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Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: BUILDING OWNER'S NAME Policy Number RICHARD POWER BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number STATE ZIP CODE **GEORGETOWN** SC 29440 PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 3B SECTION I, MARYVILLE FARMS T.M.S. 5-46-121.1 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): (##° - ##' - ##.##" or ##.####") ☐ NAD 1927 ☐ NAD 1983 ☐ USGS Quad Map Other: SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME** B3. STATE CITY OF GEORGETOWN 450087 **GEORGETOWN** SC **B4. MAP AND PANEL B7. FIRM PANEL** B9. BASE FLOOD ELEVATION(S) NUMBER B5. SUFFIX **B6. FIRM INDEX DATE** EFFECTIVE/REVISED DATE B8. FLOOD ZONE(S) (Zone AO, use depth of flooding) - 0002 3-16-89 3-16-89 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. ☐ FIS Profile **⊠** FIRM Community Determined Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: X NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe)." B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date 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. Building Diagram Number 6 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) C3. 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 C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion. Datum NGVD 29 Conversion/Comments Elevation reference mark used AERO Does the elevation reference mark used appear on the FIRM? Yes X No o a) Top of bottom floor (including basement or enclosure) 9. 1 ft.(m) Seal o b) Top of next higher floor 19 . 1 ft.(m) Embossed (o c) Bottom of lowest horizontal structural member (V zones only) 18 . 1 ft.(m) o d) Attached garage (top of slab) NA. ft.(m) o e) Lowest elevation of machinery and/or equipment Number, Signature, servicing the building (Describe in a Comments area) 14.0 ft(m) o f) Lowest adjacent (finished) grade (LAG) 8.5ft(m) o g) Highest adjacent (finished) grade (HAG) License 9. 0 ft.(m) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 2 o i) Total area of all permanent openings (flood vents) in C3.h 301 sq. in. (sq. cm) 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 in Sections A, B, and C 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. CERTIFIER'S NAME J. LUCKEY SANDERS LICENSE NUMBER 4554 TITLE LAND SURVEYOR COMPANY NAME SANDERS SURVEYORS **ADDRESS** CITY STATE ZIP CODE 210 CLELAND STREET **GEORGETOWN** SC 29440 SIGNATURE DATE TELEPHONE 3-3-04 843-527-2300

Copy both sides of this Elevation Cer	tificate for (1) community official, (2) insurance	agent/company, and (3) building owner.
COMMENTS ENCLOSURE UNDER HOUSE IS A	299 SO FT STORAGE ROOM	
ENOCOOKE GADER (NOOCE 10)	2.00	
		☐ Check here if attachme
SECTION E - BUILDING	ELEVATION INFORMATION (SURVE	Y NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)
		tion Certificate is intended for use as supporting information for a LOMA or LOMR-F,
Section C must be completed.	the building diagram most similar to the building	g for which this certificate is being completed – see pages 6 and 7. If no diagram accurat
 Building Diagram Number_(Select represents the building, provide as 		nor which his callicate is being completed. See pages a tird 7, into diagram according
 The top of the bottom floor (includir natural grade, if available). 	ng basement or enclosure) of the building is	ft.(m) _in.(cm) above or below (check one) the highest adjacent grade. (Us
grade. Complete items C3.h and (C3.i on front of form.	vated floor (elevation b) of the building is ft.(m)in.(cm) above the highest adjac
E4. The top of the platform of machiner natural grade, if available).	y and/or equipment servicing the building is	ft.(m) _in.(cm) _ above or _ below (check one) the highest adjacent grade. (Us
E5. For Zone AO only: If no flood dept	n number is available, is the top of the bottom The local official must certify this information i	floor elevated in accordance with the community's floodplain management ordinance' in Section G.
SE	CTION F - PROPERTY OWNER (OR OV	VNER'S REPRESENTATIVE) CERTIFICATION
The property owner or owner's authorissued BFE) or Zone AO must sign h	zed representative who completes Sections A, ere. The statements in Sections A, B, C, and	, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or commun E are correct to the best of my knowledge.
PROPERTY OWNER'S OR OWNER	'S AUTHORIZED REPRESENTATIVE'S NAI	ME. ↑
ADDRESS		CITY STATE ZIP CODE
SIGNATURE	<u>and and an American and American American</u> American and an annual and	DATE TELEPHONE
COMMENTS		
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		☐ Check here if attachme
	SECTION G - COMMUNIT	Y INFORMATION (OPTIONAL)
Certificate. Complete the applicable ite G1. The information in Section C was criocal law to certify elevation G2. A community official completed	m(s) and sign below. s taken from other documentation that has bee informiation. (Indicate the source and date of t	n signed and embossed by a licensed surveyor, engineer, or architect who is authorized the elevation data in the Comments area below.) thout a FEMA-issued or community-issued BFE) or Zone AO. management purposes.
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (in G9. BFE or (in Zone AO) depth of flood		nentft.(m) Datum: ft.(m) Datum:
LOCAL OFFICIAL'S NAME		TITLE CONTROL OF THE
COMMUNITY NAME		TELEPHONE
SIGNATURE		DATE
COMMENTS		
		☐ Check here if attachmer
	O	UNITY RCEL