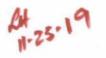
U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program



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 Terry Lynn Gore A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg, No.) or P.O. Route and Box No. S082 Steamer Trace Road City State ZIP Code 29527 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 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. 33-48-15-76 Long79-04-05-29 Horizontal Datum: NAD 1927 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 drawlspace or enclosure(s): 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 the attached garage within 1.0 foot above adjacent grade N/A d) Engineered flood openings in the attached garage within 1.0 foot above adjacent grade N/A d) Engineered flood openings in the attached garage within 1.0 foot above adjacent grade N/A d) Engineered flood openings in the attached garage within 1.0 foot above adjacent grade N/A c) Total net area of flood openings in the attached garage within 1.0 foot above adjacent grade N/A d) Engineered flood openings in A9.b 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 ft b) Number of permanent flood openings in B9. Sq No SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Number B2. Countly Name B3. State Squith Carolina Date Squith Carolina B2. Squith Carolina B3. State Squith Carolina B4. Map/Panel Date Squith Carolina B4. Map/Panel Date Squith Carolina B4. Map/Panel B5. Suffix D6. FIRM Index Date Squith Carolina B4. Map/Panel B5. Suffix D6. FIRM Index D6. Squith Caro	SECTION A – PROPERTY INFORMATION						FOR INSURANCE COMPANY US				
Box No. State					25.00				Policy Numb	ber:	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PIN# 381-02-04-0003 A6. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A6. Latitude/Longitude: Lat. 33-48-15.76 Long. 79-04-05.29 Horizontal Datum: NAD 1927 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) 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? Yes No A9. For a building with an attached garage a) Square footage of attached garage 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 the attached garage within 1.0 foot above adjacent grade N/A c) Total net area of flood openings in the attached garage within 1.0 foot above adjacent grade N/A c) Total net area of flood openings in the attached garage within 1.0 foot above adjacent grade N/A c) Total net area of 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 B1. NFIP Community Name & Community Number B2. County Name B3. State South Carolina B4. Map/Panel Number B5. Suffix B6. FIRM Index Date Date Date Date Date Date Date Date	Box No.		including Apt., Unit,	Suite, and	d/or Bldg. No.)	or P.O. I	Route and	1	Company N	AIC Number:	
A6. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) 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) A9. Number of permanent flood openings in the crawlspace or enclosure(s)		1	2			Carolina					
A6. Latitude/Longitude: Lat. 33-48-15.76			and Block Numbers	Tax Par	cel Number, L	egal Des	cription, e	etc.)			
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): 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?	12.20					etc.)			T NAD 4	007 🗔 NA	2.4000
b) Number of permanent flood openings in the crawIspace 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? Yes 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? Yes No SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name Horry B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date Number A5051C0512 H 09-17-2003 08-23-1999 B8. Flood Zone(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: Yers South Carolina South Carol	A7. Building Dia A8. For a building	agram Numbering with a craw	5 Ispace or enclosure(s):	ficate is being		obtain floo				
B1. NFIP Community Name & Community Number Horry County 450104 B2. County Name Horry B3. State South Carolina B4. Map/Panel Number B5. Suffix Date Date Date Date Date Number B6. FIRM Index Date Date Date Date Date Date Date Date	c) Total net d) Engineer A9. For a building a) Square for b) Number of	area of flood of red flood opening g with an attact potage of attact of permanent flood of	openings in A8.b ings?] No	N/A sq i	re(s) with	nin 1.0 foo			de N/A	
Horry County 450104 Horry County 450104 Horry South Carolina B4. Map/Panel Number B5. Suffix Date 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: FIS Profile FIRM Community Determined Other/Source: B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes Notes of the Base Flood Elevation (BFE) area or Otherwise Protected Area (OPA)? Yes Notes or Otherwise Protected Area (OPA)? Yes Notes or Otherwise Protected Area (OPA)? Yes Notes or Otherwise Protected Area (OPA)? Yes Yes	D. 11555	SI	ECTION B - FLOOD	INSUR	ANCE RATE	MAP (F	IRM) INF	ORMAT	TION		
Number Date Effective Revised Date OB-17-2003 Date Effective Revised Date OB-23-1999 Date Date Effective Revised Date OB-23-1999 Date O			Community Number			Name					а
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No	Number		Date	Eff Re	fective/ evised Date	Zone(s)		(Zc	ise Flood Elevene AO, use B	vation(s) Base Flood D	epth)
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No	B10. Indicate the	source of the	Base Flood Elevation Community Dete	n (BFE) d	lata or base flo	ood depth	n entered	in Item I	39:		
Designation Date:	B11. Indicate ele	vation datum u	sed for BFE in Item	B9: ⊠ N	IGVD 1929 [NAVD	1988 [Othe	er/Source:		
	B12 Is the building Designation	ng located in a	Coastal Barrier Res			area or	Otherwise	Protect	ted Area (OP/	A)? Tyes	⊠ No

ELEVATION CERTIFICATE

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 3582 Steamer Trace Road	, Suite, and/or Bldg. No.) or P.O. Ro	oute and Box No.	Policy	Number:				
City Conway		P Code 527	Comp	any NAIC	Number			
SECTION C - B	UILDING ELEVATION INFORMA	ATION (SURVEY I	REQUIR	ED)				
C1. Building elevations are based on: [*A new Elevation Certificate will be red		uilding Under Const	ruction*	X Finis	hed Construction			
C2. Elevations – Zones A1–A30, AE, AH, Complete Items C2.a–h below accord Benchmark Utilized: SC VRS Network	A (with BFE), VE, V1–V30, V (with ing to the building diagram specified	BFE), AR, AR/A, Al	rto Rico	only, enter	AR/AH, AR/AO. meters.			
Indicate elevation datum used for the	elevations in items a) through h) be	ow.						
✓ NGVD 1929 ☐ NAVD 198	88 Other/Source:							
Datum used for building elevations mu	ist be the same as that used for the	BFE.						
Tan of bottom floor (including base					easurement used.			
a) Top of bottom floor (including base	ment, crawispace, or enclosure floo	or)	20.30	× feet	meters			
b) Top of the next higher floor			30.30	× feet	meters			
c) Bottom of the lowest horizontal stru	ctural member (V Zones only)		N/A	× feet	meters			
d) Attached garage (top of slab)			N/A	× feet	meters			
 Lowest elevation of machinery or e (Describe type of equipment and lo 	quipment servicing the building cation in Comments)		16.70	× feet	meters			
1) Lowest adjacent (finished) grade no	ext to building (LAG)		8.10	× feet	meters			
g) Highest adjacent (finished) grade n	ext to building (HAG)		9.60	× feet	meters			
 Lowest adjacent grade at lowest ele structural support 		10	10.00		meters			
SECTION D - S	SURVEYOR, ENGINEER, OR AR	CHITECT CERTIF	ICATIO	N				
This certification is to be signed and sealed I certify that the information on this Certifica statement may be punishable by fine or implement Were latitude and longitude in Section A pro-	by a land surveyor, engineer, or are te represents my best efforts to inte inisonment under 18 U.S. Code, Sec	chitect authorized burpret the data availation 1001.	y law to o able. I un	certify elev	ation information. hat any false if attachments.			
Certifier's Name			_ U,	CHECK HER	attacriments.			
Ray R. Eshelman	License Number 22753			- 1	1111127			
Title			Н	1970	***			
PLS				DI	100 M. S.			
Company Name			- :	12	ace			
Crescent Moon Land Surveying, Inc.	V			//3	éal-			
Address 643 Hwy 701 S.					oro			
City	0			5/3	7/19			
Loris	State South Carolina	ZIP Code 29569		2017	Grantill's			
Signature			L	34.7	11772			
18ME	Date 05-21-2019	Telephone (843) 716-6021	Ext.					
Copy all pages of this Elevation Certificate and	all attachments for (1) community of	ficial, (2) insurance a	agent/con	npany, and	(3) building owner			
Comments (including type of equipment and	location, per C2(e), if applicable)				. ,			
andscaping not in place at time of survey C2(e) A/C unit located on a platform.	The state of the s							
and ocated on a platform.								

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy t	he corresponding information for	rom Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt. 3582 Steamer Trace Road	Unit, Suite, and/or Bldg. No.) or F	P.O. Route and Box No.	Policy Number:
City Conway	State South Carolina	ZIP Code	Company NAIC Number
SECTION E -	BUILDING ELEVATION INFOR		OT REQUIRED)
For Zones AO and A (without BFE), co- complete Sections A, B,and C. For Iten enter meters.	mplete Items E1–E5. If the Certific	ate is intended to suppo	rt a LOMA or LOMR-F request, urement used. In Puerto Rico only,
E1. Provide elevation information for the highest adjacent grade (HAG) a) Top of bottom floor (including by	and the lowest adjacent grade (LA	riate boxes to show whe G).	ther the elevation is above or below
crawlspace, or enclosure) is b) Top of bottom floor (including b		feet _ me	eters above or below the HAG.
crawlspace, or enclosure) is	asement,	feet me	eters above or below the LAG.
E2. For Building Diagrams 6–9 with pe the next higher floor (elevation C2.	rmanent flood openings provided i	n Section A Items 8 and	/or 9 (see pages 1–2 of Instructions),
the diagrams) of the building is		feet me	eters above or below the HAG.
E3. Attached garage (top of slab) is		feet me	eters above or below the HAG.
E4. Top of platform of machinery and/o servicing the building is	er equipment	feet me	eters above or below the HAG.
E5. Zone AO only: If no flood depth nur floodplain management ordinance?	mber is available, is the top of the	bottom floor elevated in n. The local official mu	
SECTION F - PF	ROPERTY OWNER (OR OWNER		
The property owner or owner's authorize	ed representative who completes (Postions A. D. and E.C.	
The state of the s	ist sign here. The statements in Se	ections A, B, and E are o	correct to the best of my knowledge.
Property Owner or Owner's Authorized	Representative's Name		
Address	Cit	у	State ZIP Code
Signature	Da	te .	Tologhama
51	- Da		Telephone
Comments	V		
			9 (9
			Check here if attachments.

ELEVATION CERTIFICATE

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

MPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt. 3582 Steamer Trace Road /	No. Policy Number:		
City	State South Carolina	ZIP Code 29527	Company NAIC Number
	SECTION G - COMMUNITY IN	NFORMATION (OPTIC	ONAL)
The local official who is authorized by Sections A, B, C (or E), and G of this I used in Items G8–G10. In Puerto Ricc	Elevation Certificate. Complete t	ne community's floodp he applicable item(s) a	lain management ordinance can complete and sign below. Check the measurement
G1. The information in Section C engineer, or architect who is data in the Comments area	authorized by law to certify elev	tation that has been si ration information. (Ind	igned and sealed by a licensed surveyor, licate the source and date of the elevation
G2. A community official comple or Zone AO.	ted Section E for a building loca	ted in Zone A (without	a FEMA-issued or community-issued BFE)
G3. The following information (It	ems G4-G10) is provided for co	mmunity floodplain ma	anagement purposes.
G4. Permit Number	G5. Date Permit Issu	ed	G6. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:		Substantial Improvem	nent
 Elevation of as-built lowest floor of the building: 	(including basement)		feet meters Datum
G9. BFE or (in Zone AO) depth of flo	oding at the building site:		feet meters Datum
G10. Community's design flood elevat	ion:		feet meters Datum
Local Official's Name		Title	
Community Name		Telephone	
Signature		Date	
Comments (including type of equipmer	nt and location, per C2(e), if app	licable)	
			Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

FOR INSURANCE COMPANY USE 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. Policy Number:

3582 Steamer Trace Road

City Conway State

South Carolina

ZIP Code 29527

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 05/20/2019

Clear Photo One

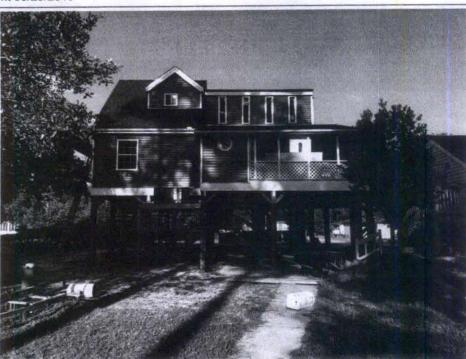


Photo Two Caption Rear 05/20/2019

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.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

State ZIP Code Company NAIC Number:

South Carolina 29527

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 Right 05/20/2019

Clear Photo Three

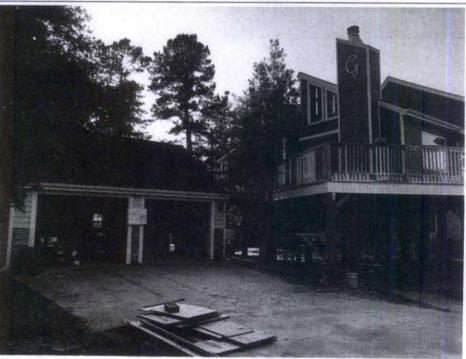


Photo Four Caption Left 05/20/2019

Photo Four

Clear Photo Four