FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires July 31, 2002

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 BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number No. 10 CASIDY COURT CITY ZIP CODE Pooler GA 31322 PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 230 Hunters Ridge Subdivision Phase 4B BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) Residential LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): (##" - ##" - ## ##" or ## #####") ■ NAD 1927 ■ NAD 1983 USGS Quad Map Other: SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME** B3 STATE 130261 Pooler Chatham GA B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX DATE **B7. FIRM PANEL** B8. FLOOD ZONE(S) B9. BASE FLOOD ELEVATION(S) NUMBER EFFECTIVE/REVISED DATE (Zone AO, use depth of flooding) 130030 0075 C 12.0 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: X 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 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. C2. Building Diagram Number 1 (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 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. Conversion/Comments Elevation reference mark used _Does the elevation reference mark used appear on the FIRM? 🔲 Yes 🛛 No a) Top of bottom floor (including basement or enclosure) 19. 9 ft.(m) Number, Embossed Seal, b) Top of next higher floor . ___ft.(m) c) Bottom of lowest horizontal structural member (V zones only) Signature, and Date ___ft.(m) d) Attached garage (top of slab) 19. 5ft.(m) e) Lowest elevation of machinery and/or equipment servicing the building _. __ft.(m) f) Lowest adjacent grade (LAG) 18.5ft.(m) License g) Highest adjacent grade (HAG) 18. 9ft.(m) ☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade □ i) Total area of all permanent openings (flood vents) in C3h ____sq. in. (sq. cm) SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

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.

CERTIFIER'S NAME Michael A. Hussey LICENSE NUMBER 2509 TITLELand Surveyor COMPANY NAME Stevenson & Palmer Engineering, Inc DDRESS CITY STATE ZIP CODE Savannah GΑ 31416 SIGNATURE DATE TELEPHONE

	ppy the corresponding information from Section A. ng Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BO		For Insurance Company Use				
No. 10 CASIDY COURT	ng Apr., Onic, Suice, and/or blog. No. JUK P.O. KUUTE AND BO	JA NU	Policy Number				
CITY Pooler	STATE GA	ZIP CODI 31322	Company NAIC Number				
	SECTION D - SURVEYOR, ENGINEER, OR ARCH	HITECT CERTIFICATION (CONTI	NUED)				
Copy both sides of this Elevation Ce	ertificate for (1) community official, (2) insurance agent/c	ompany, and (3) building owner.					
COMMENTS							
			Check here if attachmen				
SECTION E - BUI	LDING ELEVATION INFORMATION (SURVEY NOT I	REQUIRED) FOR ZONE AO AND					
	E), complete Items E1 through E4. If the Elevation Cert	lificate is intended for use as suppo	orting information for a LOMA or LOMR-F,				
Section C must be completed.							
	t the building diagram most similar to the building for whic	h this certificate is being completed	 see pages 6 and 7. If no diagram accurate 				
represents the building, provide a 2. The top of the bottom floor (including)	sketch or photograph.) ing basement or enclosure) of the building is ft.(m)i	in (cm) above or below (al	heck and the highest adjacent grade				
3. For Building Diagrams 6-8 with ope	enings (see page 7), the next higher floor or elevated flo	or (elevation b) of the building is	ft.(m) in.(cm) above the highest adiace				
grade.							
4. For Zone AO only: If no flood dept	th number is available, is the top of the bottom floor elev	ated in accordance with the comm	nunity's floodplain management ordinance?				
Yes No Unknown.	The local official must certify this information in Section		TIOU				
The property owner or owner's guther	SECTION F - PROPERTY OWNER (OR OWNER'S						
sign here.	ized representative who completes Sections A, B, and E	TOR ZONE A (MITHOUT A FEMA-ISSUED	l or community-issued BFE) or Zone AO mu				
DDODEDTY OWNIED'S OD OWNIED'S A	UTHORIZED REPRESENTATIVE'S NAME						
	OTHORIZED REPRESENTATIVES NAME						
ADDRESS	Cl	TY	STATE ZIP CODE				
SIGNATURE	D/	ATE	TELEPHONE				
COMMENTS							
			Check here if attachments				
	SECTION G - COMMUNITY INFOR	MATION (OPTIONAL)					
e local official who is authorized by lav	wor ordinance to administer the community's floodplain r		ete Sections A. B. C. (or E), and G. of this Flov				
ertificate. Complete the applicable ite		rianagornor a ordinario o our compie					
1. The information in Section C wa	as taken from other documentation that has been signed	d and embossed by a licensed surv	eyor, engineer, or architect who is authorize				
	ration information. (Indicate the source and date of the						
	d Section E for a building located in Zone A (without a Fl s G4-G9) is provided for community floodplain manager		BFE) of Zone AO.				
G4, PERMIT NUMBER	G5. DATE PERMIT ISSUED		OF COMPLIANCE/OCCUPANCY ISSUED				
TI LIMIT NONDEL	CO. DATE LINVIII ISSUED	GO. DATE CERTIFICATE C	DE COMPLIANCE/OCCUPANCY ISSUED				
. This permit has been issued for:	New Construction Substantial Improvement						
s. Elevation of as-built lowest floor (inc	- ,	ft.(m)	Datum:				
, BFE or (in Zone AO) depth of floodi	ing at the building site is:	ft.(m)	Datum:				
OCAL OFFICIAL'S NAME		TITLE					
OMMUNITY NAME	TELEPHONE						
IGNATURE	DATE						
OMMENTS							
			Check here if attachments				