

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

OMB No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

1. BUILDING OWNER'S NAME: DEBBIE BARKER & VICTOR BARKER

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO: 5112 OLD LOUISVILLE ROAD

CITY: POOLER STATE: GEORGIA ZIP CODE: 31322

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): TRACT 2A OF TRACT 2 DIVISION OF LOTS 2, 5, 6, 9 & 10 HOUSTON TR.

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary): RESIDENTIAL

LATITUDE/LONGITUDE (OPTIONAL) ##-##-##.## or ##.##### HORIZONTAL DATUM: NAD 1927 NAD 1983 SOURCE: GPS (Type) USGS Quad Map Other

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1 NFIP COMMUNITY NAME & COMMUNITY NUMBER: POOLER 130261

B2 COUNTY NAME: CHATHAM

B3 STATE: GEORGIA

B4. MAP AND PANEL NUMBER: <u>13 0030-0080</u>	B5. SUFFIX: <u>C</u>	B6. FIRM INDEX DATE: <u>4/20/95</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE: <u>MAY 19, 1987</u>	B8. FLOOD ZONE(S): <u>AE</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding): <u>14.0</u>
---	----------------------	-------------------------------------	--	------------------------------	---

10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9:
 FIS Profile FIRM Community Determined Other (Describe):

11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe):

12. 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)

1. 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.

2. Building Diagram Number 5 (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.)

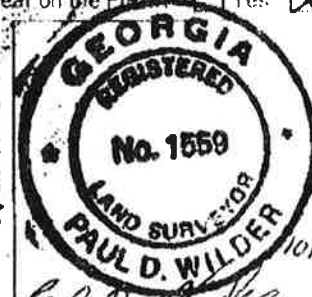
3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO

Complete Items C3a-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 1929 Conversion/Comments _____

Elevation reference mark used B1014 207 Does the elevation reference mark used appear on the FIRM? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>19.5</u> ft. (m)
<input type="checkbox"/> b) Top of next higher floor	<u>N/A</u> ft. (m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____ ft. (m)
<input type="checkbox"/> d) Attached garage (top of slab)	_____ ft. (m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>16.6</u> ft. (m)
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>10.3</u> ft. (m)
<input type="checkbox"/> g) Highest adjacent grade (HAG)	<u>10.5</u> ft. (m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	_____
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	_____ sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date:  10/18/00

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: PAUL D. WILDER LICENSE NUMBER: GA. L.S. #11559

TITLE: LAND SURVEYOR COMPANY NAME: WILDER, STONE & ZIPPERER P.S.

ADDRESS: P.O. BOX 1490 CITY: WINCON STATE: GA ZIP CODE: 31326

SIGNATURE: Paul D. Wilder DATE: 10/18/00 TELEPHONE: 912-826-5412

NATIONAL FLOOD INSURANCE PROGRAM
ELEVATION CERTIFICATE

U.M.F. NO. 3007-0011
Expires July 31, 2002

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

PROPERTY OWNER'S NAME DEBBIE BARKER & VICTOR BARKER		For Insurance Company Use
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 5112 OLD LOUISVILLE ROAD		Policy Number
CITY POOLER	STATE GEORGIA	Company NAIC Number
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TRACT 2A OF TRACT 2 DIVISION OF LOTS 2156, 9810 HOLLAND TR.		ZIP CODE 31322
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL		
LATITUDE/LONGITUDE (OPTIONAL) (##-##-#### or #####)		SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other
HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983		

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER POOLER 130261	B2. COUNTY NAME CHATHAM	B3. STATE GEORGIA
B4. MAP AND PANEL NUMBER 13 0030-0080	B5. SUFFIX C	B6. FIRM INDEX DATE 9/20/95
B7. FIRM PANEL EFFECTIVE/REVISED DATE MAY 19, 1987	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 14.0

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: 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)

Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction

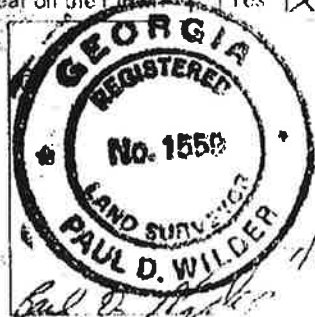
*A new Elevation Certificate will be required when construction of the building is complete.

2. Building Diagram Number **5** (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.)

3. 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 C3a-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 1929** Conversion/Comments _____

Elevation reference mark used **BIRM ON LOT** Does the elevation reference mark used appear on the FIRM? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	19.5 ft. (m)
<input type="checkbox"/> b) Top of next higher floor	N/A ft. (m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____ ft. (m)
<input type="checkbox"/> d) Attached garage (top of slab)	_____ ft. (m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	_____ ft. (m)
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	10.3 ft. (m)
<input type="checkbox"/> g) Highest adjacent grade (HAG)	10.5 ft. (m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	_____
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	_____ 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: **PAUL D. WILDER** LICENSE NUMBER: **GA 65 71 1559**

TITLE: **LAND SURVEYOR** COMPANY NAME: **WILDER, STONE & ZIPPERER P.S.**

ADDRESS: **P.O. BOX 1490** CITY: **BINCON** STATE: **GA** ZIP CODE: **31326**

SIGNATURE: *Paul D. Wilder* DATE: **7/8/00** TELEPHONE: **912-826-5412**

