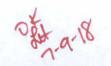
U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program



OMB No. 1660-0008

Expiration Date: November 30, 2018

7/5/18 5565

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.

17. 7	10T/			The same of the sa	Contract of the Contract of th	•	
	SEC	TION A - PROPERTY	INFOR	MATION		FOR INSU	RANCE COMPANY USE
A1.	Building Owner's Name Rob	ert Harrell				Policy Nur	mber:
A2.	Building Street Address (in Box No. 1070 Waccamaw Driv		e, and/o	or Bldg. No.) or P.O.	. Route and	Company	NAIC Number:
	City Conway			State South Carolina	a /	ZIP Code 29526	
A3.	Property Description (Lot a TMS: 137-17-01-0			l Number, Legal De	escription, etc.)		
A4.	Building Use (e.g., Residen	itial, Non-Residential,	Addition	, Accessory, etc.)	residential		
A5.	Latitude/Longitude: Lat. N	33° 48' 40.41"	Long. V	V 79° 02' 53.57"	Horizontal Datu	m: NAD	1927 X NAD 1983
A6.	Attach at least 2 photograp	hs of the building if the	Certific	cate is being used to	o obtain flood insu	rance.	
A7.	Building Diagram Number	5					
A8.	For a building with a crawls	pace or enclosure(s):					
	a) Square footage of crawl	space or enclosure(s)	2	A sq ft			
	b) Number of permanent flo	ood openings in the cra	awlspac	ce or enclosure(s) w	rithin 1.0 foot abov	e adjacent g	rade N A
	c) Total net area of flood of	penings in A8.b N	A - s	sq in			
	d) Engineered flood opening	ngs? ☐ Yes ☒ N	0				
A9	For a building with an attacl	ned garage:					
C. 1	a) Square footage of attach		/	ea ff			
					at above adjacent	grada	NIA
	b) Number of permanent flo				ot above adjacent	grade	NIA
	c) Total net area of flood or	penings in A9.b	A	_ sq in			
	d) Engineered flood opening	ngs? Yes N	0				
	SE	CTION B - FLOOD II	NSURA	NCE RATE MAP	(FIRM) INFORM	ATION	
	NFIP Community Name & C	Community Number		B2. County Name			B3. State
Hor	ry County 450104			Horry County			South Carolina
	Map/Panel B5. Suffix Number 1C 0516 H	B6. FIRM Index Date 09/17/2003	R	IRM Panel ffective/ evised Date 8/1999	B8. Flood Zone(AE & Floodway	(Z	ase Flood Elevation(s) one AO, use Base ood Depth)
4000	10 0010	00/11/2000	00/20	1000	AL di localita	P. Carlot	
B16	. Indicate the source of the	Base Flood Elevation ((BFE) d	ata or base flood de	epth entered in Ite	m B9:	
	☐ FIS Profile ☒ FIRM	Community Determ	nined	Other/Source:			
B11	. Indicate elevation datum u	used for BFE in Item B9	9: 🗵 N	IGVD 1929 NA	AVD 1988 🔲 C	other/Source	
B12	. Is the building located in a	Coastal Barrier Resou	urces S	ystem (CBRS) area	or Otherwise Pro	tected Area	(OPA)? ☐ Yes ☒ No
	Designation Date:		CBRS	ОРА			

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the correspondence			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, 1070 Waccamaw Drive	and/or Bldg. No.) or P.O. Rou	ite and Box No.	Policy Number:
City	the second secon	Code	Company NAIC Number
	IG ELEVATION INFORMAT		
*A new Elevation Certificate will be required w C2: Elevations – Zones A1–A30, AE, AH, A (with Complete Items C2.a–h below according to th Benchmark Utilized: GPS on Real-Time Netw	BFE), VE, V1–V30, V (with Bi le building diagram specified i ork Vertical Datum:	ng is complete. FE), AR, AR/A, Al in Item A7. In Pue NAVD88	R/AF AR/A1-A30 AR/AH AR/A0
Indicate elevation datum used for the elevation	ns in items a) through h) below	w.	
⋈ NGVD 1929			
Datum used for building elevations must be the	e same as that used for the B	FE.	Check the measurement used.
 ✓a) Top of bottom floor (including basement, c 	rawlspace, or enclosure floor)	18, 55	X feet meters
b) Top of the next higher floor		N/A	X feet meters
Bottom of the lowest horizontal structural n	nember (V Zones only)	N/A	
d) Attached garage (top of slab)	iember (v Zones dniy)	N/A	X feet meters
E) Lowest elevation of machinery or equipme (Describe type of equipment and location in the control of the	nt servicing the building	17. 73	X feet meters
Lowest adjacent (finished) grade next to be	A STATE OF THE STA	6,95	X feet meters
g) Highest adjacent (finished) grade next to b	uilding (HAG)	7, 23	
h) Lowest adjacent grade at lowest elevation structural support		7.1	
	YOR, ENGINEER, OR ARC	UITECT CEPTI	EICATION
This certification is to be signed and sealed by a la I certify that the information on this Certificate representation on the certificate representation of the certificate representation of the certification of the ce	nd surveyor, engineer, or arc esents my best efforts to inter- ent under 18 U.S. Code, Sect	nitect authorized b pret the data availion 1001.	ov law to certify elevation information
Certifier's Name	License Number		The state of the
Kenneth D. Jordan	21936		Section (NY)
Title President			
Company Name K & R Land Surveyors			Place Seal) Ordan
Address 312 Laurel Street			Here
City Conway	State South Carolina	ZIP Code 29526	
Signature Henneth D. Jordan	Date 07/02/2018	Telephone (843) 488-1804	
Copy all pages of this Elevation Certificate and all att	achments for (1) community of	ficial, (2) insurance	e agent/company, and (3) building owner
Comments (including type of equipment and location Elevations were determined using Real-time Networn The A/C unit 18.86' The Lowest piece of machinery is an Gas Meter Ver Gas Meter present at ground level 7.15' House is dried in and sheet rocked, steps are built,	ork GPS and converted to NG ent.		

ELEVATION CERTIFICATE

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

IMPORTANT: In the	hese spaces, copy the corresp	onding information f	rom Section A.		FOR INSURAN	ICE COMPANY USE
	ddress (including Apt., Unit, Suite, accamaw Drive	, and/or Bldg. No.) or F	P.O. Route and Bo	x No.	Policy Number:	
City Conway		State South Carolina	ZIP Code 29526		Company NAIC	Number
	SECTION E – BUILDING FOR Z	ELEVATION INFOR			REQUIRED)	
For Zones AO and complete Sections enter meters.	d A (without BFE), complete Items s A, B,and C. For Items E1–E4, u	s E1–E5. If the Certific use natural grade, if av	cate is intended to allable. Check the	support a l measurem	LOMA or LOMF nent used. In Pu	R-F request, uerto Rico only,
the highest ac	ation information for the following djacent grade (HAG) and the low			w whether	the elevation is	above or below
crawlspac	ttom floor (including basement, ce, or enclosure) is		[] feet	meters	above or	below the HAG.
b) Top of bot crawlspac	ttom floor (including basement, ce, or enclosure) is		feet	meters	above or	below the LAG.
the next higher	Diagrams 6–9 with permanent floo er floor (elevation C2.b in) of the building is	od openings provided	in Section A Items	_		-2 of Instructions),
E3. Attached gara				meters		below the HAG.
E4. Top of platfor servicing the	rm of machinery and/or equipmen	nt	□feet	meters	□ above or	below the HAG.
E5. Zone AO only	y: If no flood depth number is ava	nilable, is the top of the	bottom floor eleva	ated in acco	ordance with th	e community's
поочрын нь	SECTION F – PROPERTY		A STATE OF			audit in decision
community-issued	er or owner's authorized represer I BFE) or Zone AO must sign here r Owner's Authorized Representa	e. The statements in S	Sections A, B, and Sections A, B, and	d E for Zon E are corre	e A (without a lect to the best of	FEMA-issued or of my knowledge.
Address		C	City	Stat	te	ZIP Code
Signature		D	Date	Tele	ephone	G * 7 7
Comments						
0011,						
					Check	here if attachments.

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Un 1070 Waccamaw Drive		
City Conway	State ZIP Code South Carolina 29526	Company NAIC Number
SE	CTION G - COMMUNITY INFORMATION (OPTION	NAL)
Sections A, B, C (or E), and G of this Elev used in Items G8–G10. In Puerto Rico onl G1. The information in Section C wa engineer, or architect who is aut data in the Comments area belo G2. A community official completed or Zone AO.	s taken from other documentation that has been significated by law to certify elevation information. (Indicated by law to certify elevation information.)	ned and sealed by a licensed surveyor, ate the source and date of the elevation FEMA-issued or community-issued BFE)
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
G8. Elevation of as-built lowest floor (inclof the building:G9. BFE or (in Zone AO) depth of floodingG10. Community's design flood elevation:Local Official's Name	g at the building site:	feet meters Datum feet Datum feet Datum Datum Datum Datum
Community Name	Telephone	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Signature	Date	
Comments (including type of equipment ar	nd location, per C2(e), if applicable)	
		Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In t	hese spaces, copy the c	FOR INSURANCE COMPANY USE		
- International Control of	dress (including Apt., Uni accamaw Drive	Policy Number:		
City		State	ZIP Code	Company NAIC Number
Conway		South Carolina	29526	

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 03/23/2018



Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these	FOR INSURANCE COMPANY USE Policy Number:				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1070 Waccamaw Drive					
City	1	State South Caro	lina	ZIP Code 29526	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 One

Photo One Caption

Right 03/23/2018



Photo Two

Left 07/02/2018