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

OMB No. 1660-0008 9//22 Expiration Date: November 30, 2022

ELEVATION CERTIFICATE

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					FOR INSUI	RANCE COMPANY USE	
A1. Building Owner's Name MUNGO HOMES COASTAL DIVISION					Policy Num	ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 200 AVERYVILLE DRIVE					Company N	NAIC Number:	
City CONWAY	State South Carolina				ZIP Code 29526		
A3. Property Description	(Lot and Block Numbers, Ta RLOAF SUBD. PHASE 2 (F		Number, Le	gal Description, e	(5)-2-2-101/		
A4. Building Use (e.g., Re	esidential, Non-Residential,	Addition,	Accessory,	etc.) RESIDENT	IAL		
A5. Latitude/Longitude:	_at. 33-50-54.0	Long. 0	78-49-38.3	Horizonta	al Datum: NAD	1927 🗷 NAD 1983	
A6. Attach at least 2 phot	ographs of the building if th	e Certific	ate is being u	used to obtain floo	od insurance.		
A7. Building Diagram Nur	nber 1A						
A8. For a building with a	rawlspace or enclosure(s):	Ė					
a) Square footage of	crawlspace or enclosure(s)		N/A sq ft			
b) Number of perman	ent flood openings in the cr	rawlspace	or enclosur	e(s) within 1.0 foo	t above adjacent gr	ade N/A	
c) Total net area of flo	ood openings in A8.b		N/A sq ir	1			
d) Engineered flood	ppenings? Yes X	No					
A9. For a building with an	attached garage:						
a) Square footage of	attached garage		402.00 sq f	t			
b) Number of perman	ent flood openings in the a	ttached g	arage within	1.0 foot above ad	jacent grade N/A		
c) Total net area of flo	ood openings in A9.b		N/A so	in			
d) Engineered flood of	penings? Yes	No					
	SECTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM) IN	FORMATION		
B1. NFIP Community Nan	e & Community Number		B2. County	Name		B3. State	
HORRY COUNTY 450104		HORRY COUNTY			South Carolina		
B4. Map/Panel B5. S Number	uffix B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood B (Zone AO, us	9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)	
45051C 0580 K	12-16-2021	12-16-	2021	AE	21		
FIS Profile x F	of the Base Flood Elevation IRM Community Dete atum used for BFE in Item I and in a Coastal Barrier Res	rmined [Other/Sou	Irce:	Other/Source:		
FEMA Form 086-0-33 (12/1	3)	Replaces	all previous	editions.		Form Page 1 of 6	

ELEVATION CERTIFICATE

OMB No. 1660-0008 9/15/22 Expiration Date: November 30, 2027 1/2

IMPORTANT: In these spaces, copy the correspo	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, a 200 AVERYVILLE DRIVE	Policy Number:				
City CONWAY	State ZIP South Carolina 295	Code 26	Company NAIC Number		
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					
C1. Building elevations are based on: Cons *A new Elevation Certificate will be required will C2. Elevations – Zones A1–A30, AE, AH, A (with Elevations – Zones C2.a–h below according to the Benchmark Utilized: TBM Indicate elevation datum used for the elevation NGVD 1929 NAVD 1988 CD Datum used for building elevations must be the case of the lowest horizontal structural materials. Bottom of the lowest horizontal structural materials. Compared to the construction of the lowest elevation of machinery or equipment (Describe type of equipment and location in	truction Drawings*	ding Under Construction of is complete. FE), AR, AR/A, AR/A, Item A7. In Puerto NAVD 88	Check the measurement used. 24.3		
f) Lowest adjacent (finished) grade next to bu	# 15 S		23.0 X feet meters		
 g) Highest adjacent (finished) grade next to be h) Lowest adjacent grade at lowest elevation 			23.6 x feet meters		
structural support	of deck of stairs, including		23.3 x feet 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. Were latitude and longitude in Section A provided by a licensed land surveyor? X Yes \(\subseteq \) No \(\textit{X} \) Check here if attachments.					
		res □ No	A Check here if attachments.		
Certifier's Name J. JASON COX	License Number SC# 26950		HA CARO		
Title OWNER Company Name COX SURVEYORS & ASSOCIATES, LLC Address	No. 26950				
4325 DICK POND ROAD, SUITE A			THE SHOPE OF THE		
City MYRTLE BEACH	State South Carolina	ZIP Code 29588	ASON COLINIA		
Signature J. Jasa Cox	Date 09-14-2022	Telephone (843) 650-1500	Ext.		
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.					
Comments (including type of equipment and location, per C2(e), if applicable) This property is also located within the County supplemental flood zone AE-21.					

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2022742

Control Services Control Contr	CONTRACTOR OF THE RESIDENCE OF THE PROPERTY OF	CONTRACTOR FOR CONTRACTOR CONTRAC		
MPORTANT: In these spaces, copy the corres				OR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Sui 200 AVERYVILLE DRIVE	te, and/or Bldg. No.) or P.C	. Route and Bo	ox No.	Policy Number:
City	State	ZIP Code	C	Company NAIC Number
CONWAY	South Carolina	29526		
SECTION E - BUILDIN FOR	IG ELEVATION INFORM ZONE AO AND ZONE A	ATION (SURY (WITHOUT E	/EY NOT R (FE)	EQUIRED)
For Zones AO and A (without BFE), complete Ite complete Sections A, B,and C. For Items E1–E4 enter meters.	rms E1–E5. If the Certificate, use natural grade, if availa	e is intended to able. Check the	support a L measureme	OMA or LOMR-F request, ent used. In Puerto Rico only,
E1. Provide elevation information for the following the highest adjacent grade (HAG) and the local			w whether the	ne elevation is above or below
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet	meters	above or below the HAG
b) Top of bottom floor (including basement,	*	leet	I meters	_ above or _ below the HAG.
crawlspace, or enclosure) is		leet	meters	above or below the LAG.
E2. For Building Diagrams 6–9 with permanent	flood openings provided in	Section A Item	s 8 and/or 9	(see pages 1–2 of Instructions),
the next higher floor (elevation C2.b in the diagrams) of the building is		leet	meters	above or below the HAG.
E3. Attached garage (top of slab) is		leet	meters	above or below the HAG.
E4. Top of platform of machinery and/or equipm servicing the building is	ent	feet	meters	above or below the HAG.
E5. Zone AO only: If no flood depth number is a				
	Y OWNER (OR OWNER'S			
The property owner or owner's authorized repres community-issued BFE) or Zone AO must sign h	sentative who completes Sere. The statements in Sec	ections A. B. ar	d E for Zone	A (without a FEMA-issued or
The property owner or owner's authorized repres community-issued BFE) or Zone AO must sign h Property Owner or Owner's Authorized Represer	sentative who completes Sere. The statements in Sec	ections A, B, ar tions A, B, and	d E for Zone	A (without a FEMA-issued or ct to the best of my knowledge.
SECTION F – PROPERT The property owner or owner's authorized represcommunity-issued BFE) or Zone AO must sign h Property Owner or Owner's Authorized Represent Address Signature	sentative who completes Sere. The statements in Secontative's Name	ections A, B, ar	d E for Zone E are correct	e A (without a FEMA-issued or ct to the best of my knowledge.
The property owner or owner's authorized repres community-issued BFE) or Zone AO must sign h Property Owner or Owner's Authorized Represer Address	sentative who completes Seriere. The statements in Secontative's Name	ections A, B, ar	d E for Zone E are correct	e A (without a FEMA-issued or ct to the best of my knowledge.
The property owner or owner's authorized repres community-issued BFE) or Zone AO must sign h Property Owner or Owner's Authorized Represer Address	sentative who completes Seriere. The statements in Secontative's Name	ections A, B, ar	d E for Zone E are correct	e A (without a FEMA-issued or ct to the best of my knowledge.
The property owner or owner's authorized represcommunity-issued BFE) or Zone AO must sign heroperty Owner or Owner's Authorized Represent Address Signature	sentative who completes Seriere. The statements in Secontative's Name	ections A, B, ar	State	e A (without a FEMA-issued or ct to the best of my knowledge.

☐ Check here if attachments.

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, S 200 AVERYVILLE DRIVE	Policy Number:		
City	State South Carolina	ZIP Code 29526	Company NAIC Number
SECTION	ON G - COMMUNITY INFO	RMATION (OPTIONAL))
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete the a ter meters.	applicable item(s) and sig	gn below. Check the measurement
G1. The information in Section C was takengineer, or architect who is authorized that in the Comments area below.)	ed by law to certify elevation	n information. (Indicate	the source and date of the elevation
or Zone AO.			MA-issued or community-issued BFE)
G3. The following information (Items G4-	-G10) is provided for comm	unity floodplain manager	ment purposes.
G4. Permit Number	G5. Date Permit Issued	G6.	Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	New Construction Sul	ostantial Improvement	
G8. Elevation of as-built lowest floor (including of the building:	g basement)	fee	et 🗌 meters Datum
G9. BFE or (in Zone AO) depth of flooding at	the building site:	fee	et meters Datum
G10. Community's design flood elevation:	-	fe	et meters Datum
Local Official's Name	Tir	tle	
Community Name	Te	elephone	
Signature	Da	ate	
Comments (including type of equipment and lo	cation, per C2(e), if applical	ole)	
			Check here if attachments.

BUILDING PHOTOGRAPHS

South Carolina

See Instructions for Item A6.

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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: 200 AVERYVILLE DRIVE City State ZIP Code Company NAIC Number CONWAY

29526

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; 09-14-2022 Photo One Caption

Clear Photo One



Photo Two Caption Rear View; 09-14-2022 Clear Photo Two

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

Replaces all previous editions.

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