## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

## **ELEVATION CERTIFICATE**

Important:	Read the instructions on pages 1 - 7.			
	- PROPERTY OWNER INFORMATION	For Insurance Company Use:		
BUILDING OWNER'S NAME  MCOUIDDY FAMILY PROPERTIES	. INC.	Policy Number		
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and 117-B, 15th. Avenue North	d/or Bldg. No.) OR P.O. ROUTE AND BOX NO.	Company NAIC Number		
CNY Surfside Beach	STATE South Carolina	ZIP CODE 29587		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Par Lot "E", Block 25-B, Lakewo	rcel Number, Legal Description, etc.) Dood Section in Surfside B	each S.C.		
BUILDING USE (e.g., Residential, Non-residential, Addition, A Residential	ccessory, etc. Use a Comments area, if necessary.)			
LATITUDE/LONGITUDE (OPTIONAL) HORIZON	TAL DATUM: SOURCE:  _   GPS (Type):			
· · · · · · · · · · · · · · · · · · ·	☐ NAD 1983 ☐ USGS Quad M	ap  _  Other:		
n/a				
	INSURANCE RATE MAP (FIRM) INFORMATIO	N .		
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Town Of Surfside Beach	B2. COUNTY NAME Horry	B3. STATE S.C.		
B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDE NUMBER DATE 450111 0752 H	EFFECTIVE/REVISED DATE ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)		
B10. Indicate the source of the Base Flood Elevation (BF	8/23/99 AE	16ft		
	ity Determined Other (Describe):			
B11. Indicate the elevation datum used for the BFE in B9:		escribe):		
B12. Is the building located in a Coastal Barrier Resource				
Designation Date:				
SECTION C - BUILDING	ELEVATION INFORMATION (SURVEY REQUIR	FD)		
C1. Building elevations are based on:  _ Construction Drawings*  _ Building Under Construction*  X  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 Comment				
Datum Conversion/Comments				
Elevation reference mark used_NGVD_1929	Does the elevation reference mark used appea	ar on the FIRM?   Yes   No		
a) Top of bottom floor (including basement or enclo	· ·			
☐ b) Top of next higher floor	$\frac{1}{2}$ 21 - 78ft (m) $\frac{10}{2}$			
C) Bottom of lowest horizontal structural member (V	/zones only) <u>n/a</u> . ft.(m) 養豊			
☐ d) Attached garage (top of slab)	/zones only)n/a ft.(m) \$\frac{8}{8} \frac{4}{9} \frac{1}{2} \frac{1}{	1/1/		
<ul> <li>e) Lowest elevation of machinery and/or equipment</li> </ul>	t , ភូមិ			
servicing the building (Describe in a Comments	area.)n/aft.(m) 🖁 🖥	1. a 11 10 -		
f) Lowest adjacent (finished) grade (LAG)	area.)	Son A Kh		
g) Highest adjacent (finished) grade (HAG)				
h) No. of permanent openings (flood vents) within 1				
<ul> <li>i) Total area of all permanent openings (flood vents)</li> </ul>	) in C3.h $\underline{480}$ sq. in. (sq. cm)	12/30/02		
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION				
This certification is to be signed and sealed by a land sur				
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  James R. Blanton P.L.S	1 551			
TITLE	COMPANY NAME			
	on Land Surveying, Inc.	ZIP CODE		
P.O. Box 273 Myrt	Le Beach S.C.	29578		
SIGNATURE	DATE TELEPHO	NE		
THE STATE OF THE S	12/30/02 (843) 236-280			
FEMA Form 81-31, JUL 00 SEE REVI	ERSE SIDE FOR CONTINUATION REPL	ACES ALL PREVIOUS EDITIONS		

IMPORTANT: In these spaces, of	copy the corresponding information fr	om Section A.	For Insurance Company Use:	
BUILDING STREET ADDRESS (Inclu	ding Apt., Unit, Suite, and/or Bldg. No.) OR P.	D. ROUTE AND BOX NO.	Policy Number	
CITY	STATE	ZIP CODE	Company NAIC Number	
SECTION	D - SURVEYOR, ENGINEER, OR ARC	HITECT CERTIFICATION (COM	ITINUED)	
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.				
COMMENTS				
			Check here if attachments	
SECTION E - BUILDING ELE	VATION INFORMATION (SURVEY NOT	REQUIRED) FOR ZONE AO A	ND ZONE A (WITHOUT BFE)	
For Zone AO and Zone A (without E	BFE), complete Items E1. through E4. If	he Elevation Certificate is inten	ded for use as supporting	
information for a LOMA or LOMR-F	, Section C must be completed.			
	(Select the building diagram most simi		certificate is being completed –	
	am accurately represents the building, pr		n.(cm)   above or     below	
	luding basement or enclosure) of the build int grade. (Use natural grade, if available		r.(Cit)    above of    below	
	openings (see page 7), the next higher fi		o) of the building is	
<del>-</del> -	ove the highest adjacent grade. Complet		· -	
	lepth number is available, is the top of the			
	nce? Yes No Unknown. F-PROPERTY OWNER (OR OWNER)			
	thorized representative who completes Sounity-issued BFE) or Zone AO must sign!		- ·	
the best of my knowledge.	may recede by Ey or Editor to make organi		0.1, 2, 0, a.i., 2 a. a a.i., a.	
PROPERTY OWNER'S OR OWNER'S	AUTHORIZED REPRESENTATIVE'S NAME			
ADDRESS	СПҮ	STATE	ZIP CODE	
SIGNATURE	DATE	TELEPH	ONE	
COMMENTS				
			Check here if attachments	
	SECTION G - COMMUNITY INFO			
	by law or ordinance to administer the com s Elevation Certificate. Complete the app		it ordinance can complete	
			ed by a licensed surveyor.	
G1.    The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the				
elevation data in the Comm		•		
G2.    A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or				
Zone AO. 33 I - L'Ene following information (II	tems G4-G9) is provided for community f	andolain management numage	n	
G4. PERMIT NUMBER	• •			
94. FERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF ISSUED	COMPLIANCE/OCCUPANCY	
G7. This permit has been issued for	:   New Construction   Substa	ntial Improvement		
38. Elevation of as-built lowest floor	(including basement) of the building is:		_ft.(m)Datum:	
G9. BFE or (in Zone AO) depth of flo	poding at the building site is:	·	_ ft.(m)Datum:	
LOCAL OFFICIAL'S NAME		TITLE		
COMMUNITY NAME		ELEPHONE	<u></u>	
SIGNATURE	1	DATE		
COMMENTS			<u> </u>	
		·		
			Check here if attachments	