## 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: Policy Number BUILDING OWNER'S NAME FRED WILLIAMS HOMEBUILDER, INC BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bidg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 198 SILVERTON ROAD STATE ZIP CODE CITY **POOLER** GA 31322 PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 67 STONEWATER PHASE 2 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) Residential HORIZONTAL DATUM: SOURCE: GPS (Type): LATITUDE/LONGITUDE (OPTIONAL) NAD 1927 ☐ NAD 1983 USGS Quad Map Other: (###-##- or ##.####\phi) SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME** B3. STATE CHATHAM 130261 POOLER GA **B6. FIRM INDEX DATE B7. FIRM PANEL** 69. BASE FLOOD ELEVATION(S) B4, MAP AND PANEL B5. SUFFIX B8. FLOOD ZONE(S) NUMBER 9.20-95 EFFECTIVE/REVISED DATE (Zone AO, use depth of flooding) 5-19-87 130030-0075 С 13.0 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. **⊠** FIRM Community Determined Other (Describe): ☐ FIS Profile 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 Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) ■ Building Under Construction\* □ Finished Construction C1. Building elevations are based on: Construction Drawings\* \*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. Datum \_\_\_\_ Conversion/Comments \_ \_Does the elevation reference mark used appear on the FIRM? 🔲 Yes 🖂 No Elevation reference mark used\_\_\_\_ 19.9 ft(m) Seal, a) Top of bottom floor (including basement or enclosure) b) Top of next higher floor **N/A**. \_\_ft(m) Embossed and Date N/A. ft(m) c) Bottom of lowest horizontal structural member (V zones only) d) Attached garage (top of slab) 19.4ft(m) e) Lowest elevation of machinery and/or equipment License Number, Signature, NA.\_ft(m) servicing the building f) Lowest adjacent grade (LAG) 19.1ft(m) g) Highest adjacent grade (HAG) 18.9ft.(m) h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade W i) Total area of all permanent openings (flood vents) in C3h NA 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. LICENSE NUMBER 2509 CERTIFIER'S NAME Michael A. Hussey COMPANY NAME TITLELand Surveyor \*DDRESS CITY STATE ZIP CODE 8307 Meadowbrook Road Savannah GA 31406 DATE TELEPHONE SIGNATURE 012.254.2553

IMPORTANT: In these spaces, copy the corresponding information from Section A				For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg, No.) OR P.O. ROUTE AND BOX NO.  No 198 SILVERTON ROAD				Policy Number
CITY POOLER	STATE <b>GA</b>	ZIP C - 31322		Company NAIC Number
SE	CTION D - SURVEYOR, ENGINEER, OR ARCHITE	CT CERTIFICATION (CON	TINUED)	
Copy both sides of this Elevation Certificate f	or (1) community official, (2) insurance agent/compan	y, and (3) building owner.		
COMMENTS				
N/A				
		ilami. II.		
CECTION E DUE DINE		NUDED) FOR ZONE AO AI	ND ZONE A 44	Check here if attachments
	GELEVATION INFORMATION (SURVEY NOT REC plete Items E1 through E4. If the Elevation Certificate			
Section C must be completed.	nete lietts E1 tillough E4. If the Devation Certificate	is intended for use as suppo	rung inionnauon	TOT & LOIVIA OF LOIVIR-F,
'	ilding diagram most similar to the building for which the propertion of the contract of the building for which the contract of the contract of the building for which the contract of the building for which t	is certificate is being comple	eted – see pages	6 and 7. If no diagram accurately
E2. The top of the bottom floor (including basement or endosure) of the building isft.(m)in.(cm) above or below (check one) the highest adjacent grade.				
E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building isft.(m)in.(cm) above the highest adjacent				
grade.  E4. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?				
Yes No Unknown. The local official must certify this information in Section G.				
SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION				
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must				
sign here.	8			
PROPERTY OWNER'S OR OWNER'S AUTHOR	RIZED REPRESENTATIVE'S NAME			
PDRESS	СПҮ		STATE	ZIP CODE
1				
SIGNATURE	DAT		TELEPH(	DNE
COMMENTS				4
				Check here if attachments
	SECTION G - COMMUNITY INFORM.	ATION (OPTIONAL)		Officer field if allactiffication
The local official who is authorized by law or or	rdinance to administer the community's floodplain ma		mplete Sections	A, B, C (or E), and G of this Elevatio
Certificate. Complete the applicable item(s) ar	nd sign below.			
	en from other documentation that has been signed and			er, or architect who is authorized by
•	nformation. (Indicate the source and date of the eleva on E for a building located in Zone A (without a FEMA-		,	<b>1</b> 0
	(39) is provided for community floodplain management		1 Di L) 01 20110 1	
G4, PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFIC	ATE OF COMPLI	ANCE/OCCUPANCY ISSUED
G7. This permit has been issued for.   New				
G8. Elevation of as-built lowest floor (including basement) of the building is:		·		Datum:
G9. BFE or (in Zone AO) depth of flooding at the building site is:			_ft.(m) 	Datum:
LOCAL OFFICIAL'S NAME		TITLE		
COMMUNITY NAME TELEPHONE				
SIGNATURE	GNATURE DATE			
COMMENTS	4			*
\				
J <del></del>				
				Check here if attachments