U.S. DEPARTMENT OF HOMELAND SECURITY II-12-20 Federal Emergency Management Agency National Flood Insurance Program ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

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

.

		RANCE COMPANY US		
A1. Building Owner's N MBSC PROPERTIES, 1	Policy Nur	nber:		
A2. Building Street Add Box No. 3740 LIMERICK DRIVE		t, Suite, and/or Bldg. No.) or P.O. Rou	te and Company t	NAIC Number:
City MYRTLE BEACH	\checkmark	State South Carolina 🖌	ZIP Code 29579 V	-
A3. Property Description	,	ers, Tax Parcel Number, Legal Descrip 426-01-01-0056)	tion, etc.)	
A4. Building Use (e.g.,	Residential, Non-Reside	ential, Addition, Accessory, etc.) RE	SIDENTIAL	
A5. Latitude/Longitude:	Lat. 33°43'28.7639"N	Long, 78°56'59.2823"W Ho	rizontal Datum: 🔲 NAD	1927 🗙 NAD 1983
A6. Attach at least 2 ph	otographs of the building	g if the Certificate is being used to obta	ain flood insurance.	
A7. Building Diagram N	umber 8			
A8. For a building with	a crawlspace or enclosu	re(s):		
a) Square footage	of crawlspace or enclose	ure(s) 1701.00 sq	ft	
b) Number of perm	anent flood openings in	the crawlspace or enclosure(s) within	1.0 foot above adjacent gra	ade <u>18</u>
c) Total net area of	flood openings in A8.b	2040.00 sq in REV. 10	0/08/2020	
d) Engineered flood	d openings? 🗌 Yes	X No		
A9. For a building with a	in attached garage:			
a) Square footage	of attached garage	300.00 sq ft	_	
b) Number of perma	anent flood openings in i	he attached garage within 1.0 foot abo	ove adjacent grade 3	
c) Totai net area of	flood openings in A9.b	357.00 sq in REV.	11/04/2020	
d) Engineered flood	l openings? 🔲 Yes	X No		
·····	SECTION B - FLC	OOD INSURANCE RATE MAP (FIR		
B1. NFIP Community Na HORRY COUNTY 4501	ame & Community Numt	ber B2. County Name HORRY		B3. State South Carolina
B4. Map/Panel B5. Number	Suffix B6. FIRM Inde Date	x B7, FIRM Panel B8, Flood Effective/ Zone(s) Revised Date	B9. Base Flood E (Zone AO, us	levation(s) e Base Flood Depth)
45051C0680 H	09-17-2003	08-23-1999 AE	16.5	
		ation (BFE) data or base flood depth e	entered in Item B9:	
B11. Indicate elevation	datum used for BFE in If	em B9: 🗵 NGVD 1929 🗌 NAVD 1	988 D Other/Source:	
B12 Is the building loca	ated in a Coastal Barrier	Resources System (CBRS) area or O	herwise Protected Area (DPA)? 🗌 Yes 🛛 No
Designation Date:		CBRS DOPA		
MA Form 086-0-33 (12/	4.0	Replaces all previous editions.		Form Page 1

ELEVATION CERTIFICATE IMPORTANT: In these spaces, copy the corresponding information from Section A.					OMB No. 1660-0008 Expiration Date: November 30, 2022 FOR INSURANCE COMPANY USE		
	Company NAIC Number						
MYRTLE BEACH		29579	Ĺ				
SECTION C	- BUILDING ELEVATION INFORM	MATION (SURVEY R	EQUIR	ED)	<u> </u>		
C1. Building elevations are based on: *A new Elevation Certificate will be	Construction Drawings*	Building Under Construuilding is complete.	uction*	X Finis	shed Construction		
C2. Elevations Zones A1-A30, AE, A Complete Items C2.a-h below acc	AH, A (with BFE), VE, V1V30, V (with ording to the building diagram specifi	h BFE), AR, AR/A, AR ied in Item A7. In Puer	/AE, AF to Rico	R/A1-A30, only, enter	AR/AH, AR/AO. meters.		
Benchmark Utilized: SCVRS	Vertical Date	um: <u>NGVD 29</u>					
Indicate elevation datum used for the	he elevations in items a) through h) b	elow.					
X NGVD 1929 ANAVD				<u> </u>			
Datum used for building elevations	must be the same as that used for th	ne BFE.	Cł	neck the m	easurement used		
ھر) Top of bottom floor (including b	asement, crawispace, or enclosure fl	oor)	13.4	🗙 feet	meters		
→b) Top of the next higher floor			18.2	.— ⊠ feet	 meters		
Bottom of the lowest horizontal	structural member (V Zones only)		N/A	 [□] feet	meters		
 Attached garage (top of slab) 		<u>,</u>	15.4	⊠ ⊠ feet	meters		
 Example 2 garage (up of each inerview) (Describe type of equipment and inerview) 	or equipment servicing the building d location in Comments)		18.3	⊠ feet	 meters		
f) Lowest adjacent (finished) grad			13.4	🗙 feet	meters		
g) Highest adjacent (finished) grad	•••		15.2	∑ feet	meters		
	t elevation of deck or stairs, including						
structural support		J 	<u>N/A</u>	🔲 feet	meters 🗌		
SECTION D	- SURVEYOR, ENGINEER, OR A	ARCHITECT CERTIF	ICATIC	N			
This certification is to be signed and sea I certify that the information on this Cert statement may be punishable by fine or	ificate represents my best efforts to in imprisonment under 18 U.S. Code, S	nterpret the data availa Section 1001.	/ law to able. I u	certify elev nderstand	vation information that any false		
Were latitude and longitude in Section A	A provided by a licensed land surveyo	or? 🖾 Yes 🗋 No		Check her	re if attachments.		
Certifier's Name MICHAEL S. CULLER, III	License Number 29114				Lac duller it		
Title PRESIDENT		/		р	lace		
Company Name CULLER LAND SURVEYING III, INC	\checkmark	<u></u>		, je	seal		
Address 1010 5TH AVE NW EXT.				N	lere		
City SURFSIDE BEACH	State South Carolina	ZIP Code 29575		<i>\b</i> .			
Signature Machine & Calle	Date 09-14-2020	Telephone (843) 238-2333	Ext.				
Copy all pages of this Elevation Certificate	and all attachments for (1) community	y official, (2) insurance	agent/c	ompany, ar	nd (3) building owr		
Comments (including type of equipment TEM C2-A REFERS TO FLOOR LEVEL			VEL OF	HVAC SY	STEM		
	·····				Form Page 2		

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

Replaces all previous editions.

Form Page 2 of 6

ELEVATION CERTIFICATE			OMB No. 1660-0008 Expiration Date: Nov	
IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Un 3740 LIMERICK DRIVE	it, Suite, and/or Bidg. No.) or P.	O. Route and Box No.	Policy Number:	
City // // // // // // // // // // // // //	State South Carolina	ZIP Code 29579	Company NAIC Nu	nber
SECTION E BU	ILDING ELEVATION INFOR FOR ZONE AO AND ZONE	MATION (SURVEY NO A (WITHOUT BFE)	T REQUIRED)	
For Zones AO and A (without BFE), compl complete Sections A, B,and C. For Items E enter meters.	ete Items E1–E5. If the Certifica 1–E4, use natural grade, if ava	ite is intended to support ilable. Check the measur	a LOMA or LOMR-F rement used. In Puerto	equest, Rico only,
 E1. Provide elevation information for the fit the highest adjacent grade (HAG) and a) Top of bottom floor (including base 	the lowest adjacent grade (LAC	ate boxes to show wheth G).	er the elevation is abo	ve or below
crawlspace, or enclosure) is b) Top of bottom floor (including base	· · · · · · · · · · · · · · · · · · ·	feet [] mete	_	
crawlspace, or enclosure) is E2. For Building Diagrams 6–9 with perma		feet mete		
the next higher floor (elevation C2.b in the diagrams) of the building is		feet [] mete		
E3. Attached garage (top of slab) is		[] feet [] mete		
E4. Top of platform of machinery and/or e- servicing the building is	quipment	feet 🗌 mete	ers 🗌 above or 🔲 I	pelow the HAG.
E5. Zone AO only: If no flood depth number floodplain management ordinance?		pottom floor elevated in a	ccordance with the cor	nmunity's
SECTION F - PROI	PERTY OWNER (OR OWNER'S	S REPRESENTATIVE)	ERTIFICATION	
The property owner or owner's authorized community-issued BFE) or Zone AO must Property Owner or Owner's Authorized Rep	sign here. The statements in Se	ections A, B, and E for Z ctions A, B, and E are co	one A (without a FEM/ prrect to the best of my	A-issued or knowledge.
Address	City	ý Š	State Z	IP Code
	······································			
Signature	Da	le i	elephone	
Comments				
			Check here	f attachments.
FEMA Form 086-0-33 (12/19)	Replaces all previous	s editions.		Form Page 3 of 6

ELEVATION CERTIFICATE	OMB No. 1660-0008 Expiration Date: November 30, 2022		
MPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, S 3740 LIMERICK DRIVE	KNo. Policy Number:		
City MYRTLE BEACH	State South Carolina	ZIP Code 29579	Company NAIC Number
SECTI	ON G - COMMUNITY INF	ORMATION (OPTI	ONAL)
	n Certificate. Complete the nter meters. ken from other documenta	e applicable item(s)	and sign below. Check the measurement signed and sealed by a licensed surveyor,
data in the Comments area below.)			dicate the source and date of the elevation t a FEMA-issued or community-issued BFE)
or Zone AO. G3. The following information (Items G4-	-		
			LOG Date Continents of
G4. Permit Number	G5. Date Permit Issued	3	G6. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:] New Construction [] S	Substantial Improver	nent
G8. Elevation of as-built lowest floor (including of the building:	g basement)		ifeet imeters Datum
G9. BFE or (in Zone AO) depth of flooding at the building site:			🗋 feet 🗌 meters Datum
G10. Community's design flood elevation:			ifeet imeters Datum
ocal Official's Name		Title	
Community Name		Telephone	
Signature	<u> </u>	Date	
Comments (including type of equipment and log	cation, per C2(e), if applic	able)	
			Check here if attachments.
EMA Form 086-0-33 (12/19)	Replaces all previo	ous editions.	Form Page 4 of

	•		
ELEVA	TION	CERTIF	ICATE

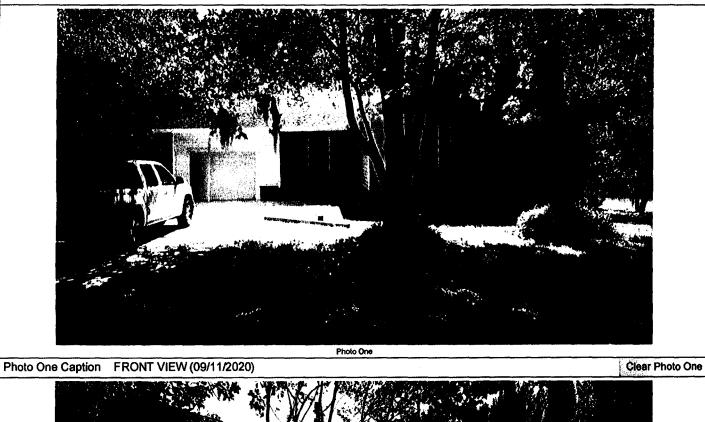
BUILDING PHOTOGRAPHS

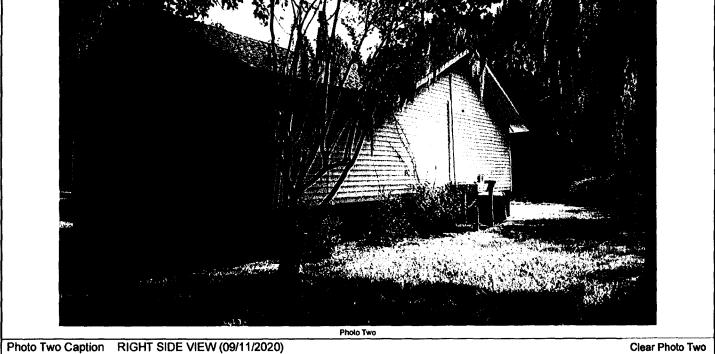
See Instructions for Item A6.

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

IMPORTANT: I	n these spaces, copy the	FOR INSURANCE COMPANY USE Policy Number:		
Building Street	Address (including Apt., Un K DRIVE //			
City MYRTLE BEAC	ж	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.





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

Replaces all previous editions.

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

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

IMPORTANT:	: In these spaces, copy the	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3740 LIMERICK DRIVE				Policy Number:	
City MYRTLE BE/	ACH	State South Carolina	ZIP Code //	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.

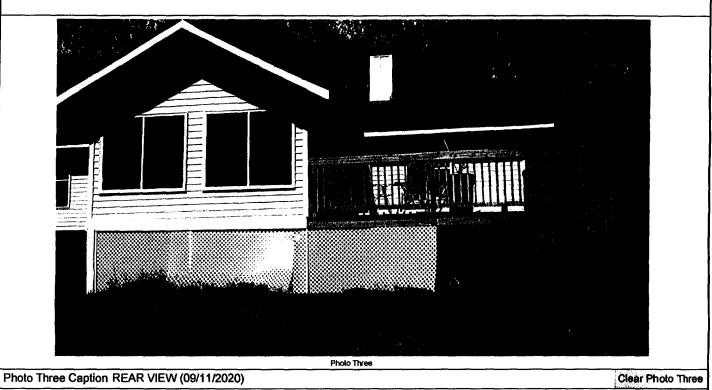


Photo Four **Clear Photo Four**

Photo Four Caption LEFT SIDE VIEW (09/11/2020)

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

Replaces all previous editions.

Form Page 6 of 6