

Permit # 29658
It's OK 3/10/2015

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

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008
Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

| | | |
|--|--------------------|--|
| 1. Building Owner's Name M&W INDUSTRIES | | Policy Number: |
| 2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4254 MYNATT COURT | | Company NAIC Number: |
| City SURFSIDE BEACH | State SC | ZIP Code 29588 |
| 3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TM 190-32-02-020 LOT 20 THE ESTATES AT THE GATES | | |
| 4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL | | |
| 5. Latitude/Longitude: Lat. 33°37'18" Long. 79°01'43" Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983 | | |
| 6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. | | |
| 7. Building Diagram Number 1A | | |
| 8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) NA sq ft b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade NA c) Total net area of flood openings in A8.b NA sq in d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | 9. For a building with an attached garage: a) Square footage of attached garage 500 sq ft b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade NA c) Total net area of flood openings in A9.b NA sq in d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

| | | | | | |
|--|-----------------------|---|---|-------------------------------|---|
| 1. NFIP Community Name & Community Number HORRY 450104 | | 2. County Name HORRY | | 3. State SC | |
| 4. Map/Panel Number 45051C0731 | 5. Suffix H | 6. FIRM Index Date 09/17/2003 | 7. FIRM Panel Effective/Revised Date 12/03/2004 | 8. Flood Zone(s) AE | 9. Base Flood Elevation(s) (Zone AO, use base flood depth) 23 |
| 10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item 9: <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input checked="" type="checkbox"/> Other/Source: LOMR 04-04-203P | | | | | |
| 11. Indicate elevation datum used for BFE in Item 9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ | | | | | |
| 12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ / _____ / _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA | | | | | |

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

| | | |
|---|---------------------|--|
| 1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. | | |
| 2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), 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: SCVRS Vertical Datum: 1929 Indicate elevation datum used for the elevations in items a) through h) below. <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE. | | |
| Check the measurement used. | | |
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) | 24 20 | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| b) Top of the next higher floor | N/A | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | N/A | <input type="checkbox"/> feet <input type="checkbox"/> meters |
| d) Attached garage (top of slab) | 23 70 | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) | 23 8 | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | 23 5 | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | 23 6 | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support | N/A | <input type="checkbox"/> feet <input type="checkbox"/> meters |

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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 licensed land surveyor? ☒ Yes ☐ No
☐ Check here if attachments.

| | | | |
|--|--|---|------------------------------------|
| Certifier's Name JAMES B. GODFREY, III | | License Number 6944 | |
| Title PRESIDENT | | Company Name JONES/GODFREY & ASSOCIATES, INC. | |
| Address PO BOX 6891 | | City FLORENCE | State SC |
| Signature <i>James B. Godfrey III</i> | | Date 04/01/2014 | Telephone (843) 229-8159 |

James B. Godfrey III