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ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION			FOR INSUR	ANCE COMPANY US			
A1. Building Owner's Name DR HORTON, INC.				Policy Numb	Der:		
A2. Building Stree Box No. 2039 AINSLEY D		luding Apt., Unit, Suite	e, and/or Bldg. N	o.) or P.O. Route and	Company N	AIC Number:	
City	chart (19		Stat	le	ZIP Code		
LITTLE RIVE	R		Sou	uth Carolina	29566		
경영 문제 모양 영영 경영을 입니다. 영향	and the second	nd Block Numbers, Ta #307-10-04-0029	x Parcel Numbe	r, Legal Description, e	tc.)		
A4. Building Use	(e.g., Residen	tial, Non-Residential,	Addition, Access	ory, etc.) RESIDENT	TAL.		
A5. Latitude/Long	itude: Lat. 3	3-53-28.00	Long. 78-36-26	.47 Horizonta	al Datum: 🔲 NAD 1	927 🕱 NAD 1983	
A6. Attach at leas	st 2 photograp	hs of the building if the	e Certificate is be	aing used to obtain floo	od insurance.		
A7. Building Diag	ram Number	1B					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square fo	otage of crawl	space or enclosure(s)		N/A sq ft			
b) Number of	permanent flo	od openings in the cra	awlspace or encl	losure(s) within 1.0 foo	ot above adjacent gra	ide N/A	
c) Total net a	rea of flood op	penings in A8.b	N/A	sq in			
		igs? 🗌 Yes 🗶 N					
A9. For a building	with an attach	ed garage:					
a) Square for	otage of attach	ed garage	407.00	sq ft			
				ithin 1.0 foot above ad	ijacent grade N/A		
		penings in A9.b			-		
1241		gs? ∏Yes IXIN		<u> </u>			
a) Engineere	a licoa openin	gs: Tres A	10				
	SE	CTION B - FLOOD	NSURANCE R	ATE MAP (FIRM) IN	FORMATION		
B1. NFIP Commu	inity Name & C	Community Number	B2. Co	ounty Name		B3. State	
HORRY 450104			HORE	₹Y		South Carolina	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Pane Effective/ Revised Da	Zone(s)	B9. Base Flood E (Zone AO, us	9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)	
45051C0463	к	12-16-2021	12-16-2021	x	N/A		
D40 la diasta tha		Read Flood Flowation	(REE) data or b	ase flood depth entere	ed in Item B9		
		Community Deter					
	vation datum	used for BFE in Item E	39: 🗌 NGVD 19	929 🗶 NAVD 1988	Other/Source:		
B11. Indicate ele		Coastal Barrier Res	ources System (CBRS) area or Otherw	rise Protected Area (OPA)? 🗌 Yes 🗶 N	
	ing located in a	a coasta bamer rest					
			CBRS OP	PA			

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ELEVATION CERTIFICATE				Expiration Dat	e: November 30, 2022
MPORTANT: In these spaces, copy the corresponding					NCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/ 2039 AINSLEY DRIVE	or Bldg. No.) or P	.O. Route and E	Box No.	Policy Number	ər:
City S	tate	ZIP Code		Company NA	IC Number
	South Carolina	29566			
SECTION E – BUILDING ELE FOR ZONE	AO AND ZONE	MATION (SUR A (WITHOUT	VEY NOT BFE)	REQUIRED)	
For Zones AO and A (without BFE), complete Items E1- complete Sections A, B,and C. For Items E1–E4, use na enter meters.	atural grade, if ava	ailable. Check th	e measurer	nent used. In	Puerto Rico only,
E1. Provide elevation information for the following and the highest adjacent grade (HAG) and the lowest a	check the approp djacent grade (LA	riate boxes to sh .G).	low whether	the elevation	is above or below
 a) Top of bottom floor (including basement, crawlspace, or enclosure) is b) Top of bottom floor (including basement, 		[] fee	t 🗌 meter	s 🗌 above	or Delow the HAG.
crawlspace, or enclosure) is		[] fee			or Delow the LAG.
E2. For Building Diagrams 6-9 with permanent flood op	penings provided	in Section A Iter	ns 8 and/or	9 (see pages	1-2 of Instructions),
the next higher floor (elevation C2.b in the diagrams) of the building is		[] fee	t 🗌 meter	s 🗌 above	or below the HAG.
E3. Attached garage (top of slab) is	· · · · · · · · · · · · · · · · · · ·	fee	t 🗌 meter	s 🗌 above	or below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is		2010	t 🗌 meter	10000	or below the HAG.
E5. Zone AO only: If no flood depth number is available floodplain management ordinance?	e, is the top of the No 🗌 Unknow	bottom floor ele vn. The local o	evated in acc fficial must o	cordance with certify this info	the community's rmation in Section G.
SECTION F - PROPERTY OWN	NER (OR OWNER	S REPRESEN	TATIVE) CE	RTIFICATIO	N
The property owner or owner's authorized representativ community-issued BFE) or Zone AO must sign here. Th	ve who completes ne statements in S	Sections A, B, a Sections A, B, ar	and E for Zo nd E are con	ne A (without rect to the bes	a FEMA-issued or t of my knowledge.
Property Owner or Owner's Authorized Representative'	s Name				
Address	C	ity	St	ate	ZIP Code
Signature	D	ate	Те	lephone	
Comments					
				Che	ck here if attachments.
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BUILDING PHOTOGRAPHS

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

LEVATION CERTIFICATE See Instructions for Item A6.			Expiration Date: November 30, 2022	
IMPORTANT: In these spaces, copy the cor	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, 2039 AINSLEY DRIVE	Policy Number:			
City	State	ZIP Code	Company NAIC Number	
LITTLE RIVER	South Carolina	29566		

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 ELEVATION 2/22/2022 FFE: 24.1', GARAGE EL.: 23.6'

Clear Photo One



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ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

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

ELEVATION CERTIFICATE	EVATION CERTIFICATE Continuation Page		Expiration Date: November 30, 2022	
IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2039 AINSLEY DRIVE			Policy Number:	
City	State ZIP Code		Company NAIC Number	
LITTLE RIVER	South Carolina	29566		

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.

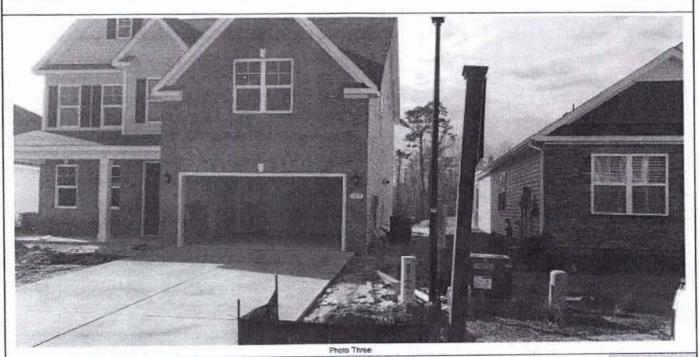


Photo Three Caption RIGHT ELEVATION WITH HEAT PUMP PAD EL. 24.0' 2/22/2022

Clear Photo Three



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ELEVATION CERTIFICATE	OMB No. 1660-0008 Expiration Date: November 30, 2022					
IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, St. 2039 AINSLEY DRIVE	uite, and/or Bldg. No.) or P.C	0. Route and Box No.	Policy Number:			
City LITTLE RIVER	State South Carolina	ZIP Code 29566	Company NAIC Number			
SECTIO	N G - COMMUNITY INFOR	MATION (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, end G1. The information in Section C was take	Certificate. Complete the ap ter meters.	oplicable item(s) and sig	n below. Check the measurement			
engineer, or architect who is authoriz data in the Comments area below.)						
G2. A community official completed Section or Zone AO.						
G3. The following information (Items G4-	G10) is provided for commu	nity floodplain managen	nent purposes.			
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for:] New Construction 🗌 Sub	stantial Improvement				
G8. Elevation of as-built lowest floor (including of the building:	G8. Elevation of as-built lowest floor (including basement) feet meters Datum					
G9. BFE or (in Zone AO) depth of flooding at t	the building site:	fee	t 🗌 meters Datum			
G10. Community's design flood elevation:		fee	t in meters Datum			
Local Official's Name	Titl	e				
Community Name	Tel	ephone				
Signature	Da	te				
Comments (including type of equipment and loc	cation, per C2(e), if applicab	le)				
EEMA Earr 086 0 22 (40/40)	Declarge ell provieus	editions	Check here if attachments. Form Page 4 of 6			
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ELEVATION CERTIFICATE	OMB No. 1660-0008 Expiration Date: November 30, 2022		
MPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., U 2039 AINSLEY DRIVE	nit, Suite, and/or Bldg. No.) or P.O	. Route and Box No.	Policy Number:
City LITTLE RIVER	Company NAIC Number		
SECTION C -	BUILDING ELEVATION INFOR	MATION (SURVEY	REQUIRED)
C1. Building elevations are based on: *A new Elevation Certificate will be C2. Elevations – Zones A1–A30, AE, AI	H, A (with BFE), VE, V1-V30, V (w	vith BFE), AR, AR/A, Al	R/AE, AR/A1A30, AR/AH, AR/AO.
Complete Items C2.a-h below acco Benchmark Utilized: <u>SITE CONTRE</u>		ified in Item A7. In Pue atum: <u>NAVD 88</u>	rto Rico only, enter meters.
Indicate elevation datum used for th	terms value sets are discussed in the	below.	
NGVD 1929 🕱 NAVD 1			
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 ba	sement, crawlspace, or enclosure	floor)	24.1 x feet meters
b) Top of the next higher floor			N/A i feet i meters
	tructural member (V Zones only)		N/A feet meters
	 c) Bottom of the lowest horizontal structural member (V Zones only) 		
 d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 			X feet meters
 f) Lowest adjacent (finished) grade next to building (LAG) 			22.5 x feet meters
 g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 			N/A feet meters
	- SURVEYOR, ENGINEER, OR		
This certification is to be signed and sea I certify that the information on this Certi statement may be punishable by fine or Were latitude and longitude in Section A	led by a land surveyor, engineer, of ficate represents my best efforts to imprisonment under 18 U.S. Code	or architect authorized o interpret the data ava or Section 1001.	by law to certify elevation information. ilable. I understand that any false
Certifier's Name MATTHEW D. SVEJKOVSKY	License Numbe 21233	r	
Title SURVEY DEPARTMENT MANAGER Company Name THOMAS & HUTTON			S QOFESS OLD BE
			₹ NG 21233 >
Address 611 BURROUGHS & CHAPIN BLVD. S			12232022 0 5
City MYRTLE BEACH	State South Carolina	ZIP Code 29577	D. SVEJ
Signature Metan D Sil	Date 02-23-2022	Telephone (843) 839-8463	Ext.
Copy all pages of this Elevation Centricate	and all attachments for (1) commu	nity official, (2) insuranc	e agent/company, and (3) building owner
Comments (including type of equipment	and location, per C2(e), if applicat	ole)	
ELEVATIONS SHOWN ARE OF FINISH ON SITE IS THE HEAT PUMP, PAD EL		ATE OF SURVEY. THE	E LOWEST MACHINERY LOCATED
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