FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires July 31, 2002

Important: Read the instructions on pages 1 - 7.

		SECTION	A - PROPERTY OWN	R INFORMATION	N	For Insurance Company Use:
BUILDING OWNER'S NAME Albert Washington						Policy Number
BUILDING STREET ADDRES No. 255 LONGLEAF CIRCLE	Company NAIC Number					
CITY			ST	ATE	ZIP CC	DE
Pooler		7 7	GA		31322	
PROPERTY DESCRIPTION (Lot 189 Hunters Ridge Subd	ivision Phase 4B					
BUILDING USE (e,g., Resider Residential		Addition, Accessory, etc., l	Use Comments section if n	ecessary.)		
LATITUDE/LONGITUDE (OPT		HORIZONTAL DATU NAD 1927 NAC			GPS (Type): USGS Quad Map	Other:
		SECTION B - FLOO	DD INSURANCE RATE	MAP (FIRM) INF	ORMATION	
B1. NFIP COMMUNITY NAME 130261 Pooler	& COMMUNITY NU	MBER	B2, COUNTY NAME Chatham			B3, STATE GA
B4, MAP AND PANEL NUMBER 130030 0075	B5. SUFFIX C	B6. FIRM INDEX DAT 9/20/95	EFFECTIVE/R	// PANEL EVISED DATE /92	B8, FLOOD ZONE(S)	B9, BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 12,0
B10. Indicate the source of the	e Base Flood Elev	ation (BFE) data or bas	se flood depth entered i	n B9.	pe)-	
B11. Indicate the elevation da	tum used for the B	FE in B9: NGVD 1	929	☐ NAVD 1988	Other (Describe):	
B12. Is the building located in	a Coastal Barrier F	Resources System (CE	BRS) area or Otherwise	Protected Area (O	PA)? Yes 🛛 No	Designation Date
			G ELEVATION INFOR	MATION (SURVE	Y REQUIRED)	
Building elevations are ba			Building Under Con	struction*	Finished Construction	
*A new Elevation Certification	ate will be required	when construction of the	ne building is complete.			
C2. Building Diagram Number	1 (Select the build	ing diagram most simil	ar to the building for wh	ch this certificate is	s being completed - see	pages 6 and 7. If no diagram
accurately represents the	building, provide a	sketch or photograph.)			
C3. Elevations – Zones A1-A3	30, AE, AH, A (with	BFE), VE, V1-V30, V	(with BFE), AR, AR/A,	AR/AE, AR/A1-A3	D, ARVAH, ARVAO	
Complete Items C3a-i bei	ow according to the	building diagram spec	cified in Item C2. State	he datum used. If	the datum is different fr	om the datum used for the BFE in
Section B, convertine da	turn to that used to	r the BFE. Show field r	neasurements and datu	ım conversion calc	culation. Use the space	provided or the Comments area of
Section D or Section G, a Datum Conversio		ocument the datum cor	nversion.			
		- Hoo clayertian reference-		L FIDUR COV		43.2
Elevation reference mark a) Top of bottom floor	(including become	ine elevation reference				A N
☐ b) Top of next higher flo		it or enclosure)	<u>18</u> . <u>0</u> ft.(m	•	oossed Seal,	CORNE
c) Bottom of lowest hor		rember A/zenen ental	 ·	• •	8 8	(Grasse Ask
d) Attached garage (to)		lettiber (v zories only)	1			
e) Lowest elevation of		equiproent	<u>17</u> . <u>6</u> ft.(m)		and Emil	20 000
servicing the buildin		aquipment		t.(m)	License Number, Emb Signature, and	
f) Lowest adjacent grad	-		17. Oft.(m		lum l	6/2/
g) Highest adjacent gra			17. 6ft.(m)	tii .	Se Se Sic	NO SURVEY STATE
h) No. of permanent op		s) within 1 ft. above adi	acent grade		5	AFE A WASH
☐ i) Total area of all perm	anent openings (flo		_sq. in. (sq. cm)			7
			OR, ENGINEER, OR			
This certification is to be sign	gned and sealed b	y a land surveyor, er	ngineer, or architect a	uthorized by law t	o certify elevation inf	ormation.
I certify that the information	in Sections A, B,	and C on this certific	cate represents my be	st efforts to interp	oret the data available	
I understand that any false CERTIFIER'S NAME Michael A.	Statement may be	e punishable by fine o	or imprisonment unde			
	Пивобу				CENSE NUMBER 2509	
TITLELand Surveyor			COMP	PANY NAME Steven	son & Palmer Engineeri	ng, Inc
DRESS P.O. Box 15845	_	4	CITY		STATE	ZIP CODE
SIGNATURE \)	11	Savar	nan	GA	31416
A S	are.	afris	DATE 9/28/0	0	TELEPHO 912-355-9	

	he corresponding information from Section			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apr No. 255 LONGLEAG CIRCLE	t., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AN	ID BOX NO.		Policy Number
CITY Pooler	STAT GA	ΓE	ZIP CODE 31322	Company NAIC Number
SI	ECTION D - SURVEYOR, ENGINEER, OR A	RCHITECT	CERTIFICATION (CONTINUED)	
Copy both sides of this Elevation Certification	ate for (1) community official, (2) insurance age	ent/company	, and (3) building owner.	
COMMENTS				
CECTION E DI III DIN	IC ELEVATION INFORMATION (OUR)	OT BEOLU		Check here if attachments
	IG ELEVATION INFORMATION (SURVEY N			
Section C must be completed.	mplete Items E1 through E4. If the Elevation	Certificate is	intended for use as supporting in	formation for a LOMA or LOMR-F,
•	ouilding diagram most similar to the building for	which this ce	ertificate is being completed – see p	ages 6 and 7 If no diagram accurately
represents the building, provide a sketo	ch or photograph.)			
E2. The top of the bottom floor (including ba	asement or enclosure) of the building is ft.(m	ı)in.(cm)	above or Delow (check or	ne) the highest adjacent grade.
E3. For Building Diagrams 6-8 with opening	s (see page 7), the next higher floor or elevate	d floor (eleva	ation b) of the building is ft.(m)	in.(cm) above the highest adjacen
grade.				
4. For Zone AO only: If no flood deptin hur	mber is available, is the top of the bottom floor local official must certify this information in Se	elevated in	accordance with the community's	floodplain management ordinance?
	CTION F - PROPERTY OWNER (OR OWNE		SENTATIVE) CERTIFICATION	
	representative who completes Sections A, B, a			munity-issued REE) or Zono AO mus
sign here.		114 2 101 2011	on the second section of the second section sections	inding-issued by E/O/ Zone AO mus
PROPERTY OWNER'S OR OWNER'S AUTHO	ORIZEO REPRESENTATIVE'S NAME			
	NIZED NEI NEGENTATIVES NAIVIE			
ADDRESS		CITY	STAT	E ZIP CODE
SIGNATURE		DATE	TELE	PHONE
COMMENTS				
				Check here if attachments
	SECTION G - COMMUNITY IN	FORMATIO	N (OPTIONAL)	CHeck Here II attachiments
— he local official who is authorized by law or o	ordinance to administer the community's floodp			ions A. B. C (or E), and G of this Fleva
ertificate. Complete the applicable item(s)	and sign below.			
1. The information in Section C was tal	ken from other documentation that has been si	igned and en	nbossed by a licensed surveyor, er	ngineer, or architect who is authorized
state or local law to certify elevation	information. (Indicate the source and date of	the elevation	n data in the Comments area below	W.)
 The following information /Items G4. 	tion E for a building located in Zone A (without -G9) is provided for community floodplain man	aremont bu	sued or community-issued BFE) or	Zone AO.
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	agement pu		ID IANGE GOOD IN THE STATE OF T
34. I ENVIN NOWIDER	GO, DATE FERIVITI ISSUED		G6, DATE CERTIFICATE OF COM	IPLIANCE/OCCUPANCY ISSUED
7. This permit has been issued for: New	Construction Substantial Improvement			
8. Elevation of as-built lowest floor (includin	ng basement) of the building is:		ft.(m)	Datum:
9. BFE or (in Zone AO) depth of flooding at	the building site is:		ft.(m)	Datum:
LOCAL OFFICIAL'S NAME		TIT	LE	
COMMUNITY NAME		TEL	EPHONE	
SIGNATURE		DA	ſĒ	
COMMENTS				
1				
/				
				Check here if attachments

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