

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name KENNETH W. WALKER	For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2011 LEON STREET	Policy Number
City GEORGETOWN State SC ZIP Code 29440	Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 9, BLOCK G, MARYVILLE PINES T.M.#5-39A-7	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>	
A5. Latitude/Longitude: Lat. <u>33-20-50 N</u> Long. <u>79-18-02 W</u>	
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983	
A7. Building Diagram Number <u>1</u>	
A8. For a building with a crawl space or enclosure(s), provide	
a) Square footage of crawl space or enclosure(s) <u>NA</u> sq ft	A9. For a building with an attached garage, provide:
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <u>0</u>	a) Square footage of attached garage <u>NA</u> sq ft
c) Total net area of flood openings in A8.b <u>0</u> sq in	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <u>0</u>
	c) Total net area of flood openings in A9.b <u>0</u> sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number GEORGETOWN COUNTY 450087		B2. County Name GEORGETOWN COUNTY		B3. State SC	
B4. Map/Panel Number 450087 0002	B5. Suffix D	B6. FIRM Index Date 3/1/84	B7. FIRM Panel Effective/Revised Date 3/16/89	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 9
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-g below according to the building diagram specified in Item A7.
Benchmark Utilized _____ Vertical Datum NGVD '29
Conversion/Comments _____

a) Top of bottom floor (including basement, crawl space, or enclosure floor). 10.8 feet meters (Puerto Rico only)

b) Top of the next higher floor NA feet meters (Puerto Rico only)

c) Bottom of the lowest horizontal structural member (V Zones only) NA feet meters (Puerto Rico only)

d) Attached garage (top of slab) NA feet meters (Puerto Rico only)

e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) 9.3 feet meters (Puerto Rico only)

f) Lowest adjacent (finished) grade (LAG) 9.2 feet meters (Puerto Rico only)

g) Highest adjacent (finished) grade (HAG) 9.4 feet meters (Puerto Rico only)

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Check here if comments are provided on back of form.

Certifier's Name WENDELL C. POWERS License Number SCPLS #5303

Title SURVEYOR Company Name POWERS LAND SURVEYING

Address 626 FRONT STREET City GEORGETOWN State SC ZIP Code 29440

Signature Wendell Powers Date 3/6/08 Telephone 843-546-4000

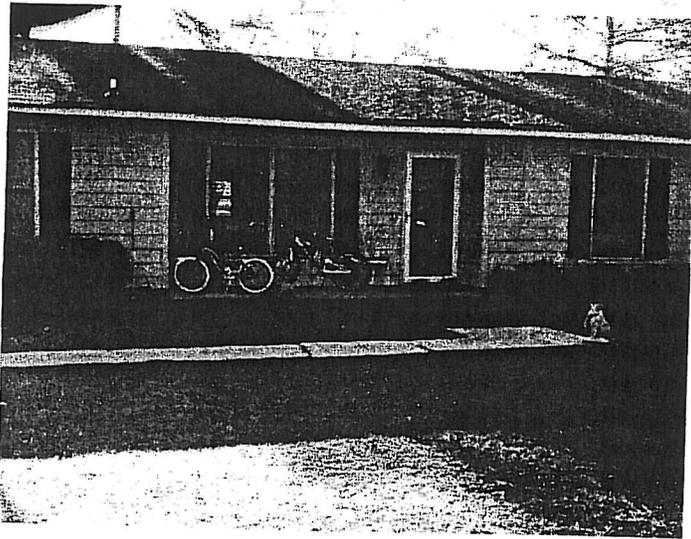
Wendell Powers
PLACE SEAL HERE
SC #5303
3/6/08

Building Photographs

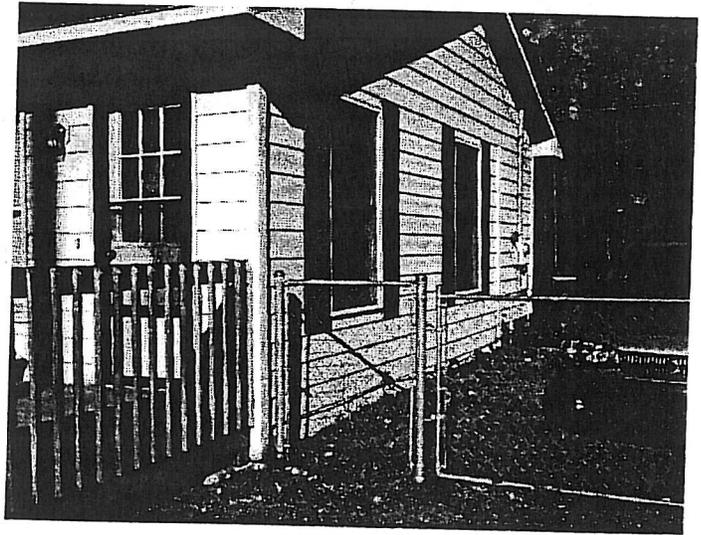
See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2011 LEON STREET	For Insurance Company Use: Policy Number
City GEORGETOWN State SC ZIP Code 29440	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page, following.



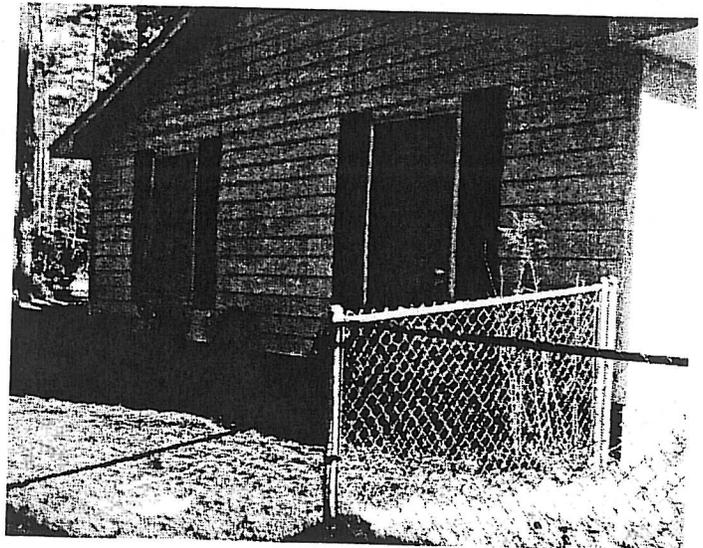
FRONT



LEFT SIDE



REAR



RIGHT SIDE