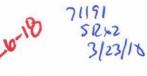
U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program ELEVATION CERTIFICATE



3

OMB Control Number: 1660-0008 Expiration: 11/30/2018 hy, and (3) building owner.

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 8-15

Copy all pages of this Elevation Certificate and all attachments for (1) community	official, (2) ins	urance agent/compa	ny, and (3) build	aing owner.	
SECTION A - PROPERTY INFORMATION		FOR INS	URANCE COM	IPANY USE	
A1. Building Owner's Name THOMAS NASCONE			Policy Number:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P Box No. 339 SEABREEZE DRIVE	Company NAIC Number:	Company NAIC Number:			
City GARDEN CITY	State S	SC /	Zip Code 2	9576	
A3 Property Description (Lot and Block Numbers, Tax Parcel Number, Legal					
LOT 3 BLOCK H-1 MYRTLE DUNES (PIN# 462-14-03	3-0077)				
A4 Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc		NTIAL			
A5. Latitude/Longitude: Lat. 33-35-20.3 Long. 078-59-43.8 Horiz	ontal Datum:	ONAD 1927	O NAD 1983		
A6. Attach at least 2 photographs of the building if the Certificate is being use	d to obtain floo	od insurance.			
AT. Building Diagram Number 6					
As For a building with a crawlspace or enclosure(s):	A9. For a bui	Iding with an attach	ied garage:		
a) Square footage of crawlspace or enclosure(s) 210 / sq ft	The second	otage of attached g		sq f	
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	in the attac	f permanent flood o ched garage within acent grade		-	
c) Total net area of flood openings in A8.b 210 sq in	c) Total net a	rea of flood opening	gs in A9.b N/A	A sq i	
d) Engineered flood openings? OYes ONo	d) Engineere	d flood openings?	OYes	No	
SECTION B - FLOOD INSURANCE RATE	MAP (FIRM)	INFORMATION			
B1. NFIP Community Name & Community Number B2. Count		1		33. State	
HORRY COUNTY / 450104 HORRY		8. Flood Zone(s)		SC	
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Paner Revised Da		6. Flood Zone(s)		d Elevation(s) , use base flood	
45051C 0753 H 09/17/2003 08/23/1999		AE	depth 13		
B10 Indicate the source of the Base Flood Elevation (BFE) data or base flood	depth entered	d in Item B9:			
OFIS Profile OFIRM OCommunity Determined OOther/Source:	Der im Konen (MA				
Br1. Indicate elevation datum used for BFE in Item B9: ONGVD 1929 ON	AVD 1988	Other/Source:	XYC)	<u>.</u>	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) and			OPA)? OYe	s ONo	
Designation Date:					
SECTION C - BUILDING ELEVATION INFOR	MATION (SU		\		
		T			
	ding Under Co	instruction*	Finished Cons	truction	
* A new Elevation Certificate will be required when construction of the building C2. Elevations: Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BF		AR/AF AR/A1-A3) AR/AH AR/A	O. Complete	
Items C2.a-h below according to the building diagram specified in Item A7. In I	Puerto Rico o	nly, enter meters.			
Benchmark Utilized: TBM Vert	tical Datum:	NGVD 1929			
Indicate elevation datum used for the elevations in items a) through h) below.	ONGVD 19	29 ONAVD 1988	5		
O Other/Source:			-2		
Datum used for building elevations must be the same as that used for the BFE	1		Check the me	asurement used	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	11	. 5	• feet	meters	
b) Top of the next higher floor	. 5	feet	meters		
b) Bottom of the lowest horizontal structural member (V Zones only)	N/A		feet	meters	
d) Attached garage (top of slab)	N/A	•	feet	meters	
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	15	. 1	feet	meters	
B Lowest adjacent (finished) grade next to building (LAG)	10	. 8	efeet	meters	
Highest adjacent (finished) grade next to building (HAG)	11	. 2	efeet	meters	
 b) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 	10	. 5	feet	meters	

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ELEVATION CERTIFICATE, page 2

OMB Control Number: 1660-0008 Expiration: 11/30/2018

IMPORTANT: In these spaces, copy the corr	ORTANT: In these spaces, copy the corresponding information from Section A.			
Building Street Address (including Apt., Unit, St	9			
339 SEABREEZE DRIVE			Policy Number:	
City GARDEN CITY	State SC	Zip Code 29576	Company NAIC Number:	
SECTION D - S	SURVEYOR, ENGINEE	R, OR ARCHITECT CERTIF	ICATION	
This certification is to be signed and sealed by a that the information on this Certificate represents punishable by fine or imprisonment under 18 U.S.	s my best efforts to inter			
Check here if attachments.	Were latitude and longitude in Section A provided by a licensed land surveyor?		MATH CARO	
Certifier's Name	<u> </u>	nse Number	CONFESSION A	
J. JASON COX, PLS	2	6950	The state	
Title PRESIDENT	Company Name COX SURVEYORS	& ASSOCIATES	No. 26950	
Address 4325 DICK POND RD. STE. A	City MYRTLE BEACH	State Zip Code SC 29588	SURVEOT INTERNATION	
Signature J. Jas Cox	Date Telephone 03/21/2018 843-650-1500		Pre- annual	
Copy all pages of this Elevation Certificate for (1) community official, (2)	insurance agent/company, a	nd (3) building owner.	
Comments (including type of equipment and local C2e is the air conditioner pad.			9. (
	V			
*				
Signature J. Jas Cox			Date 03/21/2018	
SECTION E - BUILDING ELEVATION INFO	ORMATION (SURVEY	NOT REQUIRED) FOR ZON	E AO AND ZONE A (WITHOUT BFE)	
For Zones AO and A (without BFE), complete Ite Sections A, B, and C. For Items E1-E4, use natu				
E1. Provide elevation information for the followin highest adjacent grade (HAG) and the lowest			the elevation is above or below the	
 a) Top of bottom floor (including basement, or or enclosure) is 	crawlspace,	feetmete	ers above or below the HAG.	
b) Top of bottom floor (including basement, or or enclosure) is	crawlspace,	feetmete	ers above or below the LAG.	
E2. For Building Diagrams 6-9 with permanent fle higher floor (elevation C2.b in the diagrams) of th		in Section A Items 8 and/or 9 feet mete		
E3. Attached garage (top of slab) is	×	feetmete	ers above or below the HAG.	
E4. Top of platform of machinery and /or equipm servicing the building is	ent	feetmete	ers above or below the HAG.	
E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.				
SECTION F - PROPER	RTY OWNER (OR OWN	IER'S REPRESENTATIVE)	CERTIFICATION	
The property owner or owner's authorized repre community-issued BFE) or Zone AO must sign h				
Property Owner or Owner's Authorized Represe	entative's Name			
Address	City	State	ZIP Code	
Signature	Date	Telephone	a radie and the end of the end of the	
Comments	1221		10.49 (B) 2.16	
			1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -	
			Check here if attachments.	

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ELEVATIO	VCERTIFIC	ATE, page 3
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ELEVATION CERTIFICATE, pa	age 3			OMB Control Number: 1660-0008 Expiration: 11/30/2018		
IMPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., U 339 SEABREEZE DRIVE	Init, Suite, and/or Bldg. No.) or P.O	. Route and Box No	Policy Nu	imber:		
City GARDEN CITY	State SC	^{Code} 29576	Company Number:	/ NAIC		
	SECTION G - COMMUNITY INFO	RMATION (OPTION	AL)			
or architect who is authorized by Comments area below.)	ation Certificate. Complete the appl	icable item(s) and s nat has been signed (Indicate the source	ign below. Ch and sealed b e and date of i	eck the measurement used in y a licensed surveyor, engineer, the elevation data in the		
or Zone AO.	G4-G10) is provided for community	floodolain manage	nent purpose:	S.		
G4. Permit Number	G5. Date Permit Issued			pliance/Occupancy Issued		
G7. This permit has been issued for: C I	New Construction C Substantial I	mprovement				
G8. Elevation of as-built lowest floor (inclu of the building:		C feet C me	ters Datum	1		
G9. BFE or (in Zone AO) depth of flooding building site:	g at the	C feet C me	ters Datum	ı		
G10. Community's design flood elevation:	· •	C feet C me	ters Datum	n		
Local Official's Name	Title		5			
Community Name	Telep	hone				
Signature	Date					
				COX SURVEYORS ASSOCIATES No. 4099		
A CONTRACTOR OF THE OWNER				Check here if attachments		

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ELEVATION CERTIFICATE, page 4 See instructions for Item A6.

OMB Control Number: 1660-0008 Expiration: 11/30/2018

We want to a television				Expiration. 11/30/2018
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. 339 SEABREEZE DRIVE			Policy Number:	
City GARDEN CITY	/	State SC	Zip Code 29576	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.



Front View March 21, 2018



Rear View March 21, 2018