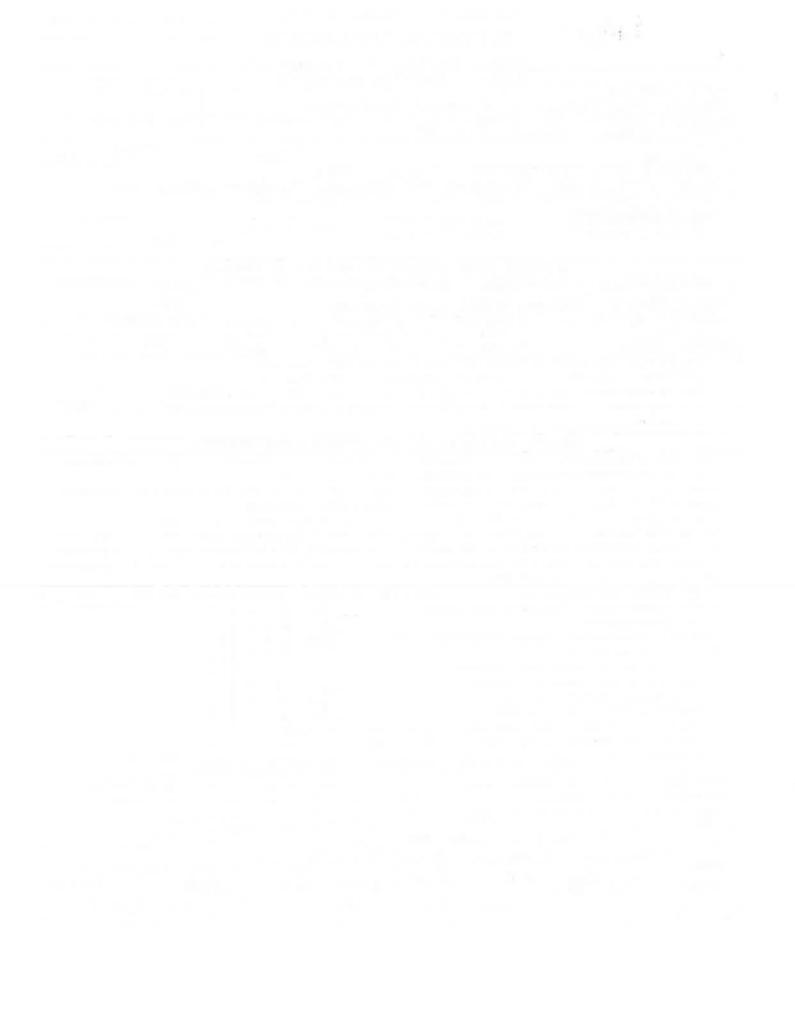
NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

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Expires	December	31, 2005

Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: BUILDING OWNER'S NAME Policy Number Kenson ADDRESS (Including Apt., Unit, Suite, and/or Bidg, No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number INE THORN ROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) THE VILLAGES LDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comment 1001 HORIZONTAL DATUM: SOURCE: L _| GPS (Type): (##P - ##' - ##.##" or ##.####") I NAD 1927 L. NAD 1983 I USGS Quad Map Other SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME** B3. STATE My of Poplar. GEORGIA 170261 629 CHOATHAM BA. MAP AND PANEL **B5. SUFFIX** 86. FIRM INDEX B7, FIRM PANEL BB, FLOOD B9. BASE FLOOD ELEVATION(S) ZONE(S) NUMBER EFFECTIVE/REVISED DATE DATE (Zone AO, use depth of flooding) 9-20-95 30030 8020 9-19-87 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in 99. PIRM __ FIS Profile [__] Community Determined | Other (Describe): 811. Indicate the elevation datum used for the BFE in B9: LANGVD 1929 L. NAVD 1988 L. Other (Describe); B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? [__] Yes Designation Date: SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: L. Construction Drawings* i Building Under Construction* I Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number ___ (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 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? a) Top of bottom floor (including basement or enclosure). 22.5 ft.(m) □ b) Top of next higher floor 30.6.ft(m) c) Sottom of lowest horizontal structural member (V zones only) AJA : ___ft.(m) d) Attached garage (top of slab) 2-1. B ft.(m) c) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) 9 ft.(m) (LAG) towest adjacent (finished) grade (LAG) 20. 6 ft.(m) 🗅 g) Highest adjacent (finished) grade (HAG) 2-1 . 7 ft.(m) 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
 Sq. in. (sq. cm) SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be signed and sealed by a land surveyor, angineer, or architect authorized by law to certify elevation information. l certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the date available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. CERTIFIER'S NAME LICENSE NUMBER TITLE ADDRESS SIGNATURE



	s, copy the corresponding information from		For Insurance Company Use:
BUILDING STREET ADDRESS (IN	iduding Apt., Unit, Suite, and/or Bldg. No.) OR P.O.	ROUTE AND BOX NO.	Policy Number
PROZEN	STATE (-)	ZIP CODE	Company NAIC Number
	ON D - SURVEYOR, ENGINEER, OR ARCH		TINUED)
	on Certificate for (1) community official, (2) ins		
COMMENTS .			<u>. </u>
- GEOTTEN	C-(3-e) DIATGE	DE AC LLUIT	
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DECLIANATION	ONLY IMPORTO TO PER	KSOW WYMED	HEREN. 17
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SECTION E - BUILDING E	LEVATION INFORMATION (SURVEY NOT F	REQUIRED) FOR ZONE AO A	
or Zone AO and Zone A (withou	ut BFE), complete Items E1. through E5. If th	e Elevation Certificate is Intend	ded for use as supporting
itomation for a LOMA or LOME 11. Ruilding Disgram Number	R-F, Section C must be completed(Select the building diagram most simila	والمناف والمنافيات والمعارض والمتعارض والمتعار	
see pages 6 and 7. If no dia	agram accurately represents the building, prov	ride a sketch or chotograph)	settindate is parud combieted -
The top of the bottom floor (i	including basement or enclosure) of the build:	ng is 1 1 lft. (m) 1 - lin.	(cm) [above or [below
(check one) the highest adja	icent grade. (Use natural grade, if available.)		
is, For Building Dragrams 6-6 w	with openings (see page 7), the next higher flow above the highest adjacent grade. Complete	or or elevated floor (elevation to httpms C3 bland C3 Los Foot	o) of the building is
4. The top of the platform of ma	achinery and/or equipment servicing the buildi	ing is 1 IfL(m) In.	(cm) above or below
(check one) the highest adja	icent grade. (Use natural grade, if available,)		
5. For Zone AO only; If no 1100 floo	d depth number is available, is the top of the nance? Yes No Unknown. T	bottom floor elevated in accord	lance with the community's
SECTION	ON F - PROPERTY OWNER (OR OWNER'S	REPRESENTATIVE) CERTIF	CATION
The property owner or owner's a	authorized representative who completes Sec	tions A. B. C. (Itams C3 h and	C3 Lonly) and E for Zone A
without a FEMA-issued or com- the best of my knowledge.	munity-issued BFE) or Zone AQ must sign he	re. The statements in Section	s A, B, C, and E are correct to
PROPERTY OWNER'S OR OWNE	R'S AUTHORIZED REPRESENTATIVE'S NAME		W. W
	V		
ADDRESS	OITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPHO	ONE
COMMENTS			
	The state of the s		
	SECTION G - COMMUNITY INFOR	MATION (OBTIONAL)	L Check here if attachmen
se local official who le authorize	d by law or ordinance to administer the comm	MATION (OPTIONAL)	
ections A, B, C (or E), and G of 1. _ The information in Section engineer, or architect whelevation data in the Core 2. _ A community official community official community AC.	this Elevation Certificate. Complete the appli on C was taken from other documentation that ho is authorized by state or local law to certify	cable item(s) and sign below. that been signed and emboss elevation information. (Indicat e A (without a FEMA-issued or	sed by a licensed surveyor, te the source and date of the r community-issued BFE) or
94. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G8. DATE CERTIFICATE OF	COMPLIANCE/OCCUPANCY
7. This permit has been issued	for: New Construction Substant	ial Improvement	***
3. El⊜vation of as-built lowest fid	oor (including basement) of the building is:	- Approximate	ft_(m) Datum:
a. Bre or (in Zone AO) depth of	f flooding at the building site is:	*	ft. (m) Datum:
OCAL OFFICIAL'S NAME	Ti	TLE	
OMMUNITY NAME			
IGNATURE		ELEPHONE	
	D/	ATE	
COMMENTS		***************************************	
			L Check here if attachmen
MA Form 81-31 January 2003			