U.S. DEPARTMENT OF HOMELAND SECURITY

ELEVATION CERTIFICATE

Federal Emergency Management Agency

Important: Read the instructions on pages 1-8.

OMB No. 1660-0008 Expires February 28, 2009

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		SECTION	ON A - PROP	ERTY INFORMA	TION	For Insurance Company Use:		
A1. Building Owner's Nam	Policy Number							
A2. Building Street Addres 215 BRIGHTONWOODS D	Company NAIC Number							
City POOLER S	tate GA ZIP C	ode 31322						
A3. Property Description (SHEPPARD STATION APA				scription, etc.)				
A4. Building Use (e.g., Re A5. Latitude/Longitude: La A6. Attach at least 2 photo A7. Building Diagram Num A8. For a building with a c a) Square footage of b) No. of permanent enclosure(s) walls c) Total net area of fi	it. 32 06 55.9 N ographs of the but ober 1 rawl space or en- crawl space or e flood openings In within 1.0 foot all ood openings in	Long. 81 15 53.8 W Ilding if the Certificate of closure(s), provide nclosure(s) the crawl space or cove adjacent grade A8.b	is being used to N/A sq ft sq in	A9. For a bu A9. For a bu a) Squ b) No. wall c) Tota	uilding with an attac lare footage of attac of permanent flood s within 1.0 foot ab al net area of flood	openings in the attached garage ove adjacent grade openings in A9.b sq in		
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1, NFIP Community Name CITY OF POOLER 130261			32. County Nam CHATHAM	e	±:	B3. State GEORGIA		
B4. Map/Panel Number 13051C0107	B5. Suffix	B6. FIRM Index Date SEPT 26, 2008	Effective	IRM Panel /Revised Date r 26, 2008	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 16.0		
FIS Profile B11. Indicate elevation data 312. Is the building located Designation Date	in a Coastal Bar		VD 1929		Other (Describe	s) ∐Yes ⊠No		
	SECTIO	N C - BUILDING EI	EVATION IN	FORMATION (S	URVEY REQUIR	(ED)		
C1. Building elevations are *A new Elevation Certifi C2. Elevations – Zones A1- below according to the Benchmark Utilized LO Conversion/Comments	cate will be requi A30, AE, AH, A (building diagram <u>CAL</u> Vertical Da	with BFE), VE, V1-V30 specified in Item A7.	of the building	AR, AR/A, AR/AE,		☑ FinIshed Construction H, AR/AO. Complete Items C2.a-g ment used.		
d) Attached garage (t	her floor st horizontal stru op of slab) f machinery or ed quipment in Con nished) grade (L	ctural member (V Zone quipment servicing the iments) AG)	es only)	N/A. ☒ fee N/A. ☒ fee N/A. ☒ fee 19.87 ☒ fee 19.2 ☒ fee	t	to Rico only)		
	SECTION	ON D - SURVEYOR,	ENGINEER,	OR ARCHITEC	CERTIFICATIO)N		
This certification is to be signiformation. I certify that the I understand that any false. Check here if comments. Certifier's Name MICHAEL. Title LAND SURVEYOR. Address 100 COMMERCE.	ned and sealed e information on statement may b s are provided or A. HUSSEY	by a land surveyor, en this Certificate represe e punishable by fine or	gineer, or archi ents my best ef r imprisonment	tect authorized by i forts to interpret the under 18 U.S. Cod License Number 25 AND SURVEYING,	aw to certify elevati data available. le, Section 1001.			
Signature	June	Date 06-10-2009		912-748-2100		14		

IMPORTANT: In these spaces,					r Insurance Company Use:	
Building Street Address (including Apl 215 BRIGHTONWOODS DRIVE BUIL	t., Unit, Suite, and/or Bldg. N LDING 2	o.) or P.O. Route and I	Box No.		licy Number	
ity POOLER State GA ZIP Code	31322				Company NAIC Number	
SECTION	N D - SURVEYOR, ENGI	NEER, OR ARCHITI	CT CERTIFICATION	(CONTIN	UED)	
opy both sides of this Elevation Cert	tificate for (1) community office	cial, (2) insurance agen	t/company, and (3) build	ing owner.		
omments C2e IS LOWEST ELEVA	TION OF AIR CONDITIONIN	NG UNITS SERVICING	SAID BUILDING			
For Zones AO and A (without BFE), cand C. For Items E1-E4, use natural E1. Provide elevation information for grade (HAG) and the lowest adja) Top, of bottom floor (including b) Top of bottom floor (including b) Top of bottom floor (including E2. For Building Diagrams 6-8 with (elevation C2.b in the diagrams) E3. Attached garage (top of slab) Is E4. Top of platform of machinery an E5. Zone AO only: If no flood depth ordinance?	complete Items E1-E5. If the grade, if available. Check the tree following and check the facent grade (LAG). If basement, crawl space, or a passement, crawl space, or a permanent flood openings proper in the building is feet and/or equipment servicing the mumber is available, is the tree Unknown. The local off	Certificate Is intended the measurement used. appropriate boxes to senciosure) is rovided in Section A Ite feet meters above to building is op of the bottom floor efficial must certify this in R (OR OWNER'S R	to support a LOMA or LO In Puerto Rico only, entended whether the elevation of the low whether the elevation of the low whether the elevation of the low the HAG.	OMR-F requer meters. It is above a soft instruction the HAG	or below the highest adjacent e or ☐ below the HAG. e or ☐ below the LAG. ctions), the next higher floor r ☐ below the HAG. munity's floodplain managemen	
he property owner or owner's author				t a FEMA-is	sued or community-issued BFE	
r Zone AO must sign here. The state Property Owner's or Owner's Authoriz		E are correct to the be	st of my knowledge.			
ddress		City	s	tate	ZIP Code	
William Co.	-December 1					
ignature 		Date		elephone	2	
omments				410.6		
	11-1100-11				Check here if attachme	
			ATION (OPTIONAL)			
local official who is authorized by la G of this Elevation Certificate. Com	w or ordinance to administer	r the community's flood and sign below. Checi	plain management ording the measurement used	ance can c I in Items G	omplete Sections A, B, C (or E), 8. and G9.	
. The information in Section C	was taken from other docum	entation that has been	signed and sealed by a	licensed su	rveyor, engineer, or architect wh	
is authorized by law to certify A community official complete	· ·				•	
☐ A community official complete ☐ The following Information (Iter				ilinumiy-iss	ded BFE) of Zolle AO.	
4. Permit Number	G5. Date Permit Issued		G6. Date Certificate O	f Compliand	e/Occupancy Issued	
This permit has been issued for:	☐ New Construction	 ☐ Substantial Impr	overnent			
Elevation of as-built lowest floor (inc			feet meters (PR) D	Datum	_	
BFE or (in Zone AO) depth of floodi	ng at the building site:		feet 🔲 meters (PR) 🛭	Datum		
cal Official's Name		Title				
ommunity Name		Tele	phone			
gnature		Date				
omments						
					☐ Check here if attachme	

Building PhotographsSee Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	For Insurance Company Use: Policy Number	
215 BRIGHTONWOODS DRIVE BUILDING 2		
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



REAR

