ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for	r (1) community officia	1 (2) incurance agent/compa	n_{1} and	4/2	A huilding owner
COPY all pages of this Lievation Certificate and all attachments for		j community onicia	1. LC	/ moulance agenveompai	iy, and	コーレ	

		TION A – PROPERTY		. /			RANCE COMPANY USE
A1. Building Owne						Policy Num	
MICHAEL J. & RHONDA M. DORMAN							
		cluding Apt., Unit, Suit	te, and/o	r Bldg. No.) o	r P.O. Route and	Company N	IAIC Number:
922 FOLLY ROAD	1						
City				State		ZIP Code	
MYRTLE BEA	CH			South C	arolina	29588	
A3. Property Desc J.W. BELLAMY LC	• •	nd Block Numbers, Ta 427-15-03-0003)	ax Parcel	l Number, Leg	gal Description, etc	c.)	
A4. Building Use (e.g., Resider	ntial, Non-Residential,	Addition	, Accessory,	etc.) RESIDENTI	AL	
A5. Latitude/Longi	tude: Lat. 3	3-41-53.5	Long. 0	78-58-08.8	Horizonta	I Datum: 🔲 NAD ′	1927 🗶 NAD 1983
A6. Attach at least	: 2 photograp	hs of the building if the	e Certific	ate is being u	ised to obtain flood	d insurance.	
A7. Building Diagr	am Number	<u>1A</u>					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawl	space or enclosure(s)			N/A sq ft		
b) Number of	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ade <u>N/A</u>
c) Total net ar	ea of flood o	penings in A8.b		N/A sq ir	I.		
d) Engineered	I flood openir	ngs? 🗌 Yes 🗴 N	٩o				
A9. For a building v	with an attach	ned garage:					
a) Square foot	age of attach	ned garage		495.00 sq ft			
b) Number of	permanent flo	ood openings in the at	tached g	arage within	1.0 foot above adja	acent grade N/A	
c) Total net ar	ea of flood o	penings in A9.b		N/A_sq	in		
d) Engineered	flood openin	igs? 🗌 Yes 🗶 N	10				
	SE	ECTION B – FLOOD	INSURA		MAP (FIRM) INF	ORMATION	1
B1. NFIP Commun	ity Name & C	Community Number		B2. County	Name		B3. State
HORRY COUNTY	450104			HORRY CO	DUNTY		South Carolina
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	levation(s) e Base Flood Depth)
45051C 0680	н	09-17-2003	08-23-	1999	AE	6'	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:							
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							
Designation	Date:		CBRS	ΟΡΑ			

			OMB No. 1660-0008 Expiration Date: November 30, 2022		
IMPORTANT: In these spaces, copy the corresp	onding information from Sec	tion A.	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, 922 FOLLY ROAD			Policy Number:		
City MYRTLE BEACH	State ZIP (South Carolina 2958		Company NAIC Number		
SECTION C – BUILDI	NG ELEVATION INFORMAT	ION (SURVEY R	EQUIRED)		
 C1. Building elevations are based on: Con *A new Elevation Certificate will be required will be req	Instruction Drawings* Build when construction of the buildin a BFE), VE, V1–V30, V (with BF the building diagram specified in Vertical Datum: Vertical Datum: ons in items a) through h) below Other/Source: he same as that used for the B crawlspace, or enclosure floor) member (V Zones only) ent servicing the building in Comments) building (LAG) building (HAG)	ling Under Construing is complete. E), AR, AR/A, AR/ In Item A7. In Puert NGVD 29 v.	AE, AR/A1–A30, AR/AH, AR/AO. AE, AR/A1–A30, AR/AH, AR/AO. No Rico only, enter meters. Check the measurement used. 7.5 ¥ feet meters 18.1 ¥ feet meters N/A feet meters 6.9 ¥ feet meters 16.1 ¥ feet meters 5.3 ¥ feet meters 5.9 ¥ feet meters		
structural support	-		5.8 x feet meters		
SECTION D – SURV	EYOR, ENGINEER, OR ARC	HITECT CERTIF	ICATION		
This certification is to be signed and sealed by a l I certify that the information on this Certificate rep statement may be punishable by fine or imprison Were latitude and longitude in Section A provided	resents my best efforts to intern ment under 18 U.S. Code, Sect	pret the data availa	 Iaw to certify elevation information. able. I understand that any false Check here if attachments. 		
Certifier's Name J. JASON COX	License Number SC# 26950				
Title OWNER Company Name COX SURVEYORS & ASSOCIATES, LLC			No. 26950		
Address 4325 DICK POND ROAD, SUITE A			SURVE OF JUL		
City MYRTLE BEACH	State South Carolina	ZIP Code 29588	ASON COM		
Signature J. Jas Cox	Date 12-22-2020	Telephone (843) 650-1500	Ext.		
Copy all pages of this Elevation Certificate and all a	ttachments for (1) community off	icial, (2) insurance	agent/company, and (3) building owner.		
Comments (including type of equipment and locat C2e is the air conditioner pad located on the left, cooled). C2b is the finished floor of the heated &	side of the house. C2a is the fi	nished floor of the	non-living space (not heated or		

OMB No.	1660-0	0008		
Expiration	Date:	November	30,	2022

IMPORTANT: In these spaces, copy the corresponding	g information from	n Section A.	FOR INSURANCE COMP	ANY USE
Building Street Address (including Apt., Unit, Suite, and/o 922 FOLLY ROAD	r Bldg. No.) or P.O	. Route and Box No.	Policy Number:	
City Sta MYRTLE BEACH Sc	ate outh Carolina	ZIP Code 29588	Company NAIC Number	
SECTION E – BUILDING ELEN FOR ZONE		ATION (SURVEY N (WITHOUT BFE)		
For Zones AO and A (without BFE), complete Items E1–E complete Sections A, B,and C. For Items E1–E4, use nat enter meters.				
E1. Provide elevation information for the following and ch the highest adjacent grade (HAG) and the lowest adj			ether the elevation is above or b	elow
 a) Top of bottom floor (including basement, crawlspace, or enclosure) is b) Top of bottom floor (including basement) 		[] feet [] m	neters 🔲 above or 🗌 below t	the HAG.
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet 🗌 m	neters 🔲 above or 🗌 below t	the LAG.
E2. For Building Diagrams 6–9 with permanent flood oper the next higher floor (elevation C2.b in the diagrams) of the building is	inings provided in S		d/or 9 (see pages 1–2 of Instruc neters	
E3. Attached garage (top of slab) is			neters above or below t	
E4. Top of platform of machinery and/or equipment servicing the building is			neters above or below t	
E5. Zone AO only: If no flood depth number is available,		ottom floor elevated in		ty's
SECTION F – PROPERTY OWNE	R (OR OWNER'S	REPRESENTATIVE	:) CERTIFICATION	
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	who completes Se statements in Sec	tions A, B, and E fo tions A, B, and E are	r Zone A (without a FEMA-issue	edge.
Property Owner or Owner's Authorized Representative's	Name			
Address	City		State ZIP Coo	je
Signature	Date		Telephone	
Comments				
			COX SURVEYORS & ASSOCIAT ER: LLC No. 4099	NOIZES
			Check here if attac	hments.

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, St 922 FOLLY ROAD	Policy Number:		
City MYRTLE BEACH	State South Carolina	ZIP Code 29588	Company NAIC Number
	ON G – COMMUNITY INFO		
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete the a		
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)			
G2. A community official completed Section or Zone AO.	ion E for a building located in	n Zone A (without a FEN	MA-issued or community-issued BFE)
G3. The following information (Items G4-	-G10) is provided for commu	unity floodplain manager	nent purposes.
G4. Permit Number	G5. Date Permit Issued	G6.	Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:] New Construction 🗌 Sub	ostantial Improvement	
G8. Elevation of as-built lowest floor (including of the building:	g basement)	fee	et 🗌 meters Datum
G9. BFE or (in Zone AO) depth of flooding at	the building site:	fee	et 🗌 meters Datum
G10. Community's design flood elevation:		fee	et 🗌 meters Datum
Local Official's Name	Tit	le	
Community Name	Te	lephone	
Signature	Da	ite	
Comments (including type of equipment and log	cation, per C2(e), if applicab	yle)	
			Check here if attachments.

building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. Policy Number: 2922 FOLLY ROAD Company NAIC Number Sity State ZIP Code WYRTLE BEACH South Carolina 29588 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 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. State State State State State State State State Using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Ife 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. State State State State State State<				
22 FOLLY ROAD State ZIP Code Company NAIC Number WRTLE BEACH South Carolina 29588 Company NAIC Number Wr using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for term A6. Identify all photographs with date laken; "Front Mee" and "Real View" and if required, region is obtained by the contraction with the test laken; "Front Mee" and "Real View" and if required, region is obtained by the contraction with more photographs that will fit on this page, use the Continuation Page. The Sole View, 'When application, etc. If automating more photographs that will fit on this page, use the Continuation Page. Exception Page. Provide View and Carolina The sole of the food opening or view, as incleated in Section A8. If automating more photographs that will fit on this page, use the Continuation Page. Exception Page. Photo One Capilar Fort View; 12/21/202 Ceremotographs Photo One Capilar Fort View; 12/21/202 Ceremotograph Photo One Capilar Fort View; 12/21/202 Ceremotograph Contraction of the page. Exception Carolina Caroli				FOR INSURANCE COMPANY USE
WRTLE BEACH South Carolina 29898	Building Street Address (including Apt., 922 FOLLY ROAD	Unit, Suite, and/or Bldg. No.) or P	O. Route and Box No.	Policy Number:
fi using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for flem A6, iteratify all photographs with date laken. 'Front View' and 'Rear View', and, if required, 'Front Side View' and 'Net Side View' when applicatible, photographs must show the foundation with ingresentative examples of the flood openings or vertes, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page. The One Caption Prove the section A8. If submitting more photographs than will fit on this page, use the Continuation Page. The One Caption Prove the section A8. If submitting more photographs than will fit on this page, use the Continuation Page.	City	State	ZIP Code	Company NAIC Number
instructions for Item A6. Identify all photographs with date taken, "Front Vew" and "Raar View"; and "fraquired. "Right Side View" and "that 'Vew and the Soundation with in presentative 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.	MYRTLE BEACH	South Carolina	29588	
	instructions for Item A6. Identify all pho "Left Side View." When applicable, pl	btographs with date taken; "Front V hotographs must show the found bmitting more photographs than w	/iew" and "Rear View"; an ation with representative	d, if required, "Right Side View" and examples of the flood openings or
	Photo One Caption Front View; 12/21	//2020		Clear Photo On
hoto Two Caption Rear View: 12/21/2020				

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

ELEVATION CERTIFICATE

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

BUILDING PHOTOGRAPHS Continuation Page

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		9	
IMPORTANT: In these spaces, copy the o	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Un 922 FOLLY ROAD	D. Policy Number:		
City	State	ZIP Code	Company NAIC Number
MYRTLE BEACH	South Carolina	29588	

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 Caption Left, Rear; 12/21/2020

Clear Photo Three

Photo Four