U.S. DEPARTMENT 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

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Expiration	Date: July 31,	2015

SECTION A – PROPERTY INFORMATION	FOR INSURANCE COMPANY USE		
AT. Building Owner's Name Bridges Custom Homes	Policy Number:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 137 Bridgeway Drive	Company NAIC Number:		
City Little River State SC ZIP Code 29566			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 9 Bridgewater Park tax map: 130-39-01-009	37		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A5. Latitude/Longitude: Lat. N33d 51' 10.18" Long. W078d 39' 42.6" Horizontal Datum: A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 1b	Residence NAD 1927 NAD 1983		
A6. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) N/A sq ft a) Square footage of attact	thed garage 435 sq ft flood openings in the attached garage djacent grade 0 sq in A9.b 0 sq in		
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	N		
1. NFIP Community Name & Community Number B2: County Name horry county 450104 Horry	e3. State SC		
### A Map/Panel Number ### A S. Suffix ### B8. Flood ### B9. Flood ### Zone(s) ### AE	Base Flood Elevation(s) (Zone AO, use base flood depth)		
FIS Profile FIRM Community Determined Other/Source: Other/Source: Other/Source: NAVD 1988 Other/Source: State building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Oesignation Date: OPA	□□□□□□ □ Yes ⊠ No		
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUI	RED)		
8uilding elevations are based on: Construction Drawings* Building Under Construction* *A new Elevation Certificate will be required when construction of the building is complete. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR, below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: Monument Ward Vertical Datum: NGVD29 Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 NAVD 1988 Datum used for building elevations must be the same as that used for the BFE.			
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 13.7	⊠ feet ☐ meters		
b) Top of the next higher floor N/A.	feet meters		
c) Bottom of the lowest horizontal structural member (V Zones only) N/A	feet meters		
d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	☐ feet ☐ meters ☐ meters		
f) Lowest adjacent (finished) grade next to building (LAG) 12.8	⊠ feet ☐ meters		
g) Highest adjacent (finished) grade next to building (HAG) 13.0	⊠ feet ☐ meters		
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 13.3	⊠ feet ☐ meters		
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION	on O		
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 a			
☐ Check here if attachments. licensed land surveyor? ☐ Yes ☐ No			
Certifier's Name Larry T. Beasley License Number scpls 9544			
Title Land Surveyor Company Name Beasley Land Surveying, Inc.			
Address P. O Box 30784 Myrtte Beach State SC ZiP Code 29588			
Signature			

IMPORTABLE in these spaces, c	opy the corresponding in	formation fro	m Section A.		FOR INSURANCE	COMPANY USE
Building Street Address (Including Apt. 137 Bridgeway Drive	, Unit, Suite, and/or Bldg. No.)	or P.O. Route a	nd Box No.		Policy Number:	
City Little River		State SC	ZIP Code 295	66	Company NAIC, Nu	mber 1977
SECTION	D - SURVEYOR, ENGINE	ER, OR ARCI	HITECT CERTI	FICATION (C	ONTINUEDI OV.	ر ار حدود قود
Copy both sides of this Elevation Certific	ate for (1) community official, (2	2) insurance ag	ent/company, and	d (3) building ev	vner.	
Comments This Certificate may not be in This is an final construction certificate.			ed.			ISLETE TO SET TO
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11			•			
Signature Mul	2619X	Date	Feb. 11, 2014			
SECTION E - BUILDING ELEV	ATION INFORMATION (S	URVEY NOT	REQUIRED) F	OR ZONE AC	AND ZONE A (W	ITHOUT BFE)
For Zones AO and A (without BFE), con and C. For Items E1-E4, use natural gra						Sections A, B,
E1. Provide elevation information for the (HAG) and the lowest adjacent gra	he following and check the appr			-		iighest adjacent grad
a) Top of bottom floor (including ba	• •	sure) is <u>adda:</u>			s \square above or \square be	
b) Top of bottom floor (including ba					s above or b	
E2. For Building Diagrams 6–9 with pe (elevation C2.b in the diagrams) o						next higher floor
E3. Attached garage (top of slab) is			above or Dele		W METING.	
E4. Top of platform of machinery and/					above or Delow	the HAG.
E5. Zone AO only: If no flood depth no						
ordinance? 🗌 Yes 🔲 No 🗀	Unknown. The local official mu	ist certify this in	ormation in Sect	ion G.		
SECTION	F - PROPERTY OWNER (OR OWNER'	S REPRESENT	TATIVE) CER	TIFICATION	
The property owner or owner's authorize Zone AO must sign here. The statement	s in Sections A, B, and E are c	orrect to the bes	•	•	MA-issued or commi	unity-issued BFE) or
Property Owner's or Owner's Authorized	Representative's Name []			· 		
Address 0000		City EE		State 1		:C00C
Signature DDDDD**		Date C	0060 	Telepho	one GGGC3	
Comments CDC30						
					Check	k here if attachments
	SECTION G - COMM	MUNITY INEO	PMATION (OF	TIONAL	Cricci	<u>Vinere ii attacianients</u>
The local official who is authorized by law	or ordinance to administer the o	community's floo	dplain managem	ent ordinance ca	an complete Sections	A. B. C (or E), and C
of this Elevation Certificate. Complete the	applicable item(s) and sign belo	ow. Check the m	ieasurement used	d in Items G8–G	10. In Puerto Rico on	ly, enter meters.
is authorized by law to certify	was taken from other document elevation information. (Indicate	the source and	date of the eleva	ation data in the	Comments area bel	ow.)
	d Section E for a building locate				nity-issued BFE) or 2	Zone AO.
G3. The following information (Iten	ns G4-G10) is provided for con	nmunity floodpla	in management	purposes.		
G4. Permit Number	G5. Date Permit Issued		G6. Date C	ertificate Of Co	mpliance/Occupancy	/ Issued
G7. This permit has been issued for:	☐ New Construction	Substantial	Improvement			
G8. Elevation of as-built lowest floor (in	icluding basement) of the buildi	ing: <u>26665</u> 5	<u> </u>	☐ feet	meters	Datum <u>DDDD</u>
39. BFE or (in Zone AO) depth of flood	ling at the building site:	<u> </u>	IDDOI D feel	: \square meters	Datum <u>DDCID</u>	
310. Community's design flood elevation	n:	<u>00000.1</u>	<u>) Diju</u> ju 🔲 feel	_ ∷	Datum <u>EJUDE</u>	
Local Official's Name CODCO		-	Title agayı		· · · · · · · · · · · · · · · · · · ·	
Community Name 30800			Telephone DGD	 DC		
Signature OCOCO			Date 10000	-		
Comments DEDDD						
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		<u> </u>			<u>Checl</u>	k here if attachments