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

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54520 6-16-16 OK 57

ELEVATION CERTIFICATE

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

Copy all pages of this Elevation Certificate and all attachments for (1) of		surance agent/company	y, and (3) building owner.	
SECTION A - PROPERTY INFORMATIO	FOR INSU	FOR INSURANCE COMPANY USE		
A1. Building Owner's Name DAWOL HOMES		Policy Number:		
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg Box No. 108 TERRACINA CIRCLE 	. No.) or P.O. Route an	d Company NAIC Number:		
City MYRTLE BEACH	State SC		Zip Code 29588	
A3. Property Description (Lot and Block Numbers, Tax Parcel Num THE GATES UNIT 15, PHASE 7	ber, Legal Description,	etc.)		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Acce	ssory, etc.) RESIDENTI	AL		
A5. Latitude/Longitude: Lat. N-33-37-45 Long. W-79-01-3	4 Horizontal Datum:	(NAD 1927	● NAD 1983	
A6. Attach at least 2 photographs of the building if the Certificate is	being used to obtain flo		1.27	
A7. Building Diagram Number 1A			FUFIL	
A8. For a building with a crawlspace or enclosure(s):	A9. For a bu	uilding with an attache	d garage:	
a) Square footage of crawlspace or enclosure(s) 0	sq ft a) Square fo	otage of attached gar	age N/A sq ft	
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	b) Number o in the atta	of permanent flood open inched garage within 1. iacent grade	enings	
c) Total net area of flood openings in A8.b 0	sq in c) Total net a	area of flood openings	in A9.b N/A sq in	
d) Engineered flood openings? (Yes (No /	d) Engineere	ed flood openings?	(Yes (No	
SECTION B - FLOOD INSURAN		INFORMATION	·····	
	32. County Name		B3. State	
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. F		38. Flood Zone(s) E	39. Base Flood Elevation(s) (Zone AO, use base flood depth	
450104-0670 H 09/17/2003	12/03/2004*	AE*	23*	
B10. Indicate the source of the Base Flood Elevation (BFE) data or t		d in Item B9: 423P, 12/03/2004	<u>1</u>	
B11. Indicate elevation datum used for BFE in Item B9: (NGVD 1	/		/	
·				
B12. Is the building located in a Coastal Barrier Resources System (Designation Date: N/A CBRS OPA	CBKS) area or Otherwi	se Protected Area (O)	PA)? (Yes le No	
SECTION C - BUILDING ELEVATIO	ON INFORMATION (SU	IRVEY REQUIRED)	/	
C1. Building elevations are based on: C Construction Drawings* A new Elevation Certificate will be required when construction of the	C Building Under Co building is complete.	onstruction*	in shed Construction	
C2. Elevations: Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V Items C2.a-h below according to the building diagram specified in Ite	(with BFE), AR, AR/A,	AR/AE, AR/A1-A30, / nly, enter meters.	AR/AH, AR/AO. Complete	
Benchmark Utilized: RTK GPS VIA SC VRN NETWORK	Vertical Datum: N	IGVD 1929 ADJUSTED	FROM NAVD 1988)	
Indicate elevation datum used for the elevations in items a) through l	h) below. 🔎 NGVD 19	29 C NAVD 1988		
○ Other/Source: N/A				
Datum used for building elevations must be the same as that used for	or the BFE.		heck the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosur	e floor)2	26_1	(● feet	
b) Top of the next higher floor		6.4	(● feet	
 Bottom of the lowest horizontal structural member (V Zones only) Attached access (see sfells) 	AN/A	EWEID)	() feet () meters	
 Attached garage (top of slab) Attached garage (top of slab) 		. FUT	⊂ feet ⊂ meters	
 Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 		8.5	(feet meters	
f) Lowest adjacent (finished) grade next to building (LAG)	2	4.9	● feet (meters)	
g) Highest adjacent (finished) grade next to building (HAG)		5.6		
 h) Lowest adjacent grade at lowest elevation of deck or stairs, includ structural support 		.4.9	● feet	

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IMPORTANT: In these spaces, copy the	corresponding inform;	tion from Section A.	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Un	nit, Suite, and/or Bldg. No	b.) or P.O. Route and Box No.		
108 TERRACINA CIRCLE			Policy Number:	
City MYRTLE BEACH	State State	Zip Code 29588	Company NAIC Number:	
SECTION	D - SURVEYOR, ENGI	NEER, OR ARCHITECT CER		
This certification is to be signed and sealed	by a land surveyor, engineers by a land surveyor, engineers by best efforts to a 8 U.S. Code, Section 10	neer, or architect authorized b interpret the data available. I u	y law to certify elevation information. I certify nderstand that any false statement may be	
Check here if attachments.		nsed land surveyor?	12 37 3 3	
Certifier's Name F. WILLIAM FAIREY, IV	\checkmark	icense Number SC 27446	VIII WAVES	
Title PROFESSIONAL LAND SURVEYOR	Company Name	IPANY		
Address 607 MAIN STREET	City CONWAY	State Zip Code SC 29526		
Signature	Date 06/09/2016	Telephone 843-340-0285	A Contraction of the second	
Copy all pages of this Elevation Certificate		(2) have a set of the		
Signature F. U.W. Fre TF			Date 06/09/2016	
			ONE AO AND ZONE A (WITHOUT BFE)	
For Zones AO and A (without BFE), comple Sections A. B, and C. For Items E1-E4, use	natural grade, if availabl	e. Check the measurement us	ed. In Puerto Rico only, enter meters.	
E1. Provide elevation information for the foll highest adjacent grade (HAG) and the lo	lowing and check the app owest adjacent grade (L4	propriate boxes to show wheth \G).	er the elevation is above or below the	
a) Top of bottom floor (including basem or enclosure) is	ent, crawlspace,	(feet (m	eters 🔲 above or 📋 below the HAG.	
 b) Top of bottom floor (including basem or enclosure) is 	ent, crawlspace,	(feet (m	eters 🔲 above or 🔛 below the LAG.	
E2. For Building Diagrams 6-9 with permane higher floor (elevation C2.b in the diagrams)	ent flood openings provid) of the building is	led in Section A Items 8 and/o		
E3. Attached garage (top of slab) is		(`feet (`m	eters 🔄 above or 🔄 below the HAG.	
E4. Top of platform of machinery and /or eq servicing the building is		(feet (`m		
E5. Zone AO only: If no flood depth number management ordinance? Yes No	is available, is the top of C Unknown. The loca	the bottom floor elevated in a I official must certify this inform	ccordance with the community's floodplain nation in Section G.	
SECTION F - PRO	OPERTY OWNER (OR O	WNER'S REPRESENTATIVE	CERTIFICATION	
The property owner or owner's authorized r community-issued BFE) or Zone AO must s	representative who comp sign here. The statement	letes Sections A, B, and E for s in Sections A, B, and E are c	Zone A (without a FEMA-issued or correct to the best of my knowledge.	
Property Owner or Owner's Authorized Re				
Address	City	State	ZIP Code	
Signature	Date	Telephone		
Comments				
			Check here if attachments.	

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BUILDING PHOTOGRAPHS See instructions for Item A6.

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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURAN	FOR INSURANCE COMPANY USE	
Building Street Address (including A 108 TERRACINA CIRCLE	ot., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:		
City MYRTLE BEACH	State SC	Zip Code 29588	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.



FRONT VIEW



REAR VIEW



SIDE VIEW

FEMA Form 086-0-33 (7/15)