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

ELEVATION CERTIFICATE

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 8-15

OMB Control Number: 1660-0008 Expiration: 11/30/2018 (3) building owner

SECTION A - PROPERTY INFORMATION			
Ad Dudding Councils Name	FOR INSURANCE COMPANY USE		
A1. Building Owner's Name Robert Dale Treathan Policy Number			
 Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 	Company NAIC Number:		
1950 Highway 348	113.13		
City Loris State SC			569
 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc. Tract 2, PIN # 224-15-02-0001 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential)		
A5. Latitude/Longitude: Lat. N33°58'38.1" Long. W78°48'42.9" Horizontal Datum:	O 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 1 B			
	ng with an attache	ed garage:	
a) Square footage of crawlspace or enclosure(s) N/A sq ft a) Square footage	ge of attached ga	rage 1032	sq f
	ermanent flood op ed garage within 1 ent grade		
c) Total net area of flood openings in A8.b N/A sq in c) Total net area	a of flood opening	s in A9.b N/A	sq i
d) Engineered flood openings? C Yes (No d) Engineered flood	lood openings?	C Yes (No
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) IN	The second secon		
B1. NFIP Community Name & Community Number B2. County Name	- Crain-trott	В	3. State
Horry County 450104 Horry County		S	C
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date B8.	Flood Zone(s)	B9. Base Floor (Zone AO, depth	d Elevation(s) use base flood
45051C0380 H H Sept. 17, 2003 Aug. 23, 1999	A	٨	I/A
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in FIS Profile FIRM Community Determined Other/Source: B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 COB12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Designation Date: CBRS OPA	Other/Source:	DPA)? (Yes	s © No
SECTION C - BUILDING ELEVATION INFORMATION (SURV	/EY REQUIRED)		
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, AF	truction*	Finished Const	
C1. Building elevations are based on: Construction Drawings* Building Under Const 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, AF (tems C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only Benchmark Utilized: SC VRS Network Vertical Datum:	truction* (• R/AE, AR/A1-A30, enter meters.		
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C1. Building elevations are based on: Construction Drawings* Building Under Const 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, AF (tems C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only Benchmark Utilized: SC VRS Network Vertical Datum:	R/AE, AR/A1-A30, enter meters. NAVD 1988	AR/AH, AR/A	O. Complete
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C1. Building elevations are based on: Construction Drawings* Building Under Const 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, AF (Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only Benchmark Utilized: SC VRS Network Vertical Datum: Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 COther/Source: 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) b) Top of the next higher floor C) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) 38. (Describe type of equipment and location in Comments)	truction* (•) R/AE, AR/A1-A30, enter meters. (•) NAVD 1988 64 A A 81 43	Check the mea • feet • feet • feet • feet	O. Complete assurement used meters meters meters meters meters
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ELEVATION CERTIFICATE, page 2

OMB Control Number: 1660-0008 Expiration: 11/30/2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.			LONIN	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.					
1950 Highway 348			Policy Nun	nber:	
ty State Zip Code rts SC 29569		Company Number:	Company NAIC		
ALC: 100	D - SURVEYOR, ENGINEE	R. OR ARCHITECT CER	The second secon		
This certification is to be signed and sealed that the information on this Certificate representation by fine or imprisonment under 1.	sents my best efforts to inte	rpret the data available. I			
Check here if attachments.	€ Yes C No	Programme Autocommon (M.) Agrando			
Certifier's Name Fimothy L. Davis, PLS	Lice	ense Number 27445		I PLACE ()	
Title	Company Name			SEAL HERE	
Prof. Land Surveyor Address	City	State Zip Code		10	
4618 Main Street	Loris	SC 29569		1	
Signature	Date AUGUST 20, 2019	Telephone 843-756-2029	_	γ	
Copy all pages of this Elevation Certificate f	for (1) community official, (2	insurance agent/compar	y, and (3) build	ing owner.	
Comments (including type of equipment and	d location, per C2(e), if appl	icable)			
/					
A p	INFORMATION (SURVIEW	NOT REQUIRED) FOR 2	ONE AO AND	Date ZONE A (WITHOUT REE)	
SECTION E - BUILDING ELEVATION For Zones AO and A (without BFE), comple	te Items E1-E5. If the Certif	cate is intended to suppo	rt a LOMA or LO	ZONE A (WITHOUT BFE) DMR-F request, complete	
SECTION E - BUILDING ELEVATION For Zones AO and A (without BFE), comple Sections A, B, and C. For Items E1-E4, use	te Items E1-E5. If the Certific natural grade, if available. lowing and check the appro	cate is intended to suppo Check the measurement opiate boxes to show whe	rt a LOMA or Louised. In Puerto	DMR-F request, complete Rico only, enter meters.	
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ELEVATION CERTIFICATE, page 3

OMB Control Number: 1660-0008 Expiration: 11/30/2018

IMPORTANT: In these spaces, copy the corr	esponding information	n 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. 1950 Highway 348			Policy Number:	
City Loris	State sc	Zip Code 29569	Company NAIC Number:	
SECT	ION G - COMMUNITY	INFORMATION (OPTION	Del Adaption and the Control of the	
he local official who is authorized by law or ord rections A, B, C (or E), and G of this Elevation (ems G8-G10. In Puerto Rico only, enter meters	inance to administer the Certificate. Complete the s.	e community's floodplain me applicable item(s) and sign	anagement ordinance can complete	
or architect who is authorized by law to Comments area below.)	certify elevation inform	nation. (Indicate the source	and date of the elevation data in the	
or Zone AO.	2147 - 147 - 144			
33. The following information (Items G4-G	765 2552			
G4. Permit Number	G5. Date Permit Issu	ed G6. Date Certi	ficate of Compliance/Occupancy Issued	
37. This permit has been issued for: New C	onstruction C Substa	antial Improvement		
G8. Elevation of as-built lowest floor (including lof the building:	basement)	C feet C me	ers Datum	
 BFE or (in Zone AO) depth of flooding at the building site: 	e		ers Datum	
G10. Community's design flood elevation:		Cfeet C me	ers Datum	
Local Official's Name		Title		
Community Name		Telephone		
Signature		Date		
			☐ Check here if attachme	

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE, page 4

See instructions for Item A6.

OMB Control Number: 1660-0008 Expiration: 11/30/2018

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. 1950 Highway 348			Policy Number:	
City Loris	State sc	Zip Code 29569	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.





