

Horry County Government

Code Enforcement Department
www.horrycounty.org



Horry County Government & Justice Center
1301 Second Avenue / Suite 1D09
Conway, South Carolina 29526
Phone 843.915.5090 || Fax 843.915.6090

115269

MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

In accordance with this community's participation in the National Flood Insurance Program's Community Rating System, all FEMA Elevation Certificates must be correct and complete. The attached Certificate has some incorrect items which are noted here.

| SECTION A - PROPERTY INFORMATION | | For Insurance Company Use: |
|--|-------|---|
| A1. Building Owner's Name | | Policy Number |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. | | Company NAIC Number |
| City | State | ZIP Code |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) | | |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) | | |
| A5. Latitude/Longitude: Lat. Long. | | Horizontal Datum: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> 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 | | |
| A8. For a building with a crawl space or enclosure(s), provide: a) Square footage of crawl space or enclosure(s) sq ft b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b sq in d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No | | A9. For a building with an attached garage, provide: a) Square footage of attached garage sq ft b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade c) Total net area of flood openings in A9.b sq in d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No |

| SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION | | | | | |
|---|------------|---------------------|---------------------------------------|-------------------|---|
| B1. NFIP Community Name & Community Number | | B2. County Name | | B3. State | |
| B4. Map/Panel Number 45051C0179 | B5. Suffix | B6. FIRM Index Date | B7. FIRM Panel Effective/Revised Date | B8. Flood Zone(s) | B9. Base Flood Elevation(s) (Zone AO, use base flood depth) |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) | | | | | |
| B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: | | | | | |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input type="checkbox"/> No Designation Date: <input type="checkbox"/> CBRS <input type="checkbox"/> OPA | | | | | |

| SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) | | | |
|--|--|----------------|--|
| C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input type="checkbox"/> Finished Construction | | | |
| *A new Elevation Certificate will be required when construction of the building is complete. | | | |
| C2. 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. | | | |
| Benchmark Utilized | | Vertical Datum | |
| Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: | | | |

COMMENTS:

Corrected B4.

Date of Review:

8-12-20

Community Official:

[Signature], CFM

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.

8-10-20 VK35

115269

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

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

8-12-20

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 INSURANCE COMPANY USE | |
|---|-------------------|-------------------------------------|--|---------------------------|--|
| A1. Building Owner's Name Elida Welch ✓ | | | | Policy Number: | |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3538 Reavis Lane ✓ | | | | Company NAIC Number: | |
| City Myrtle Beach ✓ | | State South Carolina ✓ | | ZIP Code 29579 ✓ | |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) ✓ Lot 9, Phase II-A, Whispering Pines Subdivision Pin 427-12-01-0039 | | | | | |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential | | | | | |
| A5. Latitude/Longitude: Lat. 33.70926 Long. 078.95738 Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 5 | | | | | |
| A8. For a building with a crawlspace or enclosure(s): | | | | | |
| a) 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 ✓ |
| B4. Map/Panel Number 45051C679 | B5. Suffix H ✓ | B6. FIRM Index Date 09-17-2003 ✓ | B7. FIRM Panel Effective/ Revised Date 08-23-1999 ✓ | B8. Flood Zone(s) AE ✓ | B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 14ft ✓ |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ✓ <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____ | | | | | |
| B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ | | | | | |
| B12. 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 | | | | | |

ELEVATION CERTIFICATE

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

| | | | |
|---|-------------------------|-------------------|----------------------------------|
| 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. 3538 Reavis Lane | | | Policy Number: |
| City Myrtle Beach | State South Carolina | ZIP Code 29579 | Company NAIC Number |

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

C2. 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: Sc 26-221

Vertical Datum: 1929

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 the BFE.

Check the measurement used.

- | | | | |
|---|------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) | 16.2 | <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 checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab) | N/A | <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) | 15.7 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | 12.5 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | 13.2 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support | 12.6 | <input checked="" 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.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No ☒ Check here if attachments.

Certifier's Name
James R. Blanton

License Number
15511

Title
Land Surveyor

Company Name
Blanton Land Surveying Inc.

Address
2596 Riverside Drive

City
Myrtle Beach

State
South Carolina

ZIP Code
29579

Signature

Date
08-01-2020

Telephone
(843) 236-2803

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)

C2 (a) Finished Floor
C2 (e) HV/HC Pad

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

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.
3538 Reavis Lane

FOR INSURANCE COMPANY USE

Policy Number:

City
Myrtle Beach

State
South Carolina

ZIP Code
29579

Company NAIC Number

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.

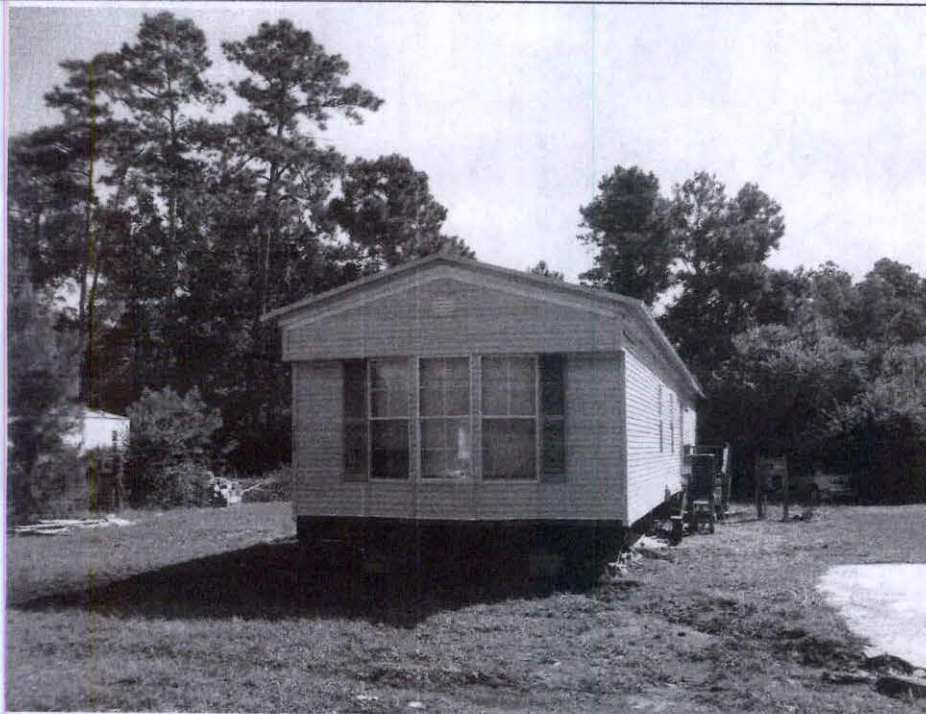


Photo One

Photo One Caption Front 08-01-2020

Clear Photo One

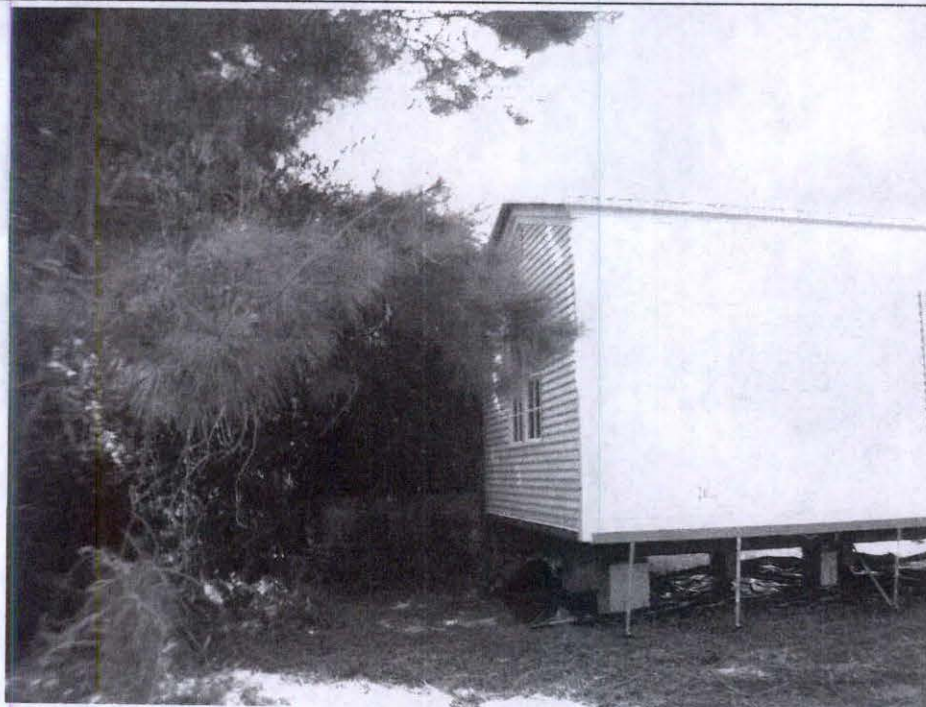


Photo Two

Photo Two Caption Rear 08-01-2020

Clear Photo Two