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.

SECTION A - PROPERTY INFORMATION				FOR INSURA	ANCE COMPANY USE	
A1. Building Owner's Name				Policy Number	er:	
	Elahmadie		+			
A2. Building Street Addres Box No.	2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number:					IC Number:
(V-) #/35-00-30/ SO -30 (30-00)	463 Pomo Dr					
City				ZIP Code		
Myrtle Beach	Latinad Diagla Namahara Tar	. Dansal	South Ca		29579	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TMS: 180-24-01-247 / PIN: 427-13-03-0023 Arrowhead Grande Phase I Lot 37						
A4. Building Use (e.g., Re	sidential, Non-Residential, A	Addition,	Accessory, e	tc.) residential		_
A5. Latitude/Longitude: L	_at. N 33° 41' 53.75"	Long. W	78° 57' 7.95"	Horizontal	Datum: 🔲 NAD 19	927 🗵 NAD 1983
A6. Attach at least 2 photo	ographs of the building if the	Certifica	ate is being us	sed to obtain flood	insurance.	
A7. Building Diagram Num	nber <u>1B</u>					
A8. For a building with a c	rawlspace or enclosure(s):					
a) Square footage of	crawlspace or enclosure(s)			N/A sq ft		
b) Number of permand	ent flood openings in the cra	awlspace	or enclosure	(s) within 1.0 foot	above adjacent gra	de N/A
c) Total net area of flo	c) Total net area of flood openings in A8.b sq in					
d) Engineered flood o	d) Engineered flood openings?					
A9. For a building with an	A9. For a building with an attached garage:					
a) Square footage of a	a) Square footage of attached garage sq ft					
b) Number of perman	ent flood openings in the att	ached g	arage within 1	.0 foot above adja	cent grade N/A	
c) Total net area of flo	c) Total net area of flood openings in A9.b N/A sq in					
d) Engineered flood o	ppenings? Yes X N	lo				
	SECTION B - FLOOD I	NSURA			ORMATION	
B1. NFIP Community Name & Community Number B2. County Name B3. State					The state of the s	
Horry County 450104 Horry County South Carolina						
B4. Map/Panel B5. S Number	Buffix B6. FIRM Index Date	Effe	RM Panel ective/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
45051C 0704 K	12-16-2021	12-16-2	vised Date 2021	AE	13	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: FIS Profile X FIRM Community Determined Other/Source:						
☐ FIS FIGURE 区 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:	Designation Date: CBRS DPA					

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

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IMPORTANT: In these spaces, copy the correspond	FOR INCLIDANCE COMPANY LICE			
Building Street Address (including Apt., Unit, Suite, an	FOR INSURANCE COMPANY USE Policy Number:			
463 Pomo Dr				
City Myrtle Beach	State ZIP C South Carolina 29579	A Principality	Company NAIC Number	
SECTION C – BUILDING	ELEVATION INFORMATION	ON (SURVEY RE	EQUIRED)	
C1. Building elevations are based on: Constr *A new Elevation Certificate will be required who	• -	ing Under Constru	uction* X Finished Construction	
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 on Real-Time Network	k Vertical Datum:	NAVD88		
Indicate elevation datum used for the elevations	in items a) through h) below	٠.		
☐ NGVD 1929 ☐ NAVD 1988 ☐ Ot	her/Source:			
Datum used for building elevations must be the	same as that used for the BF	E.	Check the measurement used.	
a) Top of bottom floor (including becoment, or	vulanaca or analogura floor)		16.0 The control of the control	
a) Top of bottom floor (including basement, cra	wispace, or enclosure floor)			
b) Top of the next higher floor			N/A feet meters	
 c) Bottom of the lowest horizontal structural me 	ember (V Zones only)		N/A feet meters	
d) Attached garage (top of slab)			14.5 X feet meters	
 e) Lowest elevation of machinery or equipment (Describe type of equipment and location in 	t servicing the building Comments)		16.2 X feet meters	
f) Lowest adjacent (finished) grade next to bui	lding (LAG)		13.0 X feet meters	
g) Highest adjacent (finished) grade next to bu	ilding (HAG)		14.2 in the image of the ima	
h) Lowest adjacent grade at lowest elevation of structural support			N/A feet meters	
SECTION D - SURVEY	OR, ENGINEER, OR ARC	HITECT CERTIF	CATION	
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.				
Were latitude and longitude in Section A provided b	y a licensed land surveyor?	⊠Yes □No	Check here if attachments.	
Certifier's Name	License Number			
Kenneth D. Jordan	21936		_ N NV	
Title President			Place	
Company Name K & R Land Surveyors Inc			Seal	
Address 312 Laurel Street			Here	
City Conway	State South Carolina	ZIP Code 29526		
Signature leme the D.	Date 10-26-2022	Telephone (843) 488-1804	Ext.	
Copy all pages of this Elevation Certificate and all atta	achments for (1) community of	ficial, (2) insurance	agent/company, and (3) building owner	
Comments (including type of equipment and location Elevations were determined using Real-Time Netwo				
Lowest piece of machinery is the HVAC				

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IMPORTANT: In these spaces, copy the corresponding information from S	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. F 463 Pomo Dr	Policy Number:					
	IP Code 9579	Company NAIC Number				
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		rs 🔲 above or 🔲 below the HAG.				
b) Top of bottom floor (including basement, crawlspace, or enclosure) is	_	rs above or below the LAG.				
E2. For Building Diagrams 6–9 with permanent flood openings provided in Se the next higher floor (elevation C2.b in						
the diagrams) of the building is						
E3. Attached garage (top of slab) is		rs above or below the HAG.				
E4. Top of platform of machinery and/or equipment servicing the building is		rs 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					
SECTION F - PROPERTY OWNER (OR OWNER'S R	EPRESENTATIVE) C	ERTIFICATION				
The property owner or owner's authorized representative who completes Sectommunity-issued BFE) or Zone AO must sign here. The statements in Section	tions A, B, and E for Z ons A, B, and E are co	one A (without a FEMA-issued or rrect to the best of my knowledge.				
Property Owner or Owner's Authorized Representative's Name						
Address City	S	tate ZIP Code				
Signature Date	Т	elephone				
Comments						
ii .						
		Check here if attachments.				

ELEVATION CERTIFICATE

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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. 463 Pomo Dr	Policy Number:				
City State ZIP Code Myrtle Beach South Carolina 29579	Company NAIC Number				
SECTION G - COMMUNITY INFORMATION (OPTIONAL	_)				
The local official who is authorized by law or ordinance to administer the community's floodplain r Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and s 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 FE or Zone AO.	EMA-issued or community-issued BFE)				
G3. The following information (Items G4–G10) is provided for community floodplain managed	ement purposes.				
G4. Permit Number G5. Date Permit Issued G6	6. 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:	eet meters Datum				
G9. BFE or (in Zone AO) depth of flooding at the building site:	eet meters Datum				
	eet meters Datum				
Local Official's Name Title					
Community Name Telephone					
Signature Date					
Comments (including type of equipment and location, per C2(e), if applicable)					
	☐ Check here if attachments.				

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 463 Pomo Dr			Policy Number:
City Martin Basel	State	ZIP Code	Company NAIC Number
Myrtle Beach	South Carolina	29579	

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

Photo One Caption Front Clear Photo One



Photo Two

Rear

Clear Photo Two

Photo Two Caption

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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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.
463 Pomo Dr

City
State
ZIP Code
Myrtle Beach
South Carolina
29579

FOR INSURANCE COMPANY USE

FOR INSURANCE COMPANY USE

Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo Three

Photo Three Caption Right Clear Photo Three



Photo Four

Photo Four Caption Left Clear Photo Four