

# 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.

SECTION A - PROPERTY INFORMATION					FOR INSURANCE COMPANY USE					
A1. Building Owner's Name <b>235 CHURCH STREET LLC</b>				Policy Number:						
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>235 CHURCH STREET</b>				Company NAIC Number:						
City <b>GEORGETOWN</b>		State <b>S.C.</b>		ZIP Code <b>29440</b>						
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>LOT 12, PORTIONS OF LOTS 11 and 13, GREENWICH ASSOCIATES SIP LOTS - UNITS B, C, and D</b>										
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>COMMERCIAL   STORAGE</b>										
A5. Latitude/Longitude: Lat. <b>33°21'50"</b> Long. <b>79°6'18"</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983										
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.										
A7. Building Diagram Number <b>1B</b>										
A8. For a building with a crawlspace or enclosure(s):										
a) Square footage of crawlspace or enclosure(s) <b>13,542</b> sq ft				<table style="border: none;"> <tr> <td style="font-size: 2em; vertical-align: middle;">}</td> <td style="vertical-align: middle;"> <b>UNIT B - 5254 SQ. FT</b>  <b>UNIT C - 4144 " "</b>  <b>UNIT D - 4144 " "</b> </td> <td style="font-size: 2em; vertical-align: middle;">}</td> <td style="vertical-align: middle;"><b>13,542 SQ. FT</b></td> </tr> </table>			}	<b>UNIT B - 5254 SQ. FT</b> <b>UNIT C - 4144 " "</b> <b>UNIT D - 4144 " "</b>	}	<b>13,542 SQ. FT</b>
}	<b>UNIT B - 5254 SQ. FT</b> <b>UNIT C - 4144 " "</b> <b>UNIT D - 4144 " "</b>	}	<b>13,542 SQ. FT</b>							
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <b>64</b>										
c) Total net area of flood openings in A8.b <b>5529</b> sq in										
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No										
A9. For a building with an attached garage:										
a) Square footage of attached garage <b>N/A</b> sq ft										
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>N/A</b>										
c) Total net area of flood openings in A9.b <b>N/A</b> sq in										
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No										
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION										
B1. NFIP Community Name & Community Number <b>CITY OF GEORGETOWN, S.C. 450087</b>			B2. County Name <b>GEORGETOWN</b>		B3. State <b>S.C.</b>					
B4. Map/Panel Number <b>450087 002</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>3/1/84</b>	B7. FIRM Panel Effective/ Revised Date <b>3/16/89</b>	B8. Flood Zone(s) <b>AE</b>	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) <b>9.0</b>					
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/Source: _____										
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/Source: _____										
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA										

ELEVATION CERTIFICATE

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>235 CHURCH STREET</b>			Policy Number:
City <b>GEORGETOWN</b>	State <b>S.C</b>	ZIP Code <b>29440</b>	Company NAIC Number

**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–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  
Benchmark Utilized: **RM7** Vertical Datum: **NGVD 29**

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_



Datum used for building elevations must be the same as that used for the BFE.

		Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<b>9 1</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	<b>N A</b>	<input type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<b>N A</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	<b>N A</b>	<input type="checkbox"/> feet	<input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<b>N A</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<b>5 0</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<b>8 0</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<b>N A</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters

**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.

Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  Check here if attachments.

Certifier's Name <b>WENDELL C. POWERS</b>	License Number <b>S.C.#5303</b>	  Place Seal Here  <b>S.C.#5303</b>  <b>9/8/17</b>
Title <b>LAND SURVEYOR</b>		
Company Name <b>POWERS LAND SURVEYING</b>		
Address <b>602 FROST STREET</b>		
City <b>GEORGETOWN</b>	State <b>S.C</b>	ZIP Code <b>29440</b>
Signature 	Date <b>9/8/17</b>	Telephone <b>843-546-4000</b>

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Comments (including type of equipment and location, per C2(e), if applicable)

**A.B.)b - UNIT B- 24 vents  
UNIT C- 20 vents  
UNIT D- 20 vents  
A.B.)c - UNIT B- 2073 sq. in.  
UNIT C- 1728 " "  
UNIT D- 1728 " "**

**BUILDING PHOTOGRAPHS**

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See Instructions for Item A6.

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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.



**FRONT**



**LEFT SIDE**

Photo One Caption



**REAR**



**RIGHT SIDE**

**NOTE: UNITS B, C, & D ARE TYPICAL AS SHOWN HEREON. 9-8-17**

*wepowers*

Photo Two Caption