FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7. **SECTION A - PROPERTY OWNER INFORMATION** For Insurance Company Use: BUILDING OWNER'S NAME Policy Number Scalise Development, Inc. BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 219 A North Yaupon Drive CITY ZIP CODE Surfiside Beach
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) SC 29575 TOT 15 B Block E Floral Section

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: (##" - ##" - ##.##" or ##.#####") |__| NAD 1983 I NAD 1927 USGS Quad Map Other N/A SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME B3. STATE** 450111 SC Surfside Beach Horry **B4. MAP AND PANEL B7. FIRM PANEL B5. SUFFIX B6. FIRM INDEX** B8, FLOOD **B9. BASE FLOOD ELEVATION(S)** NUMBER DATE **EFFECTIVE/REVISED DATE** (Zone AO, use depth of flooding) ZONE(S). 9-17-2003 45051C0751 Η 8-23-1999 ΑE 161 810. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. | | FIS Profile Ix I FIRM | | Community Determined | Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: [XX] 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 Designation Date: N/A SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) Ix |Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. $^{\circ}$ 2, 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/AD 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 N/A Elevation reference mark used Monument 5130 Does the elevation reference mark used appear on the FIRM? Yes a) Top of bottom floor (including basement or enclosure) Storage Room 9. 3 ft.(m) D b) Top of next higher floor 19. 2 ft.(m) ☐ c) Bottom of lowest horizontal structural member (V zones only) N/Aft.(m) (top of slab) N/A ft.(m) e) Lowest elevation of machinery and/or equipment 9 fL(m) servicing the building (Describe in a Comments area.) HVAC 8 ft.(m) 🕏 f) Lowest adjacent (finished) grade (LAG) Larry/r. Beasley 1_ft.(m) PLS 9544 (HAG) grade (HAG) h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade □ i) Total area of all permanent openings (flood vents) in C3.h ___75 __sq. in. (sq. cm) April 21,2005 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. LICENSE NUMBER **CERTIFIER'S NAME** Larry T. Beasley SCPLS 9544 TITLE COMPANY NAME Beasley Land Surveying, Inc. Land Surveyor **ADDRESS** ZIP CODE SC 29588 TELEPHONE 2005 April 21, 843-650-7722

FEMA Farm 81-31, January 2003

See reverse side for continuation.

Replaces all previous editions

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	iding Apt., Unit, Suite, and/or Bldg. No.) OR P.O. RO	UTE AND BOX NO.	Policy Number
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.2'x 10.4' storage ro	oom enclosed.		
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SECTION E - BUILDING ELE	VATION INFORMATION (SURVEY NOT REQ	UIRED) FOR ZONE AO A	ND ZONE A (WITHOUT BFE)
	BFE), complete Items E1. through E5. If the El	levation Certificate is intend	ed for use as supporting
	, Section C must be completed(Select the building diagram most similar to	the huilding for which this o	Artificate is being completed
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GNATURE	DATE	TELEPH	ONE
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