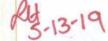
U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

# 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.

A1. Building Owner's Name DAVID WILLIAMSON  A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  3458 WILDERNESS LANE  City MURRELLS INLET South Carolina  A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) WILDERNESS PLANTATION LOT 6B TAX MAP #193-00-01-018  A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL  A5. Latitude/Longitude: Lat. N-33-34-38 Long. W-79-05-14 Horizontal Date  A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood instance.  A7. Building Diagram Number  1B  A8. For a building with a crawlspace or enclosure(s):  a) Square footage of crawlspace or enclosure(s)  N/A sq ft	um: ☐ NAD 1927 ※ NAD 1983 urance.
Box No.  3458 WILDERNESS LANE  City MURRELLS INLET  A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) WILDERNESS PLANTATION LOT 6B TAX MAP #193-00-01-018  A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL  A5. Latitude/Longitude: Lat. N-33-34-38  Long. W-79-05-14  Horizontal Date  A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insulation.  A7. Building Diagram Number  1B  A8. For a building with a crawlspace or enclosure(s):	ZIP Code 29576
MURRELLS INLET  A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) WILDERNESS PLANTATION LOT 6B TAX MAP #193-00-01-018  A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)  RESIDENTIAL  A5. Latitude/Longitude: Lat. N-33-34-38  Long. W-79-05-14  Horizontal Date  A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood instance.  A7. Building Diagram Number 1B  A8. For a building with a crawlspace or enclosure(s):	29576
MILDERNESS PLANTATION LOT 6B TAX MAP #193-00-01-018  A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)  RESIDENTIAL  A5. Latitude/Longitude: Lat. N-33-34-38  Long. W-79-05-14  Horizontal Date  A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood instance.  A7. Building Diagram Number 1B  A8. For a building with a crawlspace or enclosure(s):	um: ☐ NAD 1927 ※ NAD 1983 / urance.
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A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insulation.  A7. Building Diagram Number1B	urance.
A7. Building Diagram Number1B	
A8. For a building with a crawlspace or enclosure(s):	ve adjacent grade N/A
A8. For a building with a crawlspace or enclosure(s):	ve adjacent grade N/A
	ve adjacent grade N/A
	ve adjacent grade N/A
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above	
c) Total net area of flood openings in A8.b N/A sq in	
d) Engineered flood openings?  Yes No	
A9 For a building with an attached garage:	
a) Square footage of attached garage sq ft	
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent	t grade N/A
c) Total net area of flood openings in A9.b N/A sq in	
d) Engineered flood openings?  Yes  No	FNFF
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORM	MATION
B1. NFIP Community Name & Community Number HORRY COUNTY 450104 B2. County Name HORRY	B3. State South Carolina
TICKY COUNTY 430104	Souli Carolina
Number Date Effective/ Zone(s) Revised Date	Base Flood Elevation(s) (Zone AO, use Base Flood Depth)
45051C 0730 H 09-17-2003 08-23-1999 AE 5	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Ite    FIS Profile  FIRM  Community Determined  Other/Source:  B41. Indicate elevation datum used for BFE in Item B9:  NGVD 1929  NAVD 1988	em B9: Other/Source:
B12 Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Pro	otected Area (OPA)? Yes X No
Designation Date: CBRS OPA	

# **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2018

MPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, S 3458 WILDERNESS LANE	Policy Number:  Company NAIC Number			
City MURRELLS INLET				
SECTION C - BUI	LDING ELEVATION INFORMATIO	N (SURVEY RE	QUIRED)	
C1. Building elevations are based on:  *A new Elevation Certificate will be requi  C2. Elevations – Zones A1–A30, AE, AH, A ( Complete Items C2.a–h below according Benchmark Utilized: RTK GPS VIA SC F	with BFE), VE, V1–V30, V (with BFE) to the building diagram specified in I	is complete. ), AR, AR/A, AR/A tem A7. In Puerto	AE, AR/A1-A30, AR/AH, AR/AO.	
Indicate elevation datum used for the ele  ☑ NGVD 1929 ☐ NAVD 1988	vations in items a) through h) below.	3VD 1929		
Datum used for building elevations must				
a) Top of bottom floor (including baseme	ent crawlenace or enclosure floor)		Check the measurement used.  18.1     The continue of the con	
b) Top of the next higher floor	ent, crawispace, or enclosure noor) _		N/A   feet   meters	
e) Bottom of the lowest horizontal struct	- usel member (V/ Zenes entr)		N/A   feet   meters	
Attached garage (top of slab)	ural member (v zones only)		16.7 🔀 feet 🗌 meters	
e) Lowest elevation of machinery or equ	inment conjicing the building		Note I motors	
(Describe type of equipment and loca	tion in Comments)		17.0 X feet meters	
1) Lowest adjacent (finished) grade nex	t to building (LAG)		16.7 X feet meters	
g) Highest adjacent (finished) grade nex	t to building (HAG)		15.5 X feet meters	
<ul> <li>h) Lowest adjacent grade at lowest elev structural support</li> </ul>	ation of deck or stairs, including		15.5 X feet meters	
SECTION D - SU	IRVEYOR, ENGINEER, OR ARCH	ITECT CERTIFIC	CATION	
This certification is to be signed and sealed by a certify that the information on this Certificate statement may be punishable by fine or impri.  Were latitude and longitude in Section A prov	represents my best efforts to interpresonment under 18 U.S. Code, Section	et the data availab n 1001.	law to certify elevation information.  ble. I understand that any false  Check here if attachments.	
Certifier's Name	License Number			
F. WILLIAM FAIREY, IV	SC PLS 27446		on attach	
Title LICENSED PROFESSIONAL LAND SURVEYOR			Place	
Company Name SPARTINA LAND SURVEYING			Seal	
Address 602 MAIN STREET			· Here	
City		IP Code 9526	10 marine	
Signature f. With Ry 1		elephone 843) 340-0285	Ext.	
Copy all pages of this Elevation Certificate and	all attachments for (1) community offici	al, (2) insurance a	gent/company, and (3) building owner	
Comments (including type of equipment and I C2.a - FLOOR ELEVATION IS PROPOSED FROPOSED FLOOD MAP PANEL #45051 C CONVERSION FROM NGVD 1929 DATUM TNAD 1988 + 1' = NGVD 1929  C2.b - NO ACCESS TO SECOND FLOOR AT C2.e - HVAC PAD	PER BUILDING PLANS (NGVD 1929 0779K PLACES THIS PROPERTY II TO NAD 1988 DATUM:	DATUM) N FLOOD ZONE	AE-12 (NAD 1988 DATUM)	

#### BUILDING PHOTOGRAPHS

#### **ELEVATION CERTIFICATE**

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 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. 3458 WILDERNESS LANE

Policy Number:

City

MURRELLS INLET

State South Carolina 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.



Photo One

Photo One Caption FRONT VIEW Clear Photo One



Photo Two Caption **REAR VIEW**  Clear Photo Two

## **BUILDING PHOTOGRAPHS**

### **ELEVATION CERTIFICATE**

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., 3458 WILDERNESS LANE	o. Policy Number:		
City MURRELLS INLET	State South Carolina	ZIP Code 29576	Company NAIC Number

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

Photo Three Caption SIDE VIEW 1

Clear Photo Three



Photo Four