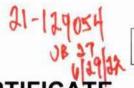
## U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program



OMB No. 1660-0008 Expiration Date: November 30, 2022

# **ELEVATION CERTIFICAT**

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						RANCE COMPANY USE		
A1. Building Owner's Name MAGGIE & DAVID WILLIAMSO	Policy Num	ber:						
<ol> <li>Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.</li> <li>3458 WILDERNESS LANE</li> </ol>						IAIC Number:		
City MURRELLS INLET			State South Ca	arolina	ZIP Code 29576			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) WILDERNESS PLANTATION LOT 6B TMS: 193-00-01-018								
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL								
A5. Latitude/Longitude: Lat. 33° 34' 38" Long. 79° 05' 14" Horizontal Datum: NAD 1927 X 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 1A								
A8. For a building with a crawlspace or enclosure(s):								
Square footage of crawlspace 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?  Yes  No								
A9. For a building with an attached garage:								
a) Square footage of attached garage N/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? ☐ Yes ☒ No								
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Community Name & Community Number HORRY COUNTY 450104			B2. County Name HORRY			B3. State South Carolina		
	Table Control VV	Territoria			T	ACCUSATION OF THE PROPERTY OF		
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	Effe	M Panel ective/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	e Base Flood Depth)		
45051C0 779 K	12-16-2021	12-16-2	vised Date 2021	AE	10			
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 OPA								
		2 101		414		F D 1 - 60		

#### **ELEVATION CERTIFICATE**

71-129054 18 27 pt

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the correspo	Section A.	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, a 3458 WILDERNESS LANE	Policy Number:		
City MURRELLS INLET		P Code 9576	Company NAIC Number
SECTION C - BUILDIN	G ELEVATION INFORM	ATION (SURVEY R	EQUIRED)
C1. Building elevations are based on: Cons *A new Elevation Certificate will be required w  C2. Elevations – Zones A1–A30, AE, AH, A (with B Complete Items C2.a–h below according to the Benchmark Utilized: RTK GPS VIA SC RTN  Indicate elevation datum used for the elevation  NGVD 1929 NAVD 1988	hen construction of the bui BFE), VE, V1–V30, V (with e building diagram specifie Vertical Datu ns in items a) through h) be	BFE), AR, AR/A, AR d in Item A7. In Puer m: NAVD 1988	/AE, AR/A1–A30, AR/AH, AR/AO.
Datum used for building elevations must be the	The state of the s	BFE.	0
a) Top of bottom floor (including basement, cr     b) Top of the next higher floor		or)	Check the measurement used.  15.6
c) Bottom of the lowest horizontal structural m	nember (V Zones only)	-	N/A feet meters  N/A feet meters
d) Attached garage (top of slab)     e) Lowest elevation of machinery or equipmen (Describe type of equipment and location in	N/A  feet  meters		
f) Lowest adjacent (finished) grade next to bu			14.0 🗵 feet 🗌 meters
g) Highest adjacent (finished) grade next to be	uilding (HAG)		15.2 X feet meters
<ul> <li>h) Lowest adjacent grade at lowest elevation structural support</li> </ul>	of deck or stairs, including	2	N/A ⊠ feet ☐ meters
SECTION D - SURVE	YOR, ENGINEER, OR A	RCHITECT CERTIF	ICATION
This certification is to be signed and sealed by a lat I certify that the information on this Certificate representatement may be punishable by fine or imprisonment. Were latitude and longitude in Section A provided by	esents my best efforts to in ent under 18 U.S. Code, S	ternret the data avails	able Lunderstand that any false
Certifier's Name	License Number	Zana Vinosa in in in incide	,ullimmilli,
F. WILLIAM FAIREY, IV	SC PLS #27446		THIRD
Title LICENSED LAND SURVEYOR	Place Seal		
Company Name SPARTINA LAND SURVEYING	Seal∜		
Address 802 MAIN STREET			Here
CONWAY	State South Carolina	ZIP Code 29526	Ext
Signature Williams	Date 06-10-2022	Telephone (843) 340-0285	
Copy all pages of this Elevation Certificate and all atta	achments for (1) community	official, (2) insurance	agent/company, and (3) building owner.
Comments (including type of equipment and location SECTION B: THIS PROJECT WAS PERMITTED LICENSE OF THIS PROJECT WAS PERMITTED LICENSE OF THE PROJECT WAS PERMITTED LICENSE OF THE PROJECT WAS PERMITTED LICENSE OF THE PROJ	JNDER FIRM PANEL 4505		AUGUST 23,1999, PLACES THIS
	<u> </u>		Form Page 2 of 6

## **BUILDING PHOTOGRAPHS**

21,129054 38 27

#### See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2022

**ELEVATION CERTIFICATE** 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. Policy Number: 3458 WILDERNESS LANE City ZIP Code State Company NAIC Number MURRELLS INLET South Carolina 29576

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 Caption FRONT VIEW Clear Photo One

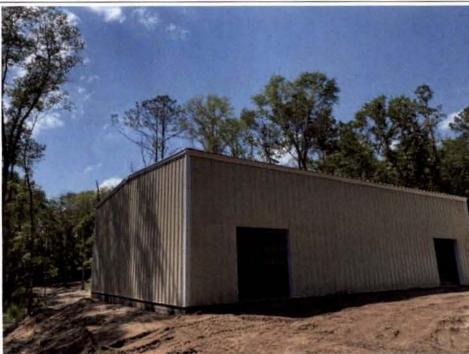


Photo Two

Photo Two Caption REAR VIEW

Clear Photo Two

FEMA Form 086-0-33 (12/19)

Replaces all previous editions.

Form Page 5 of 6

### **BUILDING PHOTOGRAPHS**

Continuation Page

21-129054

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding information from Section A.

3458 WILDERNESS LANE

FOR INSURANCE COMPANY USE

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

Policy Number:

MURRELLS INLET

**ELEVATION CERTIFICATE** 

State ZIP Code South Carolina 29576

Company NAIC Number

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.

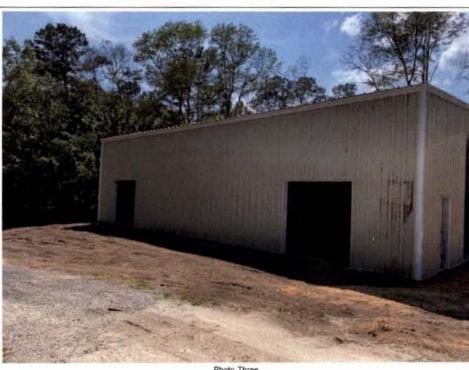


Photo Three

Photo Three Caption SIDE VIEW 1

Clear Photo Three



Photo Four Caption SIDE VIEW 2

Clear Photo Four