

67756
 HG-45

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 INSURANCE COMPANY USE	
A1. Building Owner's Name DOROTHY SIMPSON ET AL				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Box No. 4304 MYNATT COURT				Company NAIC Number:	
City MYRTLE BEACH		State South Carolina		ZIP Code 29588	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 5 ADDYLAN ACRES TMS#190-00-03-280					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)				RESIDENTIAL	
A5. Latitude/Longitude: Lat. 33d 37' 12.11"				Long. -079d 01' 48.39"	
				Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 <u>1A</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>233.00</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u>					
c) Total net area of flood openings in A8.b <u>0.00</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>659.00</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>4</u>					
c) Total net area of flood openings in A9.b <u>463.00</u> sq in					
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number Horry County 450104			B2. County Name Horry		B3. State South Carolina
B4. Map/Panel Number 45051CO732	B5. Suffix H	B6. FIRM Index Date 09-17-2003	B7. FIRM Panel Effective/Revised Date 12-03-2004	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 23
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

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. 4304 MYNATT COURT			Policy Number:	
City MYRTLE BEACH	State ✓ South Carolina	ZIP Code 29588	Company NAIC Number	

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: OPUS Vertical Datum: NAVD88 GEOID12B

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) | 23.90 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor | 24.20 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | N/A | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab) | 22.90 | <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) | 23.20 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | 22.30 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | 23.90 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support | N/A | <input 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.

Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments.

Certifier's Name CRAIG MERCER THOMAS	License Number 11073
Title PRESIDENT	
Company Name WACCAMAW LAND SURVEYORS, INC.	
Address SUITE 640 F HWY 17 S.	
City SURFSIDE BEACH	State South Carolina
	ZIP Code 29575



Signature <i>Craig Mercer Thomas</i>	Date 06-06-2017	Telephone (843) 232-1435	Ext.
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Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)
C2-a 233 sq. ft. ENCLOSED REAR PORCH

LOMR LETTER ATTACHED FOR CASE # 04-04-203P EFFECTIVE DATE 12-03-2004

SMARTVENT #1540-570 (4) INSTALLED IN GARAGE

ELEVATION CERTIFICATE

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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 6–9 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 _____ 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 or Owner's Authorized Representative's Name

Address _____ City _____ State _____ ZIP Code _____

Signature _____ Date _____ Telephone _____

Comments

Check here if attachments.

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
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City MYRTLE BEACH	State South Carolina	ZIP Code 29588	Company NAIC Number

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
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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 (including type of equipment and location, per C2(e), if applicable)

Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

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City MYRTLE BEACH	State South Carolina	ZIP Code 29588	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.



FRONT

Photo One

Photo One Caption

Clear Photo One



REAR

Photo Two

Photo Two Caption

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

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LEFT SIDE
GARAGE

Photo One

Photo One Caption

Clear Photo One



LEFT SIDE HOUSE
REAR GARAGE

Photo Two

Photo Two Caption

Clear Photo Two



Federal Emergency Management Agency

Washington, D.C. 20472

AUG 20 2004

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. Danny Knight
Horry County Administrator
P.O. Box 1236
Conway, South Carolina 29528

IN REPLY REFER TO:

Case Number: 04-04-203P
Community Name: Horry County, South Carolina
(Unincorporated Areas)
Community Number: 450104
Effective Date of
this Revision: DEC -3 2004

Dear Mr. Knight:

The Flood Insurance Study (FIS) report and Flood Insurance Rate Map (FIRM) for your community have been revised by this Letter of Map Revision (LOMR). Please use the enclosed annotated map panel(s) revised by this LOMR for floodplain management purposes and for all flood insurance policies and renewals issued in your community.

Additional documents are enclosed which provide information regarding this LOMR. Please see the List of Enclosures below to determine which documents are included. Other attachments specific to this request may be included as referenced in the Determination Document. If you have any questions regarding floodplain management regulations for your community or the National Flood Insurance Program (NFIP) in general, please contact the Consultation Coordination Officer (CCO) for your community. If you have any technical questions regarding this LOMR, please contact the Director, Federal Insurance and Mitigation Division of the Federal Emergency Management Agency (FEMA) in Atlanta, Georgia, at (770) 220-5400, or the FEMA Map Assistance Center toll free at 1-877-336-2627 (1-877-FEMA MAP). Additional information about the NFIP is available on our web site at <http://www.fema.gov/nfip>.

Sincerely,

William R. Blanton Jr., CFM
Project Officer
Hazard Identification Section
Mitigation Division
Emergency Preparedness
and Response Directorate

For: Doug Bellomo, P.E., CFM, Acting Chief
Hazard Identification Section
Mitigation Division
Emergency Preparedness
and Response Directorate

List of Enclosures:

Letter of Map Revision Determination Document
Annotated Flood Insurance Study Report
Annotated Flood Insurance Rate Map
List of Current Flood Insurance Study Data

cc: Mr. Michael O'Dea, Horry County Flood Hazard Control Officer
Dr. Michael H. Woo, P.E.
Mr. Ed Edelen
Mr. Al Estee



Smart VENT

877- 441- 8368

www.smartvent.com

INSTALLATION INSTRUCTIONS & DETAILS

MODEL 1540-570

14.5" WOOD WALL INSULATED

INSTALLATION INSTRUCTIONS

(SEE DIAGRAM ON BACK PAGE 1 OF 2)

REV. 5-15-09

1. For each vent cut a CLEAN, SQUARE, and LEVEL 14 1/2"x 8 3/4" opening in the outside sheathing. Ensure that the bottom of the opening is no more than 12" above the outside final grade.
2. Remove Vent door from Vent frame. (turn upside down, rotate bottom of door outward and slide out of frame slots)
3. Position the vent frame in the opening with SERIAL NUMBER LABEL on the BOTTOM and ensure that it is square and level. Apply a small bead of polyurethane adhesive behind the vent front frame as shown in the diagram.
4. Use 4 each flathead stainless steel screws to secure the frame through the sheathing and into the structural member.
NOTE: This model does not contain straps.
5. Install the door by inserting the side pins into the tracks at the sides of the vent frame. Ensure the black float pins are facing downward.
6. Let the bottom of the Vent door go so that it rotates down into the Vent frame. Check that Vent door is latched on both sides.
7. To open the door insert 2 credit cards into the float slots as shown in the diagram.
8. The outside flange and screws can be covered with "J" channel or any surface treatment like brick or stone. Use CAUTION do not apply any covering that will impede the movement of the vent door in any direction.

DETAIL SPECIFICATIONS:

MATERIAL: STAINLESS STEEL

OPERATION: AUTOMATIC NON-POWERED ACTIVATION AND OPERATION
VENT REMAINS CLOSED AND LOCKED UNTIL ACTIVATED

INSTALLATION:

SECURED W/ 4 STAINLESS STEEL FLATHEAD SCREWS

NOTE: THIS MODEL DOES NOT CONTAIN STRAPS

HYDROSTATIC RELIEF: 200 Sq. Ft per Vent

REQUIREMENTS: MINIMUM OF 2 VENTS PER ENCLOSED AREA
MOUNTED ON OPPOSITE OR ADJACENT WALLS

COLORS: STAINLESS STEEL (STANDARD)

WHITE, WHEAT, GRAY, AND BLACK (AVAILABLE)

MEETS THE REQUIREMENTS FOR ENGINEERED OPENINGS AS SET FORTH BY:
FEMA, NFIP, ICC, & ASCE
SUPPORTIVE DOCUMENTS, TB 1-08, 44CFR 60.3(C)(5), ASCE 24-05
ICC EVALUATION # ESR-2074