## U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

## **ELEVATION CERTIFICATE**

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OMB No. 1660-0008 Expires February 28, 2009

National Flood Insurance Program Important: Read the instructions on pages 1-8. SECTION A - PROPERTY INFORMATION For Insurance Company Use: A1. Building Owner's Name Policy Number **'ALLMARK HOMES** Juilding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Company NAIC Number 245 PINK DOGWOOD LANE City State ZIP Code **POOLER** GΑ 31322 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 365, THE ARBORS, PHASE 6B (SUBDIVISION MAP BOOK 31S, PAGES 86A-C) A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Latitude/Longitude: Lat. 32.1554°N Long. 081.2551°W Horizontal Datum: ☐NAD 1927⊠NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number3 A8. For a building with a crawl space or enclosure(s), provide: A9. For a building with an attached garage, provide: a) Square footage of crawl space or enclosure(s) \*439 sa ft a) Square footage of attached garage sq ft b) No. of permanent flood openings in the crawl space or No. of permanent flood openings in the attached garage enclosure(s) walls within 1.0 foot above adjacent grade 0 walls within 1.0 foot above adjacent grade 0 Total net area of flood openings in A8.b sq in c) Total net area of flood openings in A9.b 0 sq in SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name B3. State CITY OF POOLER CHATHAM 130261 GA B4. Map/Panel Number B5. Suffix B6. FIRM Index B7, FIRM Panel B8. Flood B9, Base Flood Elevation(s) (Zone Date Effective/Revised Date Zone(s) AO, use base flood depth) 130030 0020 C 09/20/1995 05/19/1987 ΑE 18.1 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. **⊠**FIRM Community Determined Other (Describe) B11. Indicate elevation datum used for BFE in Item B9: 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** ☐ CBRS ☐ OPA SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: ☐ Construction Drawings\* ■Building Under Construction\* \*A new Elevation Certificate will be required when construction of the building is complete. 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 C2.a-g below according to the building diagram specified in Item A7. Benchmark Utilized TBM Vertical DatumNGVD 29 Conversion/Comments N/A Check the measurement used. Top of bottom floor (including basement, crawl space, or enclosure floor) \*21.1 a) b) Top of the next higher floor 21.4 C) Bottom of the lowest horizontal structural member (V Zones only) ☐feet ☐meters (Puerto Rico only) N/A. d) Attached garage (top of slab) N/A. ☐ feet ☐ meters (Puerto Rico only) Lowest elevation of machinery or equipment servicing the building e) <u>\*20.8</u> (Describe type of equipment in Comments) Lowest adjacent (finished) grade (LAG) f) <u>20.5</u> ☑feet ☐meters (Puerto Rico only) g) Highest adjacent (finished) grade (HAG) 21.1 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 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. Check here if comments are provided on back of form. Certifier's Name License Number Joseph A. Hale, Jr. **GA RLS# 2886** NO. 2886 Title Company Name stered Land Surveyor Kern-Coleman & Co ress City State ZIP Code 6 Mall Court Savannah GA 31406

Signature

Telephone

912-354-8400

Date

12/04/07

## Building Photographs See Instructions for Item A6.

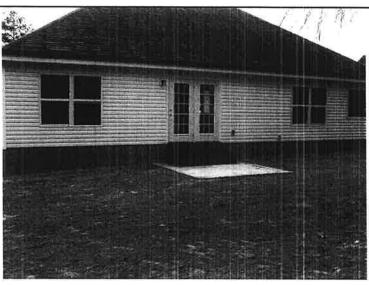
			For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			Policy Number
19 DÜNNOMAN E			
City	State	ZIP Code	Company NAIC Number
SAVANNAH	GA	31419	

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 VIEW** 12/04/07



**REAR VIEW** 12/04/07



LEFT SIDE VIEW 12/04/07



RIGHT SIDE VIEW 12/04/07



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