FP 57119

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

ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

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

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

	SECTION A - P	ROPERTY INFORMATION	FC	R INSURANCE COMPANY USE
A1. Buildir	g Owner's Name Jamestow	n Baptist Church	Pc	licy Number:
A2. Buildin Box N		, Unit, Suite, and/or Bldg. No.) or P ryside Dr	CO. Route and Co	mpany NAIC Number:
City Conwa	y V	State South Caro		Code 527
A3. Proper	ty Description (Lot and Block Nu PIN: 380-07-02-0010 V	umbers, Tax Parcel Number, Legal	Description, etc.)	/
 A5. Latitud A6. Attach A7. Buildin A8. For a b a) Squ b) Nur c) Tota d) Eng A9. For a b a) Squ b) Nur 	e/Longitude: Lat. <u>N 33° 48' 03.</u> at least 2 photographs of the bug g Diagram Number <u>1B</u> wilding with a crawlspace or end are footage of crawlspace or end ber of permanent flood openings al net area of flood openings in A ineered flood openings? <u>1</u> wilding with an attached garage: are footage of attached garage	hilding if the Certificate is being use closure(s): 0 gs in the crawlspace or enclosure(s 10 gs in the crawlspace or enclosure(s 10 gs in the attached garage within 1.0	Horizontal Datum: [d to obtain flood insuranc ft a) within 1.0 foot above ad	e. jacent grade0
d) Eng		Yes X No		
		FLOOD INSURANCE RATE MA	1	
B1. NFIP C Horry Cour	ommunity Name & Community I ty 450104	Number B2. County Na Horry County	me	B3. State South Carolina
B4. Map/Par Number 45051C0511	Date	Effective/ Revised_Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 21
E11. Indica B12. Is the	S Profile In the Community of the Second Sec	Elevation (BFE) data or base flood inity Determined Other/Source E in Item B9: NOVD 1929 O arrier Resources System (CBRS) a	NAVD 1988 Other	/Source

ELEVATION CERTIFICATE			OMB No. 1660-0008 Expiration Date: November 30, 2018 FOR INSURANCE COMPANY USE	
IMPORTANT: In these spaces, copy th				
Building Street Address (including Apt., U 4101 J & S Cou		.O. Route and Box No.	Policy Number:	
City Conway	State South Carolina	ZIP Code 29527	Company NAIC Number	
SECTION C	- BUILDING ELEVATION INFO	ORMATION (SURVEY F	REQUIRED	
C1. Building elevations are based on:	Construction Drawings*	Building Under Const		
*A new Elevation Certificate will be				
C2. Elevations – Zones A1–A30, AE, A Complete Items C2.a–h below ac	ording to the building diagram sp	ecified in Item A7. In Pue	R/AE, AR/A1–A30, AR/AH, AR/AO. rto Rico only, enter meters.	
Benchmark Utilized: GPS on Real	the second s	Datum: NAVD88		
Indicate elevation datum used for t		h) below.		
NGVD 1929 NAVD		or the DEE		
Datum used for building elevations	must be the same as that used in	of the BFE.	Check the measurement used.	
a) Top of bottom floor (including b	asement, crawlspace, or enclosu	re floor)26. 14	x feet ☐ meters	
b) Top of the next higher floor		<u>N/A</u>	X feet meters	
c) Bottom of the lowest horizontal	structural member (V Zones only) <u>N/A</u>	x feet meters	
d) Attached garage (top of slab)		N/A V	X feet meters	
e) Lowest elevation of machinery (Describe type of equipment an	or equipment servicing the buildir d location in Comments)	ng <u>24</u> . <u>48</u>		
f) Lowest adjacent (finished) grad	le next to building (LAG)	22.29	X feet meters	
g) Highest adjacent (finished) grad		23, 11	✓ x feet meters	
 h) Lowest adjacent grade at lowes structural support 			X feet meters	
SECTION	- SURVEYOR, ENGINEER, C	R ARCHITECT CERTI	FICATION	
This certification is to be signed and se I certify that the information on this Cen statement may be punishable by fine of	aled by a land surveyor, engineer tificate represents my best efforts	, or architect authorized I to interpret the data avai	by law to certify elevation information.	
Were latitude and longitude in Section			Check here if attachments.	
Certifier's Name	License Num	ber	1 Martine 1	
Terry M. Watson	7168			
Title President	1		st.C	
Company Name			Place	
Terry M. Watson RLS Land Surveyors			- Seal Here	
Address 312 Laurel Street			- Neie	
City Conway	State South Carolin	ZIP Code a 29526	- TEN	
Signature	Date 8/12	Telephone (843) 602-0796	No. 2 States	
Copy all pages of this Elevation Certificat	e and all attachments for (1) comm	nunity official, (2) insurance	e agent/company, and (3) building owner.	
Comments (including type of equipmen Elevations were determined using Real			ng NGS Software	
The lowest piece of machinery is the A/	C unit			

ÉL	EVATION CERTIFICATE				OMB No. 1660 Expiration Date	-0008 :: November 30, 2018
IMPORTANT: In these spaces, copy the corresponding information from Section A.					FOR INSURANCE COMPANY USE	
	ilding Street Address (including Apt., Unit, S 4101 J & S Countrys	Suite, and/or Bldg. No.) or P.		ox No.	Policy Number	
City		State	ZIP Code		Company NAI	C Number
Co	nway	South Carolina	29527	2.2.2.4		
1		DING ELEVATION INFORM OR ZONE AO AND ZONE A			REQUIRED)	
con	r Zones AO and A (without BFE), complete mplete Sections A, B,and C. For Items E1–E er meters.					
E1.	 Provide elevation information for the follow the highest adjacent grade (HAG) and the a) Top of bottom floor (including baseme 	e lowest adjacent grade (LAC	S).			
	crawlspace, or enclosure) is		[] feet		above o	below the HAG.
	b) Top of bottom floor (including baseme crawlspace, or enclosure) is	nı,	[] feet	meters	above o	below the LAG.
E2.	For Building Diagrams 6–9 with permaner the next higher floor (elevation C2.b in	nt flood openings provided in	Section A Items	s 8 and/or 9	9 (see pages 1-	-2 of Instructions),
	the diagrams) of the building is		feet	meters	above o	below the HAG.
E3.	Attached garage (top of slab) is		feet	meters	above o	below the HAG.
E4.	. Top of platform of machinery and/or equip servicing the building is	pment				□ □ below the HAG.
E5.	Zone AO only: If no flood depth number is		ottom floor eleva	ated in acc	ordance with th	ne community's
	floodplain management ordinance?	Yes No Unknown	. The local officient	cial must c	ertify this inform	nation in Section G.
	SECTION F - PROPER	RTY OWNER (OR OWNER'S	REPRESENT	ATIVE) CE	RTIFICATION	
The	e property owner or owner's authorized repr nmunity-issued BFE) or Zone AO must sigr	resentative who completes S n here. The statements in Se	ections A, B, an ctions A, B, and	d E for Zor E are corre	ne A (without a ect to the best	FEMA-issued or of my knowledge.
Pro	operty Owner or Owner's Authorized Repres	sentative's Name			Costie	EST RAY
Add	dress	City	1	Sta	te	ZIP Code
Sig	nature	Dat	e	Tele	ephone	
Cor	mments					
					Check	here if attachments.

ELEVATION CERTIFICATE	OMB No. 1660-0008 Expiration Date: November 30, 2018		
MPORTANT: In these spaces, copy t	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt. 4101 J & S Co	Policy Number:		
City Conway	State South Carolina	ZIP Code 29527	Company NAIC Number
	SECTION G - COMMUNITY IN	FORMATION (OPTIONAL	-)
engineer, or architect who is	Elevation Certificate. Complete the only, enter meters. was taken from other documenta authorized by law to certify eleva	e applicable item(s) and si ation that has been signed	nanagement ordinance can complete ign below. Check the measurement I and sealed by a licensed surveyor, the source and date of the elevation
G2. A community official complet or Zone AO.		ed in Zone A (without a FE	MA-issued or community-issued BFE)
G3. The following information (Ite	ems G4–G10) is provided for com	nmunity floodplain manage	ment purposes.
G4. Permit Number	G5. Date Permit Issue	d G6.	. Date Certificate of Compliance/Occupancy Issued
G8. Elevation of as-built lowest floor (including basement) of the building:		[] fe	eet in meters Datum eet in meters Datum eet in meters Datum
Local Official's Name		Title	COLLES PRIZE
Community Name		Telephone	
Signature		Date	
Comments (including type of equipmen	it and location, per C2(e), if applie	cable)	
			Check here if attachments

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ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

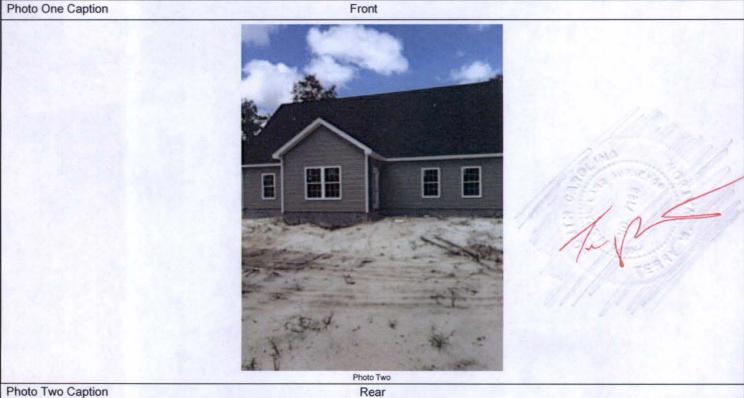
OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4101 J & S Countryside Dr			Policy Number:
City	State	ZIP Code	Company NAIC Number
Conway	South Carolina	29527	

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 Caption



FEMA Form 086-0-33 (7/15)

Replaces all previous editions.

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS Continuation Page

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

	9 -	Expiration Date. November 50, 2010	
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. 4101 J & S Countryside Dr			
State	ZIP Code	Company NAIC Number	
South Carolina	29527		
3	Apt., Unit, Suite, and/or Bldg. No.) or F S Countryside Dr State	Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. S Countryside Dr State ZIP Code	

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.

