FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

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

		t: Read the instructions on page NA-PROPERTY OWNER INFORMA		
	For Insurance Company Use:			
BUILDING OWNER'S NAME FRED WILLIAMS HOMEBUILD	Policy Number			
BUILDING STREET ADDRESS (Including 147 BARRINGTON ROAD)	Company NAIC Number			
CITY POOLER	DE			
PROPERTY DESCRIPTION (Lat and Ble	ok Numbers, Tax Parcel Number, L	gal Description, etc.)	31322	
LOT 55 BARRINGTON ESTATES, PHA BUILDING USE (e.g., Residential, Non-re	SE 2	h. C		
Kesidemai	acentes, recolors, recessory, eac. (ARR COMMINENTS SECTION II NECESSARY.)		
LATITUDE/LONGITUDE (OPTIONAL)	HORIZONTAL DAT	UM: SOUR	ICE: GPS(Type):	
(州····································	☐ NAD 1927 ☐ N/		USGS Qued Map	☐ Other
	SECTION B - FL	DOD INSURANCE RATE MAP (FIRM) INFORMATION	
91, NEIP COMMUNITY NAME & COMM	NITY NUMBER	E2.COUNTY NAME		B3, STATE
130281 POOLER		CHATHAM		GA COMPANY
NUMBER	UFFIX B6, FIRM INDEX DA 9-20-95	EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(\$)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)
10. Indicate the source of the Base Fig.		5-19-87		13.0
. Building devaitons are cased on: L. *A new Elevation Certificate will be:	j vonstruction Linewings" Biquired when construction of th			
**	SECTION C - BUILD	RS) area or Otherwise Protected Area NG ELEVATION INFORMATION (SU	IRVEY REQUIRED)	Name of the second
. Building elevations are based on:	Construction Drawings*	☐ Building Under Construction*	□ Finished Construction	
"A new Elevation Certificate will be	equired when construction of th	e building is complete.		
2 Building Diegram Number 1 (Select	ine bulidina diaaram most simil:	er to the building for which this certificat	e is heing commisted sag nog	on 6 and 7. If no diamen
accurately represents the building, p	rovide a sketch or photograph i		a sand antibotes one had	COO GILD 1: N ILD Wingstall I
Elevations Zones A1-A30 AF AH	A (with REE) VE VILVAG VA	with BFE), AR, ARVA, ARVAE, ARVA1-A	20 AD/ALL AD/AC	× ;
Complete Items C3a-I below accord	no to the insidian diamen one	ified in Item C2. State the datum used.	Maria de la la different form the	ida been been been been been been been bee
Section B, convert the datum in that	used for the BEE. Show feld m	easurements and datum conversion ca	It nick delicities of the course out of	13 QUILLY LISEO (OF THE BEE IN
Section D or Section G, as approprie	te, to document the datum con	occompliante en la mentitu del tale sidil de	scuaton. Ose trie space provi	ORO OL THE COLLINEUE SUBSTICE
Datum Conversion/Comme	ite 19 IN TOURISHE DIE USWINI COLL	FOISION.	E	an w ×
		mark used appear on the FIRM?	v Rediki	/
a) Top of bottom floor (including b	_Does the elevation reference		Yes Kal No	
	seement or enclosure)	14.2 ft.(m)	₹ (MODRIC MA
b) Top at next higher floor	W-W	N/Aft.(m)	ςς	W Production of
c) Bottom of lowest horizontal stru	ctural member (V zones only)	NA (t(m)	Embossed and Date	A SOUTH THE THE
d) Attached garage (top of slab)		<u>13</u> . <u>9</u> ft.(m)	\$ 5/W	XIXI
 b) Lowest elevation of machinery 	ind/or equipment	a di seri seri	m. a. 111	No. 2508 5
servicing the building		13.1R.(m)	5 N	the later
f) Lowest adjacent grade (LAG)		12. 1ft.(m)	License Num Signa	* (T. 76) C.
g) Highest adjacent grade (HAG)		12. <u>8f</u> t.(m)	3 co	C SORVES !
h) No. of permanent openings (flox	id vents) within 1 ft. above adjac	cent grade NV	.B	AEL A. NO
l) Total area of all permanent open	ings (flood vents) in C3h N/A so), (n. (eq. cm)		
	Mark the same of t	YOR, ENGINEER, OR ARCHITECT	CERTIFICATION	· · · · · · · · · · · · · · · · · · ·
is certification is to be signed and	sealed by a land surveyor, a	nginger, or architect authorized by it	tive to certify algustion inform	ration.
emity that me information in Section	18 A. B. and C on this certific	ate represents my best efforts to in:	teroret the date available	8
noerstand that any false statement	may be punishable by fine of	or imprisonment under 18 U.S. Code	e, Section 1001.	4
KTIFIER'S NAME Michael A. Hussay			LICENSE NUMBER 2509	
ELand Surveyor		COMPANY NAME		
DRESS Junco Way	. ^	CITY Savannah	STATE	ZIP CODE
NATURE V	V		GA GA	3141B
	Mussey	DATE 1/1905	TELEPHON 012.025.28	

IMPORTANT: In these spaces, copy the	For Insurance Company Use:			
BUILDING STREET ADDRESS (Including Apt., 147 BARRINGTON ROAD	Unit, Suite, and/or Blog, No.) OR P.O. ROUTE AND B	OX NO.		Pálicy Number
CITY POOLER	STATE GA		ZIP CODE 31322	Company NAIC Number
S	ECTION D - SURVEYOR, ENGINEER, OR AF	CHITECT CERTIFICA	TION (CONTINUED)	
Copy both sides of this Elevation Certificate	e for (1) community official, (2) insurance agent/o	company, and (3) buildi	ng owner.	
COMMENTS N/A				
	Serie III.	*		
		1		
				☐ Check here if attachments
SECTION E - BUILDIN	IG ELEVATION INFORMATION (SURVEY N	T REQUIRED) FOR 2	ONE AO AND ZONE A	
Section C must be completed. E1. Building Diagram Number(Select the brepresents the building, provide a sketch. E2. The lop of the boltom floor (including base.) E3. For Building Diagrams 6-8 with openings grade. E4. For Zone AO only: If no flood depth number.	ement or enclosure) of the building isft.(m) (see page 7), the next higher floor or elevated fill ber is available, is the top of the bottom floor ele	which this certificate is b _in.(cm) [] above o oor (elevation b) of the vated in accordance wi	eing completed - see pa r Delow (check one) building isft.(m)l	iges 6 and 7. If no diagram accurately the highest adjacent grade. n.(cm) above the highest adjacent
The second secon	ocal official must certify this information in Section ECTION F - PROPERTY OWNER (OR OWNE		A CERTIFICATION	
CONTRACTOR OF THE PARTY OF THE	spresentative who completes Sections A, B, and			n intruiceuari REE) or Zona AO must
sign here.	shadelitera auro continues communicipi et au	to the service of fault near	a i mini-trocursu di contin	namy would be my or more the ac-
PROPERTY OWNER'S OR OWNER'S AUTHOR	RIZED REPRESENTATIVE'S NAME			V Š
ADORESS		CITY	STATI	ZIP CODE
SIGNATURE		DATE		PHONE
COMMENTS				· \
		(4)	7 3	. Check here if attachments
***************************************	SECTION G - COMMUNITY INF	ORMATION (OPTION	AL)	\
Certificate. Complete the applicable item(s) at G1. The information in Section C was take state or local law to cartify elevation in S2. A community official completed Section	rdinance to administer the community's floodpland sign below. In from other documentation that has been sign from other documentation, that has been sign formation. (Indicate the source and date of the on E for a building located in Zone A (without a F69) is provided for community floodplain managers).	ed and embossed by a elevation data in the C EMA-issued or comm	licensed surveyor, engil omments area below.)	neer, or archited who is authorized by
G4. PERMIT NUMBER	G6, DATE PERIMIT ISSUED	Ğ6. DAT	E CERTIFICATE OF COMP	PLIANCE/OCCUPANCY ISSUED
67. This permit has been issued for: New Construction Substantial Impress. Rewation of as-built lowest floor (Including basement) of the building is: 89. BFE or (in Zone AO) depth of flooding at the building site is:		110	ft.(m)	Datum:
LOCAL OFFICIAL'S NAME		THE		
COMMUNITY NAME		TELEPHONE		
SIGNATURE		DATE	· · · · · · · · · · · · · · · · · · ·	
COMMENTS				

AUDITOR TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE	Africa - Control			Check here if attachments
10 TO			··········	CT Ottory flore is separationics