Horry County Government

Code Enforcement Department www.horrycounty.org



Horry County Government & Justice Center 1301 Second Avenue / Suite 1D09 Conway, South Carolina 29526 Phone 843.915.5090 | Fax 843.915.6090

149516 ce Center 4394 Kinlaw 915.6090 St

MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

accordance with this community's participation in the National Flood Insurance Program's Community Rating ystem, all FEMA Elevation Certificates must be correct and complete. The attached Certificate has some incorrect ams which are noted here.

SECTION A - PROPERTY INFORMATION	For Insurance Company Use:
A1. Building Owner's Name	Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Company NAIC Number
City State ZIP Code	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number —A8.—For-a-building-with-a-crawl-space or-enclosure(s),-provide —a) Square footage of crawl space or enclosure(s) —sq ft a) Square footage of attached at the certificate is being used to obtain flood insurance. A7. Building Diagram Number —A9.—For-a-building-with-an-attached at the certificate is being used to obtain flood insurance. A7. Building Diagram Number —A9.—For-a-building-with-an-attached at the certificate is being used to obtain flood insurance. A7. Building Diagram Number —A9.—For-a-building-with-an-attached at the certificate is being used to obtain flood insurance. A7. Building Diagram Number —A9.—For-a-building-with-an-attached at the certificate is being used to obtain flood insurance.	ached garage sq ft od openings in the attached garage bove adjacent grade compenings in A9.b
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATIO	
B1. NFIP Community Name & Community Number B2. County Name	B3. State
B4. Map/Panel Number B5. Suffix B6, FIRM Index B7, FIRM Panel B8. Flood Date Effective/Revised Date Zone(s)	B9. Base Flood Elevation(s) (Zon AO, use base flood depth)
O. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. ☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe)	
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUI	RED)
1. Building elevations are based on: Construction Drawings* Building Under Construction* onstruction *A new Elevation Certificate will be required when construction of the building is complete. 2. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AI Items C2.a-h below according to the building diagram specified in Item A7. Benchmark Utilized	
OMMENTS:	
rate of Review: 7-19-23 Community Official:	

Il elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.

6-1-2023 RMLCM22

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 INSU	FOR INSURANCE COMPANY USE		
A1. Building Owner's Name					Policy Nur	nber:	
	Infinity Custom Built Homes, LLC						
A2. Building Stree Box No. 4394 Kinlaw St							NAIC Number:
City	w · · · ·			State		ZIP Code	
Little River				South C	arolina	29566	
A3. Property Desc Lot 19 Little River f		nd Block Numbers, Ta # 312-16-04-0033	ax Parcel	l Number, Le	gal Description, e	tc.)	
A4. Building Use (e.g., Resider	ntial, Non-Residential,	Addition	, Accessory,	etc.) Resident	ial	
A5. Latitude/Longi	tude: Lat. 3	3°51'36.05"	Long. 7	8°38′51.13"	Horizont	al Datum: 🔲 NAD	1927 X NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being i	used to obtain floo	od insurance.	
A7. Building Diagra	am Number	1B					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawl	space or enclosure(s))		N/A sq ft		
b) Number of p	permanent flo	ood openings in the cr	awlspace	e or enclosur	 e(s) within 1,0 foo	ot above adjacent gr	ade N/A
c) Total net are	ea of flood op	penings in A8.b		N/A sqir	1		
d) Engineered	flood openir	ngs? Yes 🗆	No				
A9. For a building v	vith an attach	ned garage:					
a) Square foot	age of attach	ned garage		400.00 sq f	t		
b) Number of p	ermanent flo	ood openings in the at	tached g	arage within	1.0 foot above ad	jacent grade 0	
c) Total net are	ea of flood op	penings in A9.b		0.00 sq	in		
d) Engineered	flood openin	gs? ☐ Yes 🗷 N	Чo				
	SE	ECTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM) INI	FORMATION	-
B1. NFIP Community Name & Community Number B2. County Name					B3. State		
Horry County; 450104 Horry South Carolina							
B4. Map/Panel Number	B5, Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood I (Zone AO, us	Elevation(s) se Base Flood Depth)
45051C 0607	κ	12-16-2021	12-16-2		AE	10	
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 X 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							
residirenti r	-a		CDING				
							1



ELEVATION CERTIFICATE

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

			Expirat	ion bate. I	1016/11DEF 30, 2022		
IMPORTANT: In these spaces, copy the corresponding information from Section A.					FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit 4394 Kinlaw St	, Suite, and/or Bldg. No.) or P.O. Rou	ite and Box No.	Policy	Number:			
City		Code	Compa	any NAIC I	Number		
Little River	South Carolina 295	66					
SECTION C - B	UILDING ELEVATION INFORMAT	ION (SURVEY R	EQUIRE	ED)			
C1. Building elevations are based on: [*A new Elevation Certificate will be red	- <u>-</u>	ding Under Construng is complete.	rction*		hed Construction		
C2. Elevations – Zones A1–A30, AE, AH, Complete Items C2.a–h below accord	ing to the building diagram specified i	n Item A7. In Puert	/AE, AR/ to Rico o	/A1–A30, / inly, enter	AR/AH, AR/AO. meters.		
Benchmark Utilized: SC VRS	Vertical Datum:	NAVD1988					
Indicate elevation datum used for the		W.					
☐ NGVD 1929 🔀 NAVD 198							
Datum used for building elevations mu	ist be the same as that used for the B	FE.	Che	ck the me	asurement used.		
a) Top of bottom floor (including base	ment, crawlspace, or enclosure floor)	ı	18.3	⊠ feet	meters		
b) Top of the next higher floor	,		N/A	× feet	meters		
c) Bottom of the lowest horizontal stru	ctural member (V Zones only)		N/A	∑ feet	meters		
d) Attached garage (top of slab)	,		16.6	⊠ feet	meters		
e) Lowest elevation of machinery or e (Describe type of equipment and lo	quipment servicing the building cation in Comments)		18.0	⊠ feet	meters		
f) Lowest adjacent (finished) grade ne	ext to building (LAG)		9.1	⊠ feet	meters		
g) Highest adjacent (finished) grade n	ext to building (HAG)		16.2	⊠ feet	meters		
Lowest adjacent grade at lowest ele structural support	• • •		N/A	★ feet	meters		
SECTION D - S	SURVEYOR, ENGINEER, OR ARC	HITECT CERTIFI	CATIO	N P			
This certification is to be signed and sealed I certify that the information on this Certifica statement may be punishable by fine or imp	by a land surveyor, engineer, or archate represents my best efforts to inten	nitect authorized by oret the data availa	law to c	ertify elev	ation information. hat any false		
Were latitude and longitude in Section A pro-	ovided by a licensed land surveyor?	⊠Yes □No		Check here	e if attachments.		
Certifier's Name	License Number			.,	117111		
Ray R. Eshelman	22753		_	Tille,	WHILI		
Title PLS				1,21	I-YO,		
Company Name			- ∤ :	1/2	ace		
Palmetto Corp of Conway				S: 30S	exa		
Address 3873 Hwy 701 N			··	31/	9,23		
City Conway	State South Carolina	ZIP Code 29526		1/1/11/11	Manne		
Signature # 12E	Date 05-05-2023	Telephone (843) 716-6021	Ext.	101			
Copy all pages of this Elevation Certificate an	d all attachments for (1) community off	icial, (2) insurance a	agent/cor	mpany, and	d (3) building owner.		
Comments (including type of equipment and C2(e). A/C unit wooden stand along left side		· · · · · · · · · · · · · · · · · · ·					

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ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30

ELL'ANTON OLIVINIONIE				Expiration Date.	November 30, 2022
IMPORTANT: In these spaces, copy the correspond	nding information f	rom Section A.		FOR INSURAN	CE COMPANY USE
Building Street Address (including Apt., Unit, Suite, a 4394 Kinlaw St	and/or Bldg. No.) or F	P.O. Route and Box	No.	Policy Number:	
City	State	ZIP Code		Company NAIC	Number
Little River	South Carolina	29566			
SECTION E BUILDING I FOR ZO	ELEVATION INFOF NE AO AND ZONE			REQUIRED)	
For Zones AO and A (without BFE), complete Items complete Sections A, B,and C. For Items E1–E4, use enter meters.					
E1. Provide elevation information for the following a the highest adjacent grade (HAG) and the lowes a) Top of bottom floor (including basement,	nd check the approp st adjacent grade (LA	riate boxes to show AG).	whether	the elevation is	above or below
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 6–9 with permanent flood the next higher floor (elevation C2.b in	d openings provided	in Section A Items 8	3 and/or 9	(see pages 1–	2 of Instructions),
the diagrams) of the building is			meters	above or	below the HAG.
E3. Attached garage (top of slab) is	M	[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 availa floodplain management ordinance? Yes					
SECTION F - PROPERTY O	WNER (OR OWNER	'S REPRESENTAT	IVE) CEF	RTIFICATION	
The property owner or owner's authorized representa community-issued BFE) or Zone AO must sign here.	ative who completes The statements in S	Sections A, B, and I ections A, B, and E	E for Zon are corre	e A (without a F ect to the best o	EMA-issued or f my knowledge.
Property Owner or Owner's Authorized Representation	ve's Name				
Address	С	ity	Staf	le	ZIP Code
Signature	D	ate	Tele	ephone	
Comments					
				Check h	ere if attachments.

144016 6-1-2023 PMLCV.22

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4394 Kinlaw St			Policy Number:
City Little River	State South Carolina	ZIP Code 29566	Company NAIC Number
SECTION	ON G - COMMUNITY INFO	ORMATION (OPTIONA	L)
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete the	community's floodplain applicable item(s) and s	management ordinance can complete ign below. Check the measurement
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)	en from other documentati ed by law to certify elevati	ion that has been signed on information. (Indicate	d and sealed by a licensed surveyor, the source and date of the elevation
or Zone AO.			MA-issued or community-issued BFE)
G3. The following information (Items G4-	-G10) is provided for comm	nunity floodplain manag	ement purposes.
G4. Permit Number	G5. Date Permit Issued	Ge	Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	New Construction 🗌 Su	ıbstantial Improvement	
G8. Elevation of as-built lowest floor (including of the building:	g basement)	[] f	eet 🗌 meters Datum
G9. BFE or (in Zone AO) depth of flooding at	the building site:	f	eet meters Datum
G10. Community's design flood elevation:	**************************************		eet meters Datum
Local Official's Name	Ti	itle	
Community Name	T	elephone	
Signature	D	ate	
Comments (including type of equipment and loc	cation, per C2(e), if applica	ble)	
			Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008

ELEVATION CERTIFICATE

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, of	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4394 Kinlaw St			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

Front View Taken 05/03/2023 Photo One Caption

Clear Photo One

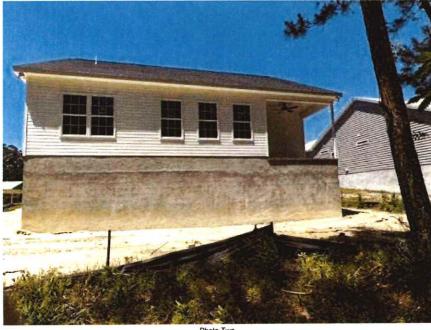


Photo Two Caption Rear View Taken 05/03/2023 Clear Photo Two

6-1-2023

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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

IMPORTANT: In these spaces,	FOR INSURANCE COMPANY USE		
Building Street Address (includin 4394 Kinlaw St	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Little River	South Carolina	29566	

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.

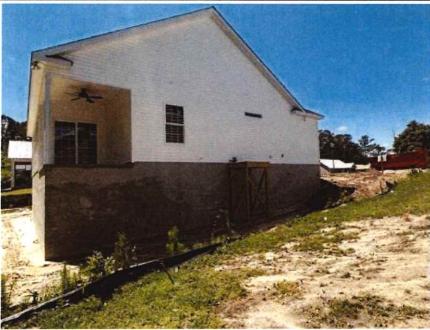


Photo Three

Photo Three Caption Left View Taken 05/03/2023

Clear Photo Three

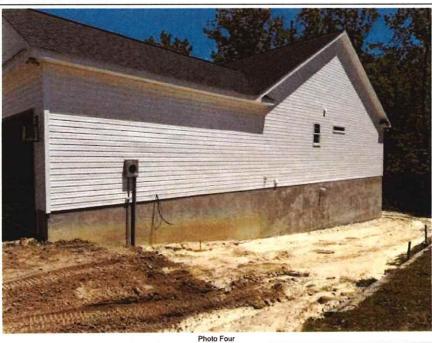


Photo Four Caption Right View Taken 05/03/2023

Clear Photo Four