

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires July 31, 2002

Important: Read the instructions on pages 1-7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: BUILDING OWNER'S NAME Policy Number Bluegreen Corporation BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number **Building 20** CITY STATE ZIP CODE Myrtle Beach SC PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Harbour Lights Phase 3 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) Residential-Timeshare LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): (##° - ##' - ##.##"' or ##.####") ■ NAD 1927 ■ NAD 1983 ☐ USGS Quad Map SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME** B3. STATE Horry County, 450104 SC Horry B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX B7. FIRM PANEL B9. BASE FLOOD B8 PLOO NUMBER DATE EFFECTIVE/REVISED DATE ZONE(S) ELEVATION(S) (Zone AO, use 45051C 0638 H 08/23/99 oth of flooding) 08/23/99 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. FIS Profile **⊠** FIRM Community Determined Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 ☐ NAVD 1988☐ Other (Describe): B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date 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. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) C3. 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 C3a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion. Datum 1929 Conversion/Comments N/A Elevation reference mark used 26-220 Does the elevation reference mark used appear on the FIRM?

Yes
No 20.73 ft. (m) a) Top of bottom floor (including basement or enclosure) ft. (m) b) Top of next higher floor Embossed and Date c) Bottom of lowest horizontal structural member (V zones only) N/A ft. (m) N/A. ft. (m) d) Attached garage (top of slab) e) Lowest elevation of machinery and/or equipment servicing the building 20.55 ft. (m) 20.01 ft. (m) f) Lowest adjacent grade (LAG) 20.37 ft. (m) g) Highest adjacent grade (HAG) h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade N/A. i) Total area of all permanent openings (flood vents) in C3h N/A sq. in. (sq. cm) 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 in Sections A, B, and C 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. RAY R. ESHELMAN LICENSE NUMBER 22753 CERTIFIER'S NAME COMPANY NAME Associated Land Surveyors TITLE PLS ADDRESS 2411 Oak Street, Suite 304 CITY Myrtle Beach STATE SC ZIP CODE DATE JULY 10, 2003 TELEPHONE (843) 626-7393 SIGNATURE

IMPORTANT: In these spaces, copy the corresponding information from Section A.				or Insurance Company Use: •
BUILDING STREET ADDRESS (In	ncluding Apt., Unit, Suite, and/or Bldg. No.) OR P.O. R	OUTE AND BOX NO.	P	olicy Number
СПУ	STAT	E ZIP	CODE 0	Company NAIC Number
SECTI	ION D - SURVEYOR, ENGINEER, OR ARC	CHITECT CERTIFICATIO	ON (CONTINUE)	D)
	Certificate for (1) community official, (2) insura			-,
COMMENTS				- Carlot Sylvania
NONE				
				☐ Check here if attachme
	LEVATION INFORMATION (SURVEY N			
for Zone AO and Zone A (without or LOMR-F, Section C must be co	t BFE), complete Items E1 through E4. If the Ele	evation Certificate is intended	for use as supporti	ng information for a LOM
	Select the building diagram most similar to the b	uilding for which this certificat	te is being complet	ted - see pages 6 and 7. If
no diagram accurately represen	nts the building, provide a sketch or photograph.)			
	cluding basement or enclosure) of the building is	ft.(m) _in.(cm) above	or below (ch	eck one) the highest
adjacent grade.	th openings (see page 7), the next higher floor or	alayated floor (alayation b) of	the building is	ft (m) in (cm) shove t
highest adjacent grade.	n openings (see page 7), the next nigher noor of	cievated floor (cievation b) or	the building is	ic(iii)iii.(ciii) above i
	depth number is available, is the top of the botto	om floor elevated in accordance	e with the commun	nity's floodplain
	Yes No Unknown. The local offici	The same of the sa		
	ION F - PROPERTY OWNER (OR OWNE			
The property owner or owner's au BFE) or Zone AO must sign here	uthorized representative who completes Sections 2.	A, B, and E for Zone A (with	out a FEMA-issue	d or community-issued
PROPERTY OWNER'S OR OW	WNER'S AUTHORIZED REPRESENTATIVE	E'S NAME		
ADDRESS		CITY	STATE	ZIP CODE
SIGNATURE		DATE	TELEPHO	INE
COMMENTS				
			Г	Check here if attachmen
	SECTION G - COMMUNITY IN	FORMATION (OPTIONAL	L)	_ Check here is attachmen
The local official who is authorized	d by law or ordinance to administer the communi		the same of the sa	plete Sections A, B, C (or
G of this Elevation Certificate. Con	implete the applicable item(s) and sign below.			
G1. The information in Section	C was taken from other documentation that has	been signed and embossed by	a licensed surveyo	or, engineer, or architect v
authorized by state or local	I law to certify elevation information. (Indicate to pleted Section E for a building located in Zone A	ne source and date of the eleval	non data in the Co	BFE) or Zone AO.
G3. The following information	(Items G4-G9) is provided for community flood	Iplain management purposes.		,
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CER	RTIFICATE OF	
			OCCUPANCY I	SSUED
G7. This permit has been issued for	or: New Construction Substantial Imp		A (m)	Detum
G8. Elevation of as-built lowest floor (including basement) of the building is: G9. BFE or (in Zone AO) depth of flooding at the building site is:			ft.(m) ft.(m)	Datum:
LOCAL OFFICIAL'S NAME		TITLE		-
COMMUNITY NAME		TELEPHONE		
SIGNATURE		DATE		
COMMENTS				
			r	7 Charlebarra if an ab
				Check here if attachme