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	RANCE COMPANY USE	
A1. Building Owner's Name J&S ENTERPRISES LLC Policy Number:						ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 16015 PEE DEE HWY S						Company N	IAIC Number:
City State GALIVANTS FERRY South Carolina						ZIP Code 29544	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TMS #197-10-03-0020							
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL							
A5. Latitude/Longitude: Lat. 34-02-29N Long. 79-15-30W Horizontal Datum: NAD 1927 X NAD 1983							
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being ι	used to obtain floo	od insurance.	
A7. Building Diagra	am Number	5					
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 permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A							
c) Total net area of flood openings in A8.b N/A sq in							
d) Engineered flood openings?							
A9. For a building with an attached garage:							
a) Square footage of attached garageN/A sq ft							
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A							
c) Total net area of flood openings in A9.b N/A sq in							
d) Engineered flood openings?							
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Community Name & Community Number HORRY COUNTY 450104 B2. County Name HORRY COUNTY B3. State South Carolina							
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/ Revised Date B8. Flood Zone(s) B9. Base Flood Elevation(s) (Zone AO, use Base Flood December 1)			Elevation(s) e Base Flood Depth)	
45051C0170	К	12-16-2021	12-16-2		AE	37	
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 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 DPA							

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IMPORTANT: In these spaces, copy the corresponding information from Sec	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Rou 16015 PEE DEE HWY S	Policy Number:				
City State ZIP of GALIVANTS FERRY South Carolina 2954	Code I4	Company NAIC Number			
SECTION C – BUILDING ELEVATION INFORMAT	ION (SURVEY RE	EQUIRED)			
*A new Elevation Certificate will be required when construction of the buildin C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BF	E), 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: VRS GPS Vertical Datum: NAVD 1988					
Indicate elevation datum used for the elevations in items a) through h) below.					
☐ NGVD 1929 区 NAVD 1988 ☐ Other/Source:					
Datum used for building elevations must be the same as that used for the B	FE.				
a) Tag of bottom floor (including books and around a considerate and around floor)		Check the measurement used. 40.0 ⋉ feet			
· · · · · · · · · · · · · · · · · · ·	a) Top of bottom hoof (moldaling bacomont, oramopaco, of cholocal o hoof)				
b) Top of the next higher floor	N/A ☐ feet ☐ meters N/A ☐ feet ☐ meters				
,	c) bettern of the lewest her best district of the lewest her b				
d) Attached garage (top of slab)		N/A feet meters			
 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 		40.0 × feet meters			
f) Lowest adjacent (finished) grade next to building (LAG)		35.2 × feet meters			
g) Highest adjacent (finished) grade next to building (HAG)		35.6 × feet meters			
 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 		35.2 × feet meters			
SECTION D – SURVEYOR, ENGINEER, OR ARC	HITECT CERTIFI	CATION			
This certification is to be signed and sealed by a land surveyor, engineer, or arcl I certify that the information on this Certificate represents my best efforts to interstatement may be punishable by fine or imprisonment under 18 U.S. Code, Section 19 U.S. Code,	oret the data availa	law to certify elevation information. ble. I understand that any false			
Were latitude and longitude in Section A provided by a licensed land surveyor?	⊠Yes □ No	☐ Check here if attachments.			
Certifier's Name License Number EVERRETT JOHNSON II 30766		HIMININI CAROL NAME OF THE PARTY OF THE PART			
Title PLS/OWNER		GO STAL LAND V			
Company Name J & W PROFESSIONAL LAND SURVEYORS, LL		No. 30766			
Address 3370 TRULUCK JOHNSON ROAD		Z. 1. 00			
City State AYNOR South Carolina	ZIP Code 29511	T. T. JOHNSON			
Signature Date 05-25-2023	Telephone (843) 241-3800	Ext.			
Copy all pages of this Elevation Certificate and all attachments for (1) community of	ficia l , (2) insurance a	agent/company, and (3) building owner.			
Comments (including type of equipment and location, per C2(e), if applicable) THE AC UNIT IS THE LOWEST MACHINERY ACCESSING THE BUILDING. IT	S ON A RAISED	PLATFORM OUTSIDE THE HOUSE.			

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Building Street Address (including Ap 16015 PEE DEE HWY S	Policy Number:		
City GALIVANTS FERRY	State South Carolina	ZIP Code 29544	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

Photo One Caption Clear Photo One



Photo Two

Photo Two Caption Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt 16015 PEE DEE HWY S	Policy Number:		
City	State	ZIP Code	Company NAIC Number
GALIVANTS FERRY	South Carolina	29544	

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 Clear Photo Three



Photo Four

Photo Four Caption Clear Photo Four