9127482132 FEDERAL EMERGENCY MANAGEMENT AGENCY

NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the Instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Lise: BUILDING OWNER'S NAME FRED WILLIAMS HOMEBUILDER, INC Policy Number BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bidg, No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 1 BARRINGTON COURT STATE ZIP CODE **POOLER** GA 31322 PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area. If necessary.) LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): USGS Quad Map (##°-##'-####") Other: SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2 COUNTY NAME 130261 POOLER B3. STATE CHATHAM GA B4, MAP AND PANEL B7. FIRM PANEL ES. BASE FLOOD ELEVATION(S) NUMBER 86. FIRM INDEX DATE B5. SUFFIX EFFECTIVE/REVISED DATE B8.FLOOD ZONE(S) 130030-0075 (Zone AO, use depth of flooding) 9-20-95 5-19-87 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. 13.0 FIS Profile ☑ FIRM Community Determined B11. Indicate the elevation datum used for the BFE in B9: X NGVD 1929 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) C1. Building elevations are based on: Occustraction Drawings* Bullding Under Construction* X 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 - Zonee 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-l 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 NA Conversion/Comments NA Elevation reference mark used_ a) Top of bottom floor (including basement or enclosure) 14. 4ft(m) License Number, Embossed Seal, Signature, and Date b) Top of next higher floor NA _ft.(m) c) Bottom of lowest horizontal structural member (V zones only) N/A._fL(m) d) Altached garage (top of slab) 14. 0 ft.(m) e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 13.2 t.(m) f) Lowest adjacent (finished) grade (LAG) 11.4ft(m) g) Highest edjacent (finished) grade (HAG) 13. 2 ft.(m) h) No. of permanent openings (food vents) within 1 ft. above adjacent grade N/A i) Total area of all permanent openings (flood vents) in C3.h WA sq. in. (sq. om) 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 pertify 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. CERTIFIER'S NAME Michael A Hussey LICENSE NUMBER 2509 TITLELand Surveyor COMPANY NAME N/A ADDRE STATE ZIP CODE 129JUNCO SAVANNAH GΑ 31419 DATE TELEPHONE 3/22/05 912-748-2100 FEMA Form 51-31, January 2003 See reverse side for continuation. Replaces at previous editions

05/13/2005 09:59	9127482132		WILLIAMS HOMES	PAGE 03	
MFURTANT: In these spaces,	copy the corresponding information	from Section A.		Forinsurance Company Use: Policy Number	
BUILDING STREET ADDRESS (Including BARRINGTON COURT	Apt., Unit. Suite, and/or Bldg, No.,) OR P.O. ROUT	E AND BOX NO.		Policy Number	
TY OOLER		STATE	ZIP CODE 31322	Complany NAIC Number	
	ECTION D - SURVEYOR, ENGINEER,	OR ARCHITECT C	ERTIFICATION (CONTINUE	ED)	
goy both sides of this Elevation Certi	ficate for (1) community official, (2) insurance	agent/company, and	(3) building owner.		
OMMENTS					
		WW.		Chast have if allocation out.	
SECTION E . RIM DIA	IG ELEVATION INFORMATION (SUR	VEY NOT REQUIR	ED) FOR ZONE AO AND ZO	Check here if attachments	
	, complete Items E1 through E4. If the Eleva				
ction C must be completed.					
represents the building, provide a si	the building diagram most similar to the build ketch of photograph.)				
. This top of the bottom floor (including natural grade, if available).	basement or enclosure) of the building is	ft.(m)in.(cm) 🖵	above or Delow (check one	a) the highest adjacent grade. (Lise	
For Building Diagrams 6-8 with open	nings (see page 7), the next higher floor or ele	avated floor (elevation	b) of the bullding isf(m)	in.(cm) above the highest adjacent	
grade. Complete items C3.h and C	3.i on front of form. r and/or equipment servicing the building is	ft./m) in./cm)	above or D below (check one	e) the highest adjacent grade. (Use	
natural grade, if available).					
For Zone AO only: If no flood depth	number is available, is the top of the bottom		dance with the community's floor	tplain menagement ordinance?	
	The local official must certify this information is ECTION F - PROPERTY OWNER (OR		SENTATIVE) CERTIFICATI	ON	
	zed representative who completes Sections	No. of the local division in which the local division in the local	AND REAL PROPERTY OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED	7.0	
	re. The statements in Sections A, B, C, and			13 10 at a 1 wind 1 (00 and a	
	'S AUTHORIZED REPRESENTATIVE'S NA		-		
DDRESS		CITY STATE		TE ZIP CODE	
				TELEPHONE	
GNATURE		DATE TEL			
OMMENTS			79 %		
100 P. C.		الكنور مع مساعد مع		Check here if attachments	
	SECTION G - COMMUN			· · · · · · · · · · · · · · · · · · ·	
	v or ordinance to administer the community's	floodplain munageme	ent ordinance can complete Sect	lons A, B, C (or E), and G of this Elevatio	
tificate. Complete the applicable item	n(s) and sign below. Is taken from other documentation that has b	een stroned and embos	seed by a licensed surveyor, and	heer, or amhited who is authorized by s	
	formation. (Indicate the source and date of			, , , , , , , , , , , , , , , , , , , ,	
A community official completed :	Section E for a building located in Zone A (wi	thout a FEMA-leaued	or community-issued BFE) or Zo	ne AÓ.	
The following information (items	G4-G9) is provided for community floodplain	management purpose	98.		
L PERMIT NUMBER	GS. DATE PERMIT ISSUED		GR. DATE CERTIFICATE OF CON	PLIANCE/OCCUPANCY ISSUED	
This permit has been issued for	New Construction Substantial improve	ment		· · · · · · · · · · · · · · · · · · ·	
Elevation of as-built lowest floor (Incli			ft.(m)	Datum:	
), BFE or (In Zone AO) depth of tooding at the building site is:			ft.(m)	Datum:	
OCAL OFFICIAL'S NAME		TITL	Ė		
OMMUNITY NAME		TELE	PHONE		
GNATURE		DATI	Ē		
DMMENTS					
			1900	V	
				Check here if attachments	