U.S. DEPARTM NT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008
Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION	FOR INSURANCE COMPANY USE	
A1. Building Owner's Name Kenzgar, LLC.	Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 139 Kenzgar Drive	Company NAIC Number:	
City Myrtle Beach State SC ZIP Code 29588	N A	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TMS# 179-39-02-010, Kenzgar Subdivision, Lot #10	Ole .	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat. 33°41′16″ Long. 79°00′22″ Horizontal Datum: NAD 1927 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 1A A8. For a building with a crawlspace or enclosure(s): A9. For a building with an attachment of the properties of the certificate is being used to obtain flood insurance.	23-17 /	
a) Square footage of crawlspace or enclosure(s) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade C) Total net area of flood openings in A8.b Na sq in C) Total net area of flood openings? HA sq in C) Total net area of flood openings? G) Engineered flood openings? HA sq in C) Total net area of flood openings? C) Engineered flood openings	ached garage 400 sq ft t flood openings in the attached garage adjacent grade NA l openings in A9.b NA sq in nings?	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION		
B1. NFIP Community Name & Community Number Horry County 450104 B2. County Name Horry County	B3. State SC	
B4. Map/Panel Number 45051C0660 B5. Suffix B6. FIRM Index Date 09/17/2003 B7. FIRM Panel Effective/Revised Date 08/23/1999 B8. Flood Zone(s) AE	B9 Base Flood Elevation(s) (Zone AO, use base flood depth)	
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: Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source: Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes Nother No		
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: 8DE		
Chec	k the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG)	☑ feet ☐ meters ☐ feet ☐ meters ☐ feet ☐ meters ☑ feet ☐ meters ☑ feet ☐ meters	
g) Highest adjacent (finished) grade next to building (HAG)	⊠ feet ☐ 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. Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by Check here if attachments.		
Certifier's Name Nathanie J. Pettit License Number SC 28153		
Certifier's Name Nathanie J. Pettit License Number SC 28153		
Title Company Name Solan Associates, P.C. Address 212/Mair/Street, Suite 'A' City Conway State SC ZIP Code 29526		

ON CERTIFICATE, page 2 ♣AN★ In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE Jing Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number: .a Kenzgar Drive City Myrtle Beach State SC ZIP Code 29588 Company NAIC Number: SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED) Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner. Item C2.e is HVAC unit servicing the building. Date 04/17/14 Signature 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. ☐ feet ☐ meters ☐ above or ☐ below the LAG. 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 8-9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is ☐ feet ☐ meters ☐ above or ☐ below the HAG. ☐ feet ☐ meters ☐ above or ☐ below the HAG. E3. Attached garage (top of slab) is 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? Tyes 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's or Owner's Authorized Representative's Name Address City State ZIP Code Signature Date Telephone Comments Check here if attachments. SECTION G - COMMUNITY INFORMATION (OPTIONAL) e 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 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. 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.) A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO. The following information (Items G4-G10) is provided for community floodplain management purposes. 4. Permit Number G5. Date Permit Issued G6. Date Certificate Of Compliance/Occupancy Issued ☐ Substantial Improvement This permit has been issued for: Elevation of as-built lowest floor (including basement) of the building: meters Datum ___ ☐ feet BFE or (in Zone AO) depth of flooding at the building site: meters Datum ___). Community's design flood elevation: ☐ feet ☐ meters Datum _ cal Official's Name Title mmunity Name Telephone nature Date mments Check here if attachments.