## U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

Permittul030

OMB No. 1660-0008

Expiration Date: November 30, 2018

# **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.

Policy Number:
Company NAIC Number:
ZIP Code 29576
/ .
um: NAD 1927 X NAD 1983
urance.
ve adjacent grade 8
t grade 0
t grade
MATION
B3. State South Carolina
(s) B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)
em B9:
em B9:
em B9: Other/Source:
1

### **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE Policy Number: Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 326 SOUTH DOGWOOD DRIVE Company NAIC Number ZIP Code City State GARDEN CITY South Carolina 29576 SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: Construction Drawings\* Building Under Construction\* X 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: SCVRS Vertical Datum: NGVD 29 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. 7 1 a) Top of bottom floor (including basement, crawlspace, or enclosure floor) × feet meters 18 9 b) Top of the next higher floor x feet meters N/A Bottom of the lowest horizontal structural member (V Zones only) x feet meters N/A d) Attached garage (top of slab) x feet meters 17 9 e) Lowest elevation of machinery or equipment servicing the building x feet meters (Describe type of equipment and location in Comments) 4 9 f) Lowest adjacent (finished) grade next to building (LAG) x feet meters 7 g) Highest adjacent (finished) grade next to building (HAG) x feet meters N/A h) Lowest adjacent grade at lowest elevation of deck or stairs, including x feet meters structural support 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. Were latitude and longitude in Section A provided by a licensed land surveyor? □ No Check here if attachments Certifier's Name License Number MICHAEL S. CULLER, III 29114 Title PRESIDENT Company Name Place CULLER LAND SURVEYING III, INC Address 1010 5TH AVE NW SWELL OF State ZIP Code LIPSTH SURFSIDE BEAC South Carolina 29575 **CULLER LAND** Signature Date Telephone SURVEYING III INC 07/13/2016 (843) 238-2333 NO. 4590 Copy all pages of the Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner. Comments (including the president and location, per C2(e), if applicable)
ITEM C2-A REFERS TO IN THE ORNIEVEL OF BELOW ENCLOSURE (STORAGE / GARAGE AREA) NOTE THIS DWELLING HAS TWO BELOW ENCLOSURES (1) AN ELEVATOR BEING 25 SQLF. WITH A SHAFT ELEVATION OF 6.4', (2) STORAGE / GARAGE AREA BEING 361 Sq. Ft. USING 6 OF THE 8 VENTS. INTEM C2-E REFERS TO FLOOR LEVEL OF HVAC SYSTEM.

# ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

State ZIP Code GARDEN CITY South Carolina 29576  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	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. 326 SOUTH DOGWOOD DRIVE					NCE COMPANY USE
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						
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  b) Top of bottom floor (including basement, crawlspace, or enclosure) is  E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is  E3. Attached garage (top of slab) is  E4. Top of platform of machinery and/or equipment servicing the building is  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 or Owner's Authorized Representative's Name  Address  City State ZIP Code	City GARDEN CITY				Company NAI	C Number
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	SECTION E - BUILDING	G ELEVATION INFOR ZONE AO AND ZONE	MATION (SUR) A (WITHOUT E	/EY NOT	REQUIRED)	
the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).  a) Top of bottom floor (including basement, crawlspace, or enclosure) is	For Zones AO and A (without BFE), complete Item complete Sections A, B,and C. For Items E1–E4, enter meters.	ns E1–E5. If the Certific use natural grade, if ava	ate is intended to allable. Check the	support a measuren	LOMA or LOM nent used. In P	R-F request, luerto Rico only,
crawlspace, or enclosure) is	the highest adjacent grade (HAG) and the lov	g and check the approprivest adjacent grade (LA	iate boxes to sho G).	w whether	the elevation is	s above or below
crawlspace, or enclosure) is	crawlspace, or enclosure) is		feet	meters	above o	r below the HAG.
the next higher floor (elevation C2.b in the diagrams) of the building is			feet	meters	above o	r Delow the LAG.
E3. Attached garage (top of slab) is	the next higher floor (elevation C2.b in	ood openings provided i				
E4. Top of platform of machinery and/or equipment servicing the building is	E3. Attached garage (top of slab) is					
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 or Owner's Authorized Representative's Name  Address  City State ZIP Code  Signature  Date Telephone	E4. Top of platform of machinery and/or equipme servicing the building is	nt				
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 or Owner's Authorized Representative's Name  Address  City State ZIP Code  Signature  Date Telephone	E5. Zone AO only: If no flood depth number is av	ailable, is the top of the	bottom floor elev	ated in acc	ordance with the	ne community's
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 or Owner's Authorized Representative's Name  Address  City State ZIP Code  Signature  Date Telephone		E POR VIEW TO A STATE OF				nation in Section G.
Signature Date Telephone	The property owner or owner's authorized represe community-issued BFE) or Zone AO must sign he	entative who completes are. The statements in Se	Sections A. B. an	d E for Zor	ne A (without a	FEMA-issued or of my knowledge.
	Address	Ci	ty	Sta	ite	ZIP Code
Comments	Signature	Da	ate	Tel	ephone	VA COLOR
	Comments		391.		1	
						Acres 1997
					19 v.	
☐ Check here if attachments.					□ Chart	have if attack

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2018

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. 326 SOUTH DOGWOOD DRIVE			Policy Number:	
City GARDEN CITY	State South Carolina	ZIP Code 29576	Company NAIC Number	
SE	CTION G - COMMUNITY INF	ORMATION (OPTIONA	(L)	
The local official who is authorized by law of Sections A, B, C (or E), and G of this Eleva used in Items G8–G10. In Puerto Rico only	ration Certificate. Complete the ly, enter meters.	e applicable item(s) and	sign below. Check the measurement	
engineer, or architect who is auth data in the Comments area below	thorized by law to certify elevat w.)	tion information. (Indicat	ed and sealed by a licensed surveyor, te the source and date of the elevation	
G2. A community official completed S or Zone AO.  G3. The following information (Items			EMA-issued or community-issued BFE)	
G5, 🖂	OT CTO/ IS provided for comm	munity noodplant manag	Jement purposes.	
G4. Permit Number	G5. Date Permit Issued	d G	Date Certificate of Compliance/Occupancy Issued	
G7. This permit has been issued for:	☐ New Construction ☐ S	Substantial Improvement		
G8. Elevation of as-built lowest floor (inclu of the building:	uding basement)		feet meters Datum	
G9. BFE or (in Zone AO) depth of flooding	g at the building site:		feet meters Datum	
G10. Community's design flood elevation:	- 1 Table -		feet  meters Datum	
Local Official's Name	1	Title		
Community Name	1	Telephone		
Signature		Date	in an	
Comments (including type of equipment and	d location, per C2(e), if applica	able)		
			Check here if attachments.	
			oncor here it attachments.	

#### **BUILDING PHOTOGRAPHS**

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

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.  326 SOUTH DOGWOOD DRIVE			FOR INSURANCE COMPANY USE
			Policy Number:
City GARDEN CITY	State South Carolina	ZIP Code 29576	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 Caption REAR SIDE VIEW OF ENCLOSURE TAKEN 07/12/2016

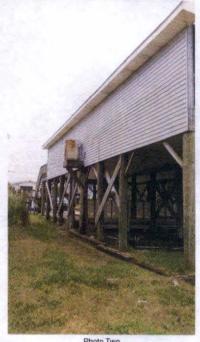


Photo Two

Photo Two Caption LEFT SIDE VIEW TAKEN 01/26/2016

### **BUILDING PHOTOGRAPHS**

### **ELEVATION CERTIFICATE**

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

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.  326 SOUTH DOGWOOD DRIVE			FOR INSURANCE COMPANY USE Policy Number:	
GARDEN CITY	South Carolina	29576		

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 One Caption FRONT VIEW TAKEN 01/26/2016



Photo Two

Photo Two Caption REAR VIEW TAKEN 01/26/2016