	feet	meters
c) Bottom of the lowest horizontal structural member (V Zones only)	NA	feet	meters
d) Attached garage (top of slab)	8.88	<input checked="" type="checkbox"/> feet	meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	13.50	<input checked="" type="checkbox"/> feet	meters
f) Lowest adjacent (finished) grade next to building (LAG)	8.12	<input checked="" type="checkbox"/> feet	meters
g) Highest adjacent (finished) grade next to building (HAG)	8.78	<input checked="" type="checkbox"/> feet	meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	8.12	<input checked="" type="checkbox"/> feet	meters

## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Check here if comments are provided on back of form.      Were latitude and longitude in Section A provided by a licensed land surveyor?      Yes       No  
 Check here if attachments.

Certifier's Name	EVERRETT T JOHNSON II	License Number	30766
Title	OWNER	Company Name	J&W Professional Land Surveyors, LLC
Address	3370 TRULUCK JOHNSON RD	City	AYNOR
		State	SC
		ZIP Code	29511
Signature		Date	4/20/2016
		Telephone	843-241-3800





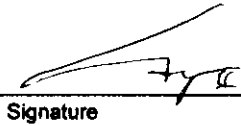
**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1361 RIVERSIDE DRIVE	Policy Number:
City CONWAY State SC ZIP Code 29526	Company NAIC Number:

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments THE A/C PAD IS THE LOWEST MACHINERY USED

  
Signature

Date 4/20/2016

**SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zones AO and 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, enter meters.

- E1. 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 \_\_\_\_\_ feet above the HAG.
  - b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ feet above the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_ feet above or below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_ feet below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ feet above the HAG.
- E5. 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 G.

**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 community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner's or Owner's Authorized Representative's Name

Address City State ZIP Code

Signature Date Telephone

Comments

Check here if attachments.

**SECTION G – COMMUNITY INFORMATION (OPTIONAL)**

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4–G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
-------------------	------------------------	---

- G7. This permit has been issued for:  New Construction  Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ feet \_\_\_\_\_ meters Datum
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ feet \_\_\_\_\_ meters Datum
- G10. Community's design flood elevation: \_\_\_\_\_ feet \_\_\_\_\_ meters Datum

Local Official's Name Title

Community Name Telephone

Signature Date

Comments

Check here if attachments.

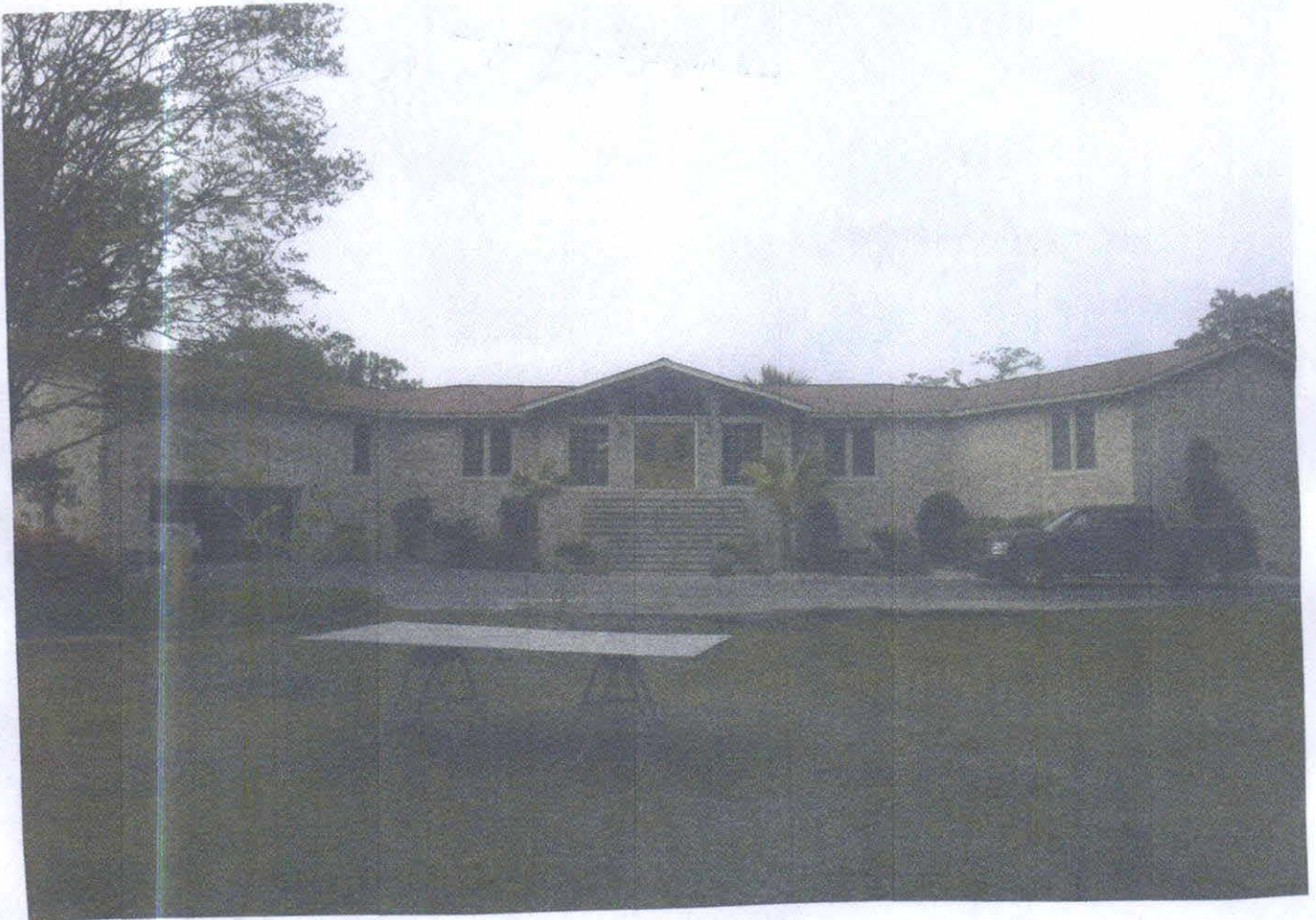
# Building Photographs

See Instructions for Item A6.

**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. 1361 RIVERSIDE DRIVE		FOR INSURANCE COMPANY USE
City CONWAY	State SC ZIP Code 29526	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.





# Building Photographs

See Instructions for Item A6.

**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.  
1361 RIVERSIDE DRIVE

Policy Number:

City CONWAY

State SC

ZIP Code 29526

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.



# HORRY COUNTY CODE ENFORCEMENT DIVISION

1301 2nd Ave Suite 1D09 Conway, SC 29526

(843) 915-5090 / (843) 205-5090 922033

PERMIT # 53961

DATE 5/11/2016

POWER PERMIT # \_\_\_\_\_

NAME Paglia

LOCATION 1361 Riverside Dr

TIME ARRIVE 9:31 TIME DEPART 10:00

SETBACKS: FR \_\_\_\_\_ LT \_\_\_\_\_ RT \_\_\_\_\_ RR \_\_\_\_\_

TYPE INSPECTION	P	I	P	I
TEMP SERVICE	—	—	✓	—
PILASTER	✓	—	—	—
BOND BEAM	✓	—	—	—
SLAB PLUMBING	—	—	—	—
NAILING	—	—	—	—
FRAMING	✓	—	—	—
ROUGH MECHANICAL	—	—	—	—
INSULATION	—	—	—	—
FINAL FIRE	—	—	—	—
MOBILE HOME	—	—	—	—
MOBILE HOME UNDERPINNING	—	—	—	—
SIGN	—	—	—	—
C/O/S	—	—	—	—
POST FOUNDATION	—	—	—	—
DRYWALL / NAILING	—	—	—	—
FOUNDATION	—	—	✓	—
SLAB / POLY WIRE	—	—	—	—
ROUGH PLUMBING	—	—	—	—
ROUGH ELECTRICAL	—	—	—	—
BRICK FLASHING	—	—	—	—
WINDOW FLASHING	—	—	—	—
ROUGH FIRE	—	—	—	—
FINAL	—	—	—	—
C/OCCUPANCY	—	—	—	—
TUB INSULATION	—	—	—	—
SWIMMING POOL	—	—	—	—
POOL / DECK GROUNDING	—	—	—	—
METER SERVICE	—	—	—	—
EROSION SEDIMENT	—	—	—	—
OTHER	—	—	—	—

REMARKS Letter on File From ENGINEER  
OF RECORD. Foundation OK per  
ENGINEER physical inspection AND  
Letter Dated May 6, 2016.  
CORRECTED Final Construction  
E-CURT 2000.

INSPECTOR Donald R. Elder #23

RECEIVED BY \_\_\_\_\_

May 6, 2016

Permit # 53961  
Hru #63 5/11/2016

Re: Foundation Inspection for Raised Home

Stephanie Paglia  
1361 Riverside Drive  
Horry County, SC

To whom it may concern:

Upon a physical inspection of the structure located at 1361 Riverside Drive, the foundation is acceptable and meets the 2012 IRC.

If you should have any questions, I can be reached at (843) 421-3840.

Sincerely,

Jack W. Huggins

