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

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

125748
10-27-21
SPC 40

	SEC	TION A - PROPERT	Y INFORM	ATION		FOR INSU	RANCE COMPANY U	
A1. Building Own H and H CONST			к.			Policy Nur	nber:	
A2. Building Stre Box No. 105 EMERALD F		cluding Apt., Unit, Su	ite, and/or	Bldg. No.) o	or P.O. Route and	Company	NAIC Number:	
City LONGS		1.1.1	2	State South C	Carolina	ZIP Code 29568		
		nd Block Numbers, T 3B, PIN 304-07-01-0				etc.)		
A4. Building Use	(e.g., Resider	ntial, Non-Residential	, Addition,	Accessory,	etc.) RESIDEN	TIAL		
A5. Latitude/Long	gitude: Lat. 3	3 54' 20.87"	Long. 78	42' 14.81"	Horizont	al Datum: 🛛 NAD	1927 🗌 NAD 1983	
A6. Attach at lea	st 2 photograp	hs of the building if th	ne Certifica	te is being	used to obtain flo	od insurance.		
A7. Building Diag	ram Number	1A						
A8. For a building	g with a crawls	space or enclosure(s)	:					
a) Square for	otage of craw	space or enclosure(s	;)		NA sq ft			
b) Number o	f permanent fle	ood openings in the c	rawlspace	or enclosur	re(s) within 1.0 fo	ot above adjacent g	rade NA	
c) Total net a	area of flood o	penings in A8.b		NA sqi	n			
d) Engineer	ed flood openin	ngs? 🗌 Yes 🕅	No					
A9. For a building	with an attack	ned garage:						
	otage of attack			524+- sq f	t			
		ood openings in the a				diacont grade NA		
			indened ga			ajacent grade NA		
		penings in A9.b		NA so	d iu			
d) Engineere	d flood openir	ngs? 🗌 Yes 🕅	No					
	SI	ECTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM) IN	FORMATION		
B1. NFIP Commu		Community Number	T	B2. County			B3. State	
HORRY COUNT	Y 450104			HORRY	-		South Carolina	
4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	1.222/24 1.12	M Panel ctive/ ised Date	B8. Flood Zone(s)	B9. Base Flood (Zone AO, u	Elevation(s) se Base Flood Depth)	
15051C0415	J	9-17-2003	3-30-20	106	AE	21 -	.1 -	
B10. Indicate the	source of the	Base Flood Elevation	n (BEE) da	ta or base f	lood death enter	ed in Item B9	1.	
		Community Dete					1	
	vation datum	used for BFF in Item I	B9: 🕅 NO	GVD 1929	NAVD 1988	Other/Source	:	
B11. Indicate ele	valion ualumn		K_AL		Personal Contraction of the Cont			
						ico Protostad Arca	(OPA)? Yes 🕅 N	

ELEVATION CERTIFICATE MPORTANT: In these spaces, copy the corresponding information from Section A.					OMB No. 1660-0008 Expiration Date: November 30, 20		
the second s				-		E COMPANY USI	
uilding Street Address (05 EMERALD RUSH C	including Apt., Unit, Suite, and/or B OURT	ldg. No.) or P.O. Roul	te and Box No.	Policy	/ Number:		
ity ONGS	Comp	oany NAIC I	Number				
	SECTION C - BUILDING ELEV	ATION INFORMAT	ION (SURVEY	REQUIR	ED)		
C1. Building elevations *A new Elevation C	are based on: Construction ertificate will be required when con	Drawings* Build struction of the buildir	-	struction*	Finisl	hed Construction	
C2. Elevations – Zones Complete Items C2 Benchmark Utilized	A1–A30, AE, AH, A (with BFE), VI 2.a–h below according to the buildin 1: GPS	E, V1–V30, V (with BF g diagram specified in Vertical Datum:	n Item A7. In Pu	R/AE, AF erto Rico	VA1-A30, A only, enter	AR/AH, AR/AO. meters.	
Indicate elevation of	latum used for the elevations in iter						
and the second se	929 NAVD 1988 Other/So						
Datum used for built	lding elevations must be the same	as that used for the B	FE.	~			
a) Top of bottom f	oor lincluding becoment and less					asurement used.	
	oor (including basement, crawlspace	ce, or enclosure floor)		26.2	feet		
b) Top of the next				NA	☐ feet		
	west horizontal structural member	V Zones only)		NA	∐ feet	meters	
d) Attached garag				25.8	X feet	meters	
 e) Lowest elevation (Describe type) 	n of machinery or equipment servic of equipment and location in Comm	ing the building ents)		25.6	🔀 feet	meters	
f) Lowest adjacent (finished) grade next to building (LAG)				25.2	K feet	meters	
	nt (finished) grade next to building (t grade at lowest elevation of deck			25.5	feet [meters	
structural suppo		or stars, molduling		25.2	🔀 feet	meters	
	SECTION D - SURVEYOR, E	NGINEER, OR ARC	HITECT CERT	IFICATIO	N		
certify that the informa	e signed and sealed by a land surve tion on this Certificate represents n hable by fine or imprisonment under	v best efforts to intern	pret the data ava	by law to ailable. I u	certify elev nderstand t	ation information. that any false	
Were latitude and longit	ude in Section A provided by a lice	nsed land surveyor?	Yes No		Check her	e if attachments.	
Certifier's Name		License Number			-		
JAN K. DALE		L-12236				CARO	
Title PROFESSIONAL LANI	SUBVEVOD				SA	ESSIO	
Company Name	SORVETOR			_ //	SA	NE Z	
company Name					MI-	12236	
Address	· · · · · · · · · · · · · · · · · · ·			-1		12250 2	
891 COPAS ROAD					EL	29	
City SHALLOTTE		State North Carolina	ZIP Code 28470		AN	K. DAL	
Signature	Del	Date 10-18-2021	Telephone 910 754 4477	Ext.			
Copy appages of this Ele	vation Certificate and all attachment	s for (1) community off	icial, (2) insuranc	ce agent/c	ompany, an	d (3) building owne	
	be of equipment and location, per C	2(e), if applicable)					
Comments (including ty		*					
Comments (including ty							
Comments (including ty							
Comments (including ty							

ACCUMAL.

τ			OMB No. 1	12574 10-27-2 5Pc 44		
ELEVATION CERTIFICA		and the state of the	Expiration [Expiration Date: November 30, 2022		
the second se	copy the corresponding informati			RANCE COMPANY USE		
Building Street Address (includin 105 EMERALD RUSH COURT	ng Apt., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Bo	No. Policy Nur	nber:		
City	State	ZIP Code	Company	NAIC Number		
LONGS	South Carolin	a 29568				
SECTIO	ON E – BUILDING ELEVATION IN FOR ZONE AO AND ZO	FORMATION (SURV ONE A (WITHOUT BE	EY NOT REQUIRED))		
For Zones AO and A (without BF complete Sections A, B, and C. F enter meters.	E), complete Items E1–E5. If the Ce for Items E1–E4, use natural grade, i	rtificate is intended to a favailable. Check the	support a LOMA or Lomasurement used.	OMR-F request, n Puerto Rico only,		
 Provide elevation informatio the highest adjacent grade a) Top of bottom floor (inclu 	n for the following and check the app (HAG) and the lowest adjacent grade uding basement,	propriate boxes to show (LAG).	whether the elevation	on is above or below		
crawlspace, or enclosure	e) is	feet	meters abov	e or below the HAG.		
b) Top of bottom floor (inclu crawlspace, or enclosure)		[] feet	meters abov	e or below the LAG.		
		_		-		
the next higher floor (elevat		ded in Section A Items	8 and/or 9 (see page	s 1-2 of Instructions),		
the diagrams) of the building	g is	feet	meters abov	e or below the HAG.		
3. Attached garage (top of slat	o) is	feet	meters abov	e or below the HAG.		
 Top of platform of machiner servicing the building is 	y and/or equipment	□ feet	meters abov	e or below the HAG.		
SECTION	inance? Yes No Un IF – PROPERTY OWNER (OR OW authorized representative who comple AO must sign here. The statements norized Representative's Name	NER'S REPRESENTA	TIVE) CERTIFICATIO	ON ut a FEMA-issued or		
Address		City	State	ZIP Code		
Signature		Date	Telephone			
Signature -		Date	relephone			
Comments						
			-			
			X Ch	eck here if attachments.		

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x		0MB No. 1660-0008
ELEVATION CERTIFICA	ATE	Expiration Date: November 30, 2022
and the second se	copy the corresponding information from Section	
Building Street Address (includin 105 EMERALD RUSH COURT	g Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route a	and Box No. Policy Number:
City LONGS	State ZIP Coo South Carolina 29568	de Company NAIC Number
	SECTION G - COMMUNITY INFORMATION	I (OPTIONAL)
The local official who is authorize Sections A, B, C (or E), and G of used in Items G8–G10. In Puerto	ed by law or ordinance to administer the community' f this Elevation Certificate. Complete the applicable i o Rico only, enter meters.	s floodplain management ordinance can complete item(s) and sign below. Check the measurement
G1. The information in Sec engineer, or architect v data in the Comments	tion C was taken from other documentation that has who is authorized by law to certify elevation informati area below.)	been signed and sealed by a licensed surveyor, ion. (Indicate the source and date of the elevation
G2. A community official co or Zone AO.	ompleted Section E for a building located in Zone A	(without a FEMA-issued or community-issued BFE)
G3. The following informati	ion (Items G4–G10) is provided for community flood	plain management purposes.
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
G8. Elevation of as-built lowest of the building:G9. BFE or (in Zone AO) depthG10. Community's design flood elements	of flooding at the building site:	feet inters Datum feet inters Datum feet inters Datum feet inters Datum feet inters Datum
Local Official's Name	Title	
Community Name	Telephone	
Signature	Date	
Comments (including type of equ	ipment and location, per C2(e), if applicable)	
		Check here if attachments.

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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IMPORTANT: In these spaces	FOR INSURANCE COMPANY US		
Building Street Address (includ 105 EMERALD RUSH COURT	Policy Number:		
City	State	ZIP Code	Company NAIC Number
LONGS	South Carolina	29568	

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 FRONT VIEW 10-18-21

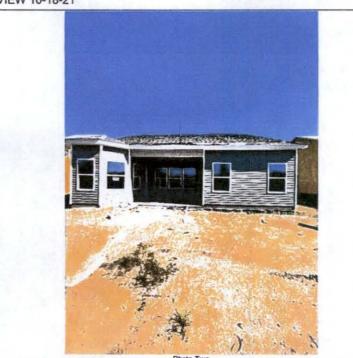


Photo Two Caption **REAR VIEW 10-18-21**

FEMA Form 086-0-33 (12/19)

Replaces all previous editions.

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

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IMPORTANT: In these spaces	FOR INSURANCE COMPANY US		
Building Street Address (includ 105 EMERALD RUSH COUR	Policy Number:		
City	State	ZIP Code	Company NAIC Number
LONGS	South Carolina	29568	

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.

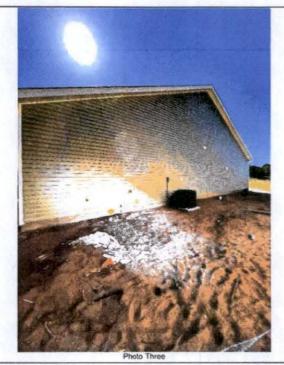


Photo Three Caption RIGHT VIEW 10-18-21

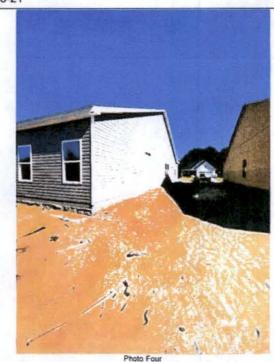


Photo Four Caption LEFT VIEW 10-18-21

FEMA Form 086-0-33 (12/19)

Replaces all previous editions.