U.S. DEPARTMENT OF HOMELAND SECURITY

ELEVATION CERTIFICATE

OMB No. 1660-0008

Federal Emergency Management Agency National Flood Insurance Program

Important: Read the instructions on pages 1-8.

Expires February 28, 2009

. SE	CTION A - PROPERTY INFORMATIO	ON THE PROPERTY OF THE PARTY OF
A1. Building Owner's Name COBSTAL JUING HOMES	INC.	
A2. Building Street Address (including Apt., Unit, Suite, and/o	or Bidg. No.) or P.O. Route and Box No.	120
City	State	ZIP Code 3/322
A3. Property Description (Lot and Block Numbers, Tax Parce	Number, Legal Description, etc.)	
LOT 40, THE GROVE	D.C.c.	
A4. Building Use (e.g., Residential, Non-Residential, Addition A5. Latitude/Longitude: Lat. \(\Omega \frac{37.06.55.3"}{2.06.55.3"} \)	Long. VVVVVI /5 4415	Horizontal Datum: NAD 1927 CHAD 1983
A6. Attach at least 2 photographs of the building if the Certifi A7. Building Diagram Number		
AR. For a building with a crawl space or enclosure(s), provide		ing with an attached garage, provide:
Square footage of crawl space or enclosure(s) No. of commonent flood coverings in the crawl space	or b) No. of p	permanent flood openings in the attached garage
enclosure(s) walls within 1.0 foot above adjacent gra	de Net Walls w	thin 1.0 foot above adjacent grade AVA eq in
c) Total net area of flood openings in A8.b	sqin c) Total n	et alog of look openings in the
SECTION B - FLOO	D INSURANCE RATE MAP (FIRM) I	
B1. NFIP Community Name & Community Number	B2. County Name	B3. State
POOLEN, GENGIA 130261	CHATHAM	BR Flood B9. Base Flood Elevation(s) (Zone
B4. Map/Panel Number B5. Suffix B6. FIRM Inc. Date	Effective/Revised Date	B8. Flood B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
130261 0001 A 9-30-8	9-30-81	
B10. Indicate the source of the Base Flood Elevation (BFE) d	emined Other (Describe)	8 81
		ner (Describe)
B11. Indicate elevation datum used for BFE in Item B9:	valem (CBRS) area of Utherwise Projectes	
Dasignation Date	CBRS OPA	
		WEY BEOLUBED!
SECTION C - BUILDIN	IG ELEVATION INFORMATION (SUF	
C1. Building elevations are based on: Construction Dri	wings* Building Under Const	ruction* Finished Construction
*A new Elevation Certificate will be required when constru C2. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V	12/20 V (with REE) AR AR/A. AR/AE. Al	R/A1-A30, AR/AH, AR/AO. Complete Items C2.s-g
below according to the building diagram specified in item		
Benchmark Utilized 4/D PLAT	Vertical Datum	NEUD DI
Conversion/Comments		ck the measurement used.
5:	' 10 -C	
a) Top of bottom floor (including basement, crawl space		feet meters (Puerto Rico only)
b) Top of the next higher floor	NA -	feet I meters (Puerto Rico only) feet I meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (/ Zones only)	
d) Attached garage (top of alab) a) Lowest elevation of machinery or equipment servicit a)		
(Describe type of equipment in Comments)		
f) Lowest adjacent (finished) grade (LAG)	feet meters (Puerto Rico only) feet meters (Puerto Rico only)	
g) Highest adjacent (finished) grade (HAG)		TBOL LI Materia (Fiderio Rico Grily)
SECTION D - SURVE	YOR, ENGINEER, OR ARCHITECT	CERTIFICATION
This and Carolina is to be alaned and peopled by a land europe	or engineer or architect authorized by lav	y to certify elevation
information. I certify that the information on this Certificate r I understand that eny false statement may be punishable by	enrakants my basi allons to interpret the u	ata avonova.
	the control of the co	DI AME
Check here if comments are provided on back of form.		SFAI
Certifier's Name	License Number	HERE
INMAN L. CANIER, JA.	239	- 5 % T F
Title DLS / ANIEL COMPANY Nam	SHAWGHIRD, INC.	
Address	thu State	ZIP Code
Signature Discharge Dich month	ate Telephone	-0 1111
	6-07 912-	

IMPORTANT: In these spaces,	copy the corresponding infor	mation from Section	on A,	HEAD	
Building Street Address (Including Ap	it., Unit, Suite, and/or Bldg. No.) or P	.O. Route and Box No	λ.	uek.	
City -	State		ZIP Code		
PONER.		A	3/322	The state of	
	N D - SURVEYOR, ENGINEER,				1
	tificate for (1) community official, (2)	ALCOHOL: The Property of the Party of the Pa		* ***	- 7
comments GECTION (CZ-E) OUTSIDE	E AC HUR	- DELAN	ATTON	MANE ONLY
to person	NAMED HERE	w. 11			**************************************
, , , , , , , , , , , , , , , , , , , ,	A (*)		No. 1	× Ł.,	
Signature		Z-16-07	(4)	[Check here if attachments
SECTION E - BUILDING EL	EVATION INFORMATION (SUR	VEY NOT REQUIR	ED) FOR ZONE A	O AND ZON	E A (WITHOUT BFE)
and C. For Items E1-E4, use nature E1. Provide elevation Information f grade (HAG) and the lowest ad a) Top of bottom floor (includin b) Top of bottom floor (includin E2. For Building Diagrams 6-8 with (elevation C2.b in the diagram E3. Attached garage (top of slab) i	g basement, craw space, or enclosing basement, crawl space, or enclosing parmanent flood openings provided as of the building is	priste boxes to show the priste boxes to show the prister boxes to sho	whether the elevation feet meters feet meters and/or 9 (see page.8 above or bek below the HAG.	above or b above or above or above or of instructions ow the HAG.	below the HAG. below the HAG. below the LAG. s), the next higher floor below the HAG.
E5. Zone AO only: If no flood depl	th number is available, is the top of the Unknown. The local official mus	ne bottom floor elevate	ed in accordance with on in Section G.	the commun	ty's floodplain managament
in the second se	N F - PROPERTY OWNER (OR		71	THECATIO	N 1 A
SECTIO	rized representative who completes	Continue A R and E	for Zone & fullboot B	FEMALIARUA	or community-lasted BFE
The property owner or owners author or Zone AO must sign here. The sta	rements in Sections A, B, and E are	correct to the best of	my knowledge.		
roparty Owner's or Owner's Author	zed Representative's Name	The second secon			od e
Address		City	Stat	6 Z	IP Code
Bignature		Date	Tele	phone	· P
Comments .					
					–
	SECTION G - COMMU				Check here if attachme
d G of this Elevation Certificate. Co The information in Section C is authorized by law to certificate. A community official complete.	law or ordinance to administer the complete the applicable item(s) and all twee taken from other documentation elevation information. (indicate the state Section E for a building toosted items (3439.) is provided for communications.	ommunity's floodplain gn below. Check the on that has been signe e source and date of t in Zone A (without a F	management ordinar measurement used in ed and sealed by a lic the elevation data in the EMA-issued or comm	ensed survey ne Comments	or, engineer, or architect with area below.)
34. Permit Number	G5. Date Permit Issued	. G6.	Date Certificate Of C	compliance/0	ccupancy issued
7. This permit has been issued for:	☐ New Construction Su	bstantial Improvemen		£ 8	12 B 10
B. Elevation of as-built lowest floor (i	including basement) of the building:		feet mete	•	turn
9. BFE or (in Zone AO) depth of floo	ding at the building site:		feet I mete	rs (PR) Da	tum
ocal Official's Name		Title	. 89		V ,
Community Name	The second secon	Telephon	e		
Signature		Date	39	,	* *
Comments					
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	<u> </u>				Check here if attachme
5MA Form 81-31 February 200	3		2	R	eplaces att previous editi