## U.S. DEPARTMENT OF HOMELAND SECURITY

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency National Flood Insurance Program

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION								For Insurance Company Use:			
	A1. Building Owner's Name SHORELINE PROPERTIES								Policy Number		
1	Building Street Addres 1093 WOODLAND DF	s (including Apt.,	Unit, Suite, and/or Bl	dg. No.) or P.0	). Route and	Box No.			Company N	NAIC Numb	per
	City POOLER		State GA			ZIP Cod 31322	е				
A3.	Property Description (LLOT 20, SANGRENA)	ot and Block Nun WOODS, PHASE	nbers, Tax Parcel Nu IV (MAP BOOK 345	imber, Legal D S, PAGE 93)	escription, e	tc.)					
A4.	Building Use (e.g., Res	idential, Non-Res	idential, Addition, Ad	cessory, etc.)		- 24					
	Latitude/Longitude: Lat			rizontal Datum							
	Attach at least 2 photo: Building Diagram Numl		ding if the Certificate	is being used	to obtain floc	od insura	ince.				
	For a building with a cr	_	osure(s), provide:		A9.	For a bu	ilding with a	n attache	ed garage, p	rovide:	
	a) Square footage of crawl space or enclosure(s) N/A sq ft a) Square footage of attached garage *441 sq ft							•			
	b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <u>0</u> b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <u>0</u>						garage				
	c) Total net area of flo			_			I net area of				sq in
		SECT	ION B - FLOOD IN	SURANCE	RATE MAP	(FIRM	) INFORMA	ATION			
B1. NFIP Community Name & Community Number B2. County Name B3. State											
	OWN OF POOLE		imber	CHATHAM					GA GA		
B4.	Map/Panel Number	B5. Suffix	B6. FIRM Index		FIRM Panel		B8. Floo				tion(s) (Zone
	0001	A	Date 09/30/1981		e/Revised Da 1/30/1981	ate	Zone(s X&A	5)	AO, us	se base floo A=18.5'	od depth)
310.	Indicate the source of t	he Base Flood El	evation (BFE) data o	r base flood de	pth entered	in Item E	39.				
FIS Profile FIRM Community Determined Souther (Describe) SEE COMMENTS IN SECTION D											
311. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) 312. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?											
	ls the building located i Designation Date	n a Coastal Barrie	er Resources System		or Otherwise RS □OPA		ed Area (OF	'A)'?	∐Ye	s 🖾 No	0
T	Designation Date	SECTION	I C - BUILDING EI				IRVEY RE	OUIRF	D)		
_4											
*⊅	uilding elevations are b Anew Elevation Certific	ate will be require		of the building	-				ished Const		
	levations Zones A1-A elow according to the b			D, V (with BFE)	, AR, AR/A,	AR/AÉ,	AR/A1-A30,	AR/AH,	AR/AO. Coi	mplete Item	ns C2.a-g
	enchmark Utilized <u>TBM</u>				Vertical	Datum <u>N</u>	IGVD 29				
C	onversion/Comments <u>N</u>	<u>√A</u>									
			ν.			_	neck the mea				
a)	·		ent, crawl space, or e	enclosure floor			t Imeters	•			
b) c)			ural member (V Zone	e only)	<u>*31</u> . <u>3</u> N/A.		t				
d)			didi ilicilibei (V 2011	oo omy)	20.2		tmeters (				
e)		. ,	ipment servicing the	building	<u>*20.7</u>		tmeters (				
,	(Describe type of ed	juipment in Comn	nents)			_	_				
f)	Lowest adjacent (fin	· -			<u>19.0</u>		tmeters (				
g)	Highest adjacent (fir	nished) grade (HA	AG)		<u>19.9</u>	⊠fee	t Imeters (	Puerto F	Rico only)		
		SECTIO	N D - SURVEYOR	, ENGINEER	, OR ARCH	HITECT	CERTIFIC	ATION			
This c	certification is to be signation. I certify that the	ned and sealed by	a land surveyor, en	gineer, or arch	itect authoriz	zed by la	w to certify e	levation			
	erstand that any false s									EOR	
☐ Check here if comments are provided on back of form.											
	er's Name Mack Coleman				License Nur GA RLS# 24				1111	No. 249	6 /+/
Title	1		Company Name						-   <u>#</u>	7.	4/4/
, ,	tered Land Surveyor		<u>Kern-Coleman &amp; Co.</u> City	4.	State		ZIP Code		- 11.4/	NSUSVI SURV	
	Count		Savannah		GA		31416		- <b>W</b>	Mary /	1007
Signa	THY X		Date 11/2/06		Telephone 912-354-840	0			_/ 🏋	*	and the same of th
	$\vee$ /\								,	1	

IMPORTANT: In these spaces.	copy the corresponding information fr	om Section A.	For Insurance Company Use:
Building Street Address (including Ap	Policy Number		
1093 WOODLAND DRIVE	State	ZIP Code	Company NAIC Number
POOLER	GA N D - SURVEYOR, ENGINEER, OR ARC	31322	ITINII IED)
Comments	tificate for (1) community official, (2) insurance	agenizedinpariy, and (5) building owi	lei.
SECTION B10: THE BASE FLOOD E	ELEVATION WAS DETERMINED BY KERN-CO EY, GAY, BELL & DEYOUNG, INC., DATED F		Y THE CITY OF POOLER, AS
THE SQUARE FOOTAGE OF THE C	ARAGE IS APPROXIMATE.		
	FOR THE TOP OF PLATFORM FOR THE A		
Signature \		Date 1/2/06 🖾 Cho	eck here if attachments
SECTION E - BUILDING ELE	EVATION INFORMATION (SURVEY NOT		
<ul> <li>and C. For Items E1-E4, use natural</li> <li>E1. Provide elevation information for grade (HAG) and the lowest adjusted a) Top of bottom floor (including b) Top of bottom floor (including E2. For Building Diagrams 6-8 with (elevation C2.b in the diagrams</li> <li>E3. Attached garage (top of slab) is</li> </ul>	g basement, crawl space, or enclosure) is g basement, crawl space, or enclosure) is permanent flood openings provided in Section ) of the building is feet feet feet meters above	sed. In Puerto Rico only, enter metes to show whether the elevation is algorithms. In the showing the feet to meters the feet the feet the feet to meters the feet feet	above or below the highest adjacent bove or below the HAG. below the LAG. below the LAG. structions), the next higher floor ne HAG.
	nd/or equipment servicing the building is		
<u> </u>	n number is available, is the top of the bottom flo Unknown. The local official must certify th		community's floodplain management
	N F - PROPERTY OWNER (OR OWNER'		ICATION
	ized representative who completes Sections A, ements in Sections A, B, and E are correct to the		IA-issued or community-issued BFE)
Property Owner's or Owner's Authoriz	ed Representative's Name		
Address	City	State	ZIP Code
Signature	Date	Telephor	ne
Comments			
			Check here if attachments
	SECTION G - COMMUNITY INFO	RMATION (OPTIONAL)	
The local official who is authorized by la and G of this Elevation Certificate. Con	aw or ordinance to administer the community's to a not sign below. Complete the applicable item(s) and sign below.	floodplain management ordinance ca Check the measurement used in Item	an complete Sections A, B, C (or E), is G8. and G9.
authorized by law to certify el	was taken from other documentation that has be evation information. (Indicate the source and d	late of the elevation data in the Com	ments area below.)
	ed Section E for a building located in Zone A (w rns G4G9.) is provided for community floodpla	-	-issued BFE) or Zone AO.
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Comp	iance/Occupancy Issued
G7. This permit has been issued for	New Construction Substantial	Improvement	
G8. Elevation of as-built lowest floor (inc	cluding basement) of the building:	_ feet	R) Datum
G9. BFE or (in Zone AO) depth of flood	ng at the building site:	feet meters (P	R) Datum
Local Official's Name		Title	5
Community Name		Telephone	
Signature		Date	
Comments			
-			

## Building Photographs See Instructions for Item A6.

			For Insurance Company Use:			
	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1093 WOODLAND DRIVE					
City	State	ZIP Code	Company NAIC Number			
POOLER	GA	31322				

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page, following.

> **FRONT** 11/2/06

REAR 11/2/06





SIDE 11/2/06

SIDE 11/2/06



