U.S. DEPARTMENT OF HOMELAND SECURITY

ELEVATION CERTIFICATE



OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency

National Flood Insurance Program

Important: Read the instructions on pages 1-8.

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			TION A - PROPER	TY INFORMA	ATION	For Insurance Company Use:
A1. Building Owner's Name SHEPPARD STATION APARTMENTS, LP						Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 215 BRIGHTONWOODS DRIVE					Company NAIC Number	
City POOLER	State GA ZIP C	ode 31322				
A3. Property Description (SHEPPARD STATION AP				etion, etc.)		
A4. Building Use (e.g., Re	sidential. Non-Re	esidential. Addition. A	ccessory, etc.) RES	IDENTIAL		
A5. Latitude/LongItude: La	at. 32 06 55.9 N	Long. 81 15 53.8 W				eatum: 🔲 NAD 1927 🖾 NAD 1983
A6. Attach at least 2 photo		ilding if the Certificate	e is being used to obt	ain flood insura	ance.	
A7. Building Diagram Nun A8. For a building with a c	_	closure(s), provide		A9. For a bi	uilding with an attac	ched garage, provide:
a) Square footage of	•		N/A sq ft	a) Squ	are footage of attac	ched garage <u>N/A</u> sq ft
b) No. of permanent		•				d openings in the attached garage
enclosure(s) walls c) Total net area of fi		bove adjacent grade	sq in		is within 1.0 foot ab al net area of flood	ove adjacent grade openings in A9.b sq in
oy Total not alou of h			NSURANCE RATI		12/10/199	
B1, NFIP Community Nam			B2. County Name		<u> </u>	B3. State
CITY OF POOLER 130261			CHATHAM			GEORGIA
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index	B7. FIRM		B8. Flood	B9. Base Flood Elevation(s) (Zone
13051C0107	F	Date SEPT 26, 2008	Effective/Rev SEPT 26,		Zone(s) AE	AO, use base flood depth) 16.0
310. Indicate the source of					B9	4. No.
FIS Profile	∏ FIRM	Community Dete	•	her (Describe)		
311. Indicate elevation datu	m used for BFE	in Item B9:	GVD 1929 🛛 NA	VD 1988	Other (Describe	e)
312. Is the building located					ted Area (OPA)?	∐Yes ⊠No
Designation Date] OPA		
	SECTIO	N C - BUILDING E	LEVATION INFO	RMATION (S	URVEY REQUIR	ED)
C1. Building elevations are		☐ Construction Dra		uilding Under		☑ Finished Construction
*A new Elevation Certifi					oonon donon	E I monet construction
			30, V (with BFE), AR,	AR/A, AR/AE,	AR/A1-A30, AR/AI	H, AR/AO. Complete Items C2.a-g
below according to the l Benchmark Utilized LO		•				
Conversion/Comments		tum <u>1929</u>				
CONTROLLOGIAMENTS	1-10:02			С	heck the measurer	ment used.
Top of bottom floor (incl)	uding basement.	crawl space, or enclo	osure floor) 20,2	1 ⊠ fee	t 🔲 meters (Puer	to Rico only)
b) Top of the next high		orann opaco, or onon	30.1		t meters (Puer	
		ctural member (V Zoi	nes only) N/A		t 🔲 meters (Puerl	
d) Attached garage (to	•		N/A		t 🔲 meters (Puerl	
 e) Lowest elevation of (Describe type of e 		juipment servicing the	e building <u>19</u> .9	3 ⊠ feet	t 🔲 meters (Puerl	to Rico only)
f) Lowest adjacent (fi			19.5	⊠ feet	t 🔲 meters (Puer	to Rico only)
g) Highest adjacent (fi			19.8		meters (Puerl	
- W W	eectic	N D CURVEYOR	ENGINEED OR	ADCUITECT	CERTIFICATIO	187
This certification is to be sig			R, ENGINEER, OR			
information. I certify that the I understand that any false	information on	this Certificate repres	ents my best efforts	o interpret the	data available.	ORO
☐ Check here if comments	are provided on	back of form				(C) LOSTER VX
Officer field if confinions	s are provided on	Dadk of John.				112 (Jan 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Certifier's Name MICHAEL	A. HUSSEY		Licer	se Number 25	09	- III (Month of)
Title LAND SURVEYOR		Company Nam	e SUNDIAL LAND	SURVEYING, I	PC	SURVE SURVE
Address 100 COMMERCE	COURT	City POOER	State	GA ZIP Co	de 31322	CHAEL A. HUS
Signature A	A	Date 06-10-2009	Telephone 912	-748-2100		

IMPORTANT. I= 4b	a more than a service and the start	formation form	Section A	For Insurance Company Use:			
IMPORTANT: In these spaces, Building Street Address (including Apr			Policy Number				
Building Street Address (including Ap 215 BRIGHTONWOODS DRIVE BUIL	i oney isumodi						
City POOLER State GA ZIP Code	Company NAIC Number						
SECTION	N D - SURVEYOR, ENGINEE	R, OR ARCHITE	CT CERTIFICATION (COM	ITINUED)			
Copy both sides of this Elevation Cert							
Comments C2e IS LOWEST ELEVA							
Signature SECTION E - BUILDING ELE For Zones AO and A (without BFE), c and C. For Items E1-E4, use natural E1. Provide elevation information fo grade (HAG) and the lowest adj. a) Top of bottom floor (including b) Top of bottom floor (including b) Top of bottom floor (including clevation C2.b in the diagrams) (elevation C2.b in the diagrams) E3. Attached garage (top of slab) is E4. Top of platform of machinery and statements of the control of the cont	complete Items E1-E5. If the Cer grade, if available. Check the mr the following and check the appacent grade (LAG). I basement, crawl space, or enclor basement, crawl space, or enclor basement flood openings provide of the building is feet md/or equipment servicing the building the building the grade of the building is feet md/or equipment servicing the building the grade of the building is feet md/or equipment servicing the building the grade of the servicing the servicing the grade of	tificate is intended easurement used. propriate boxes to soure) is	to support a LOMA or LOMR-F In Puerto Rico only, enter meter show whether the elevation is a feet meters feet meters s and/or 9 (see page 8 of ins s below the below the HAG. feet meters abo	request, complete Sections A, B, ers. bove or below the highest adjacent above or below the HAG. above or below the LAG. structions), the next higher floor HAG.			
E5. Zone AO only: If no flood depth ordinance? ☐ Yes ☐ No	number is available, is the top o			community's floodplain management			
SECTION	F - PROPERTY OWNER (C	OR OWNER'S RE	PRESENTATIVE) CERTIF	ICATION			
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. The statements in Sections A, B, and E are correct to the best of my knowledge.							
Property Owner's or Owner's Authorize	ed Representative's Name						
Address		Clty	State	ZIP Code			
Signature		Date	Telephoi	ne			
Comments							
Wiking III - I mid I - I i i i		· · · · · · · · · · · · · · · · · · ·	***************************************	42			
				Check here if attachments			
	SECTION G - COMM						
The local official who is authorized by law and G of this Elevation Certificate. Com							
	vas taken from other documental elevation information. (Indicate t			d surveyor, engineer, or architect who			
	d Section E for a building located						
G3. The following information (Item	ns G4G9.) is provided for comm	nunity floodplain ma	anagement purposes.				
G4. Permit Number	G5. Date Permit Issued		G6. Date Certificate Of Comp	liance/Occupancy Issued			
G7. This permit has been issued for:	☐ New Construction ☐	Substantial Impro	pvement				
G8. Elevation of as-built lowest floor (including basement) of the building: feet meters (PR) Datum							
G9. BFE or (in Zone AO) depth of floodin	ng at the building site:		feet meters (PR) Datum				
Local Official's Name		Title	Title				
Community Name		Telep	hone				
Signature	1. 100	Date					
Comments		######################################		45-04			

				Check here if attachments			

Building Photographs See Instructions for Item A6.

Y.	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 215 BRIGHTONWOODS DRIVE BUILDING 1	Policy Number
City POOLER State GA ZIP Code 31322	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.

FRONT



