135893 11-30-22 1167

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

OMB No. 1660-0008 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 INSU	FOR INSURANCE COMPANY USE	
A1. Building Owner's Name					Policy Nun	nber:	
Gregg D. Eaddy							
 Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3181 1St Ave S. 					Company I	NAIC Number:	
City			State			ZIP Code	
Murrells Inlet			South C	arolina		29576	
A3. Property Description (Lot a PIN# 470-07-03-0004	nd Block Numbers, T	ax Parcel	Number, Le	gal Des	scription, etc.)		
A4. Building Use (e.g., Resider	ntial, Non-Residential,	Addition,	Accessory,	etc.)	Residential		
A5. Latitude/Longitude: Lat. 33	3-34-41.86	Long. 79	-00-23.01		Horizontal Da	tum: NAD	1927 🗵 NAD 1983
A6. Attach at least 2 photograp	hs of the building if th	e Certifica	ite is being	used to	obtain flood in:	surance.	
A7. Building Diagram Number	6						
A8. For a building with a crawls	pace or enclosure(s):						
a) Square footage of crawl	space or enclosure(s))		30.00) sq ft		
b) Number of permanent flo	ood openings in the cr	rawlspace	or enclosur	e(s) wit	hin 1.0 foot abo	ove adjacent gr	ade 2
c) Total net area of flood or	penings in A8.b	2	200.00 sq ir	n			-
d) Engineered flood opening	ngs? Yes X	No					
A9. For a building with an attach	ned garage						
a) Square footage of attach			N/A sa f	t			
b) Number of permanent flo					ahovo adiaco	at grade N/A	
	The Control of Control				above aujacei	it grade ivin	
c) Total net area of flood op			N/A SQ	(in			
d) Engineered flood openin	gs? ∐ Yes ⊠ ſ	No					
SE	CTION B - FLOOD	INSURAN	NCE RATE	MAP (FIRM) INFOR	MATION	
B1. NFIP Community Name & C	Community Number		B2. County	Name			B3. State
Horry County 450104			Horry				South Carolina
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date		M Panel ctive/ sed Date	B8. F Zone		Base Flood E (Zone AO, us	Elevation(s) e Base Flood Depth)
45051C0784 K	12-16-2021	12-16-20		VE	14		
B10. Indicate the source of the ☐ FIS Profile ☒ FIRM					oth entered in I	tem B9:	
B11. Indicate elevation datum u	used for BFE in Item B	89: 🔲 NG	SVD 1929	× NA	√D 1988 □	Other/Source:	
B12. Is the building located in a	Coastal Barrier Reso	ources Sys	stem (CBRS	s) area (or Otherwise Pr	otected Area (OPA)? ☐ Yes ⊠ No
Designation Date:		55.75-31.026 A	OPA				

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

Replaces all previous editions.

Form Page 1 of 6

ELEVATION CERTIFICATE

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

IPORTANT: In these spaces, copy the corresponding information frouilding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P	FOR INSURANCE COMPANY USI Policy Number:				
181 1St Ave S.					
ty State ZIP Code urrells Inlet South Carolina 29576			Company NAIC Number		
SECTION C - BUILDING ELEVATION INFO	DRMATION (SURVEY R	EQUIR	ED)		
*A new Elevation Certificate will be required when construction of the C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V	(with BFE), AR, AR/A, AR	/AE, AR	R/A1–A30,		
Complete Items C2.a–h below according to the building diagram spenchmark Utilized: SCVRS Network Vertical	Datum: 1988	to Rico	only, enter	meters.	
Indicate elevation datum used for the elevations in items a) through	h) below.				
☐ NGVD 1929 ☐ NAVD 1988 ☐ Other/Source:					
Datum used for building elevations must be the same as that used for	or the BFE.	Ch	eck the me	easurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosur	re floor)	5.5	X feet	meters	
b) Top of the next higher floor		17.8	× feet	☐ meters	
		16.3	× feet	meters	
c) Bottom of the lowest horizontal structural member (V Zones only)	-	N/A	☐ feet	☐ meters	
d) Attached garage (top of slab)	*	13/73	icci	meters	
 e) Lowest elevation of machinery or equipment servicing the buildin (Describe type of equipment and location in Comments) 		16.8	\times feet	meters	
f) Lowest adjacent (finished) grade next to building (LAG)		5.8	× feet	meters	
g) Highest adjacent (finished) grade next to building (HAG)		6.2	× feet	meters	
b) Lowest adjacent (misried) grade next to boilding (mag) h) Lowest adjacent grade at lowest elevation of deck or stairs, inclusive structural support	ding	6.2	⊠ feet	☐ meters	
SECTION D – SURVEYOR, ENGINEER, O					
This certification is to be signed and sealed by a land surveyor, engineer, certify that the information on this Certificate represents my best efforts tatement may be punishable by fine or imprisonment under 18 U.S. Cod	to interpret the data availa le, Section 1001.	able. I ui	nderstand i	ration information that any false e if attachments.	
Certifier's Name License Numb	er	_			
Sarry W. Suggs 25438					
itle					
LS			P	ace	
ompany Name rescent Moon Land Surveying, Inc.			S	eal	
address 535 Meeting St		18		ere	
Sity State South Carolina South Carolina	ZIP Code 29569		V.	ZZ LIKE	
Signature Date 11-29-2022	Telephone (843) 995-0955	Ext.			
opy all pages of this Elevation Certificate and all attachments for (1) commi	unity official, (2) insurance	agent/co	mpany, an	d (3) building own	
comments (including type of equipment and location, per C2(e), if application the lowest machinery servicing the home will be the a/c unit. The encloses the attic. The bottom of the sump in the elevator shaft is 5.5'. The 1st flowers	ed area is for the elevator	shaft an 7.8'.	d all the ed	quipment is locate	

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.					FOR INSURAN Policy Number:	CE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3181 1St Ave S.						
City			IP Code 9576		Company NAIC	Number
	SECTION E – BUILDING ELI FOR ZONE	EVATION INFORMATE AO AND ZONE A (V			REQUIRED)	
com	Zones AO and A (without BFE), complete Items E1- plete Sections A, B,and C. For Items E1-E4, use no er meters.					
E1.	Provide elevation information for the following and the highest adjacent grade (HAG) and the lowest a a) Top of bottom floor (including basement,		boxes to sho	w whether	the elevation is	above or below
	crawlspace, or enclosure) is		_	meters	above or	below the HAG.
	 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet	meters	above or	below the LAG.
E2.	For Building Diagrams 6–9 with permanent flood of the next higher floor (elevation C2.b in	penings provided in Se	ction A Items	s 8 and/or 9	g (see pages 1–2	2 of Instructions),
	the diagrams) of the building is		feet	meters	above or	below the HAG.
E3.	Attached garage (top of slab) is	3	feet	meters	above or	below the HAG.
E4.	Top of platform of machinery and/or equipment servicing the building is		[] feet	meters	above or	below the HAG.
E5.	Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	e, is the top of the botto No Unknown.	om floor elev The local offi	ated in acc cial must c	ordance with the ertify this informa	e community's ation in Section G
	SECTION F - PROPERTY OWN	IER (OR OWNER'S RI	EPRESENTA	ATIVE) CEI	RTIFICATION	
The	property owner or owner's authorized representativ munity-issued BFE) or Zone AO must sign here. Th	e who completes Secti e statements in Sectio	ons A, B, an ns A, B, and	d E for Zor E are corre	ne A (without a F	EMA-issued or fmy knowledge
	perty Owner or Owner's Authorized Representative's		<u> </u>			
Add	ress	City		Sta	te	ZIP Code
Sign	nature	Date		Tele	ephone	
Con	nments					
						1
						1
						1
						-
					☐ Check h	ere if attachments.

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding information from Se	tion A. FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Rot 3181 1St Ave S.	ite and Box No. Policy Number:					
City State ZIP Murrells Inlet South Carolina 295	Code Company NAIC Number 76					
SECTION G - COMMUNITY INFORMAT	ION (OPTIONAL)					
The local official who is authorized by law or ordinance to administer the commu Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applica used in Items G8–G10. In Puerto Rico only, enter meters.						
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)						
G2. A community official completed Section E for a building located in Zone or Zone AO.	A (without a FEMA-issued or community-issued BFE)					
G3. The following information (Items G4–G10) is provided for community flu	podplain management purposes.					
G4. Permit Number G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued					
Kes-10-21-135893 11-12-2021						
G7. This permit has been issued for: New Construction Substantia	al Improvement					
G8. Elevation of as-built lowest floor (including basement) of the building:	feet meters					
G9. BFE or (in Zone AO) depth of flooding at the building site:	feet meters Datum NGVD1929					
G10. Community's design flood elevation:	feet meters Datum Nov0192					
Local Official's Name Community Name Title Flood Telephon	Huzard Reduction controloff					
Homy canty 843	915 SD9D					
Signature Date 12-1-22						
Comments (including type of equipment and location, per C2(e), if applicable)						
House was permitted under old FEMA						
notice and tille	llana					
AE 13 flood Zone wit	h Itt treebland					
House under construction during map change.						
may change.						
	Check here if attachments.					

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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IMPORTANT: In these spaces, c	FOR INSURANCE COMPANY USE		
Building Street Address (including 3181 1St Ave S.	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Murrells Inlet	South Carolina	29576	W 100

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

Photo One Caption Front 11/29/2022

Clear Photo One



Photo Two Caption Rear 11/29/2022

Clear Photo Two

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BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3181 1St Ave S.			FOR INSURANCE COMPANY USE		
			Policy Number:		
City	State	ZIP Code	Company NAIC Number		
Murrells Inlet	South Carolina	29576			

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 Left 11/29/2022

Clear Photo Three



Photo Four Caption Right 11/29/2022

Clear Photo Four

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