I FOLIVAL CHILINGENCI MINIMAGEMENI AGENCI NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

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

		SECTION A	- PROPERTY OWNER IN			T	or Insurance Company Use
BUILDING OWNER'S NAME							Policy Number
Mr. And Mrs Chris Holland							Oik y Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 328 Spanton Cresent							Company NAIC Number
CITY Pooler			STATE GA		ZIP (CODE	
PROPERTY DESCRIPTI	ON (Lot and Block	Numbers, Tax Parcel N	umber, Legal Description, et	c.)	3132		
		lantial Addition Assessed	ry, etc. Use a Comments ar				
Residential		Jeridai, Addition, Accesso	ry, etc. Use a Comments ar	rea, if nec	essary.)		
LATITUDE/LONGITUDE (##°-##'-##.##" or ##.	(OPTIONAL) #####°)	HORIZON NAD 1927	NTAL DATUM: ☑ NAD 1983	SC	URCE: GPS (1 USGS		ap Other:
	SI	CTION B - FLOOD IN	SURANCE RATE MAP (FIRM) IN	FORMATION		
B1. NFIP COMMUNITY NAME	& COMMUNITY NU	MBER B2	2. COUNTY NAME			B3. STA	TE
130030			athan			Ga	J.C.
B4, MAP AND PANEL NUMBER 0070	B5. SUFFIX	B6. FIRM INDEX DATE 2/16/01	B7, FIRM PANEL EFFECTIVE/REVISED D/ 02/1601	ATE	B8. FLOOD ZONE(S		BASE FLOOD ELEVATION(S) Zone AO, use depth of flooding) 14.5
B10. Indicate the source of the	e Base Flood Eleva	ation (BFE) data or base fl	1				14.5
☐ FIS Profile ☐	⊠ FIRM	☐ Community Determined	mined Othe	r (Describ	e):		
B11. Indicate the elevation da	tum used for the B	FE in B9: 🔲 NGVD 1929	I⊠ NAV	D 1988 I	Other (Describe):	:	
B12. Is the building located in	a Coastal Barrier F	Resources System (CBRS) area or Otherwise Protected	Area (OF	A)?☐ Yes ☒ No	Desig	nation Date
	SECT	10N C - BUILDING EL	EVATION INFORMATION	N (SURV	EY REQUIRED)		
C1. Building elevations are bas			Building Under Construction*	⊠F	inished Construction		
*A new Elevation Certifica	te will be required	when construction of the b	uilding is complete.	v 8			
C2. Building Diagram Number	$\underline{5}$ (Select the build	ng diagram most similar to	the building for which this ce	rtificate is	being completed - so	e pages	6 and 7. If no diagram
accurately represents the	building, provide a	sketch or photograph.)					g
3. Elevations – Zones A1-A3	0, AE, AH, A (with	BFE), VE, V1-V30, V (with	h BFE), AR, AR/A, AR/AE, Al	R/A1-A30	, AR/AH, AR/AO		
Complete Items C3a-i be	slow according to the	ne building diagram specifi	ed in Item C2. State the datur	n used. If	the datum is differen	t from the	e datum used for the BFE in
Section B, convert the dat	um to that used for	the BFE. Show field mea	surements and datum conver	rsion calcu	lation. Use the space	e provide	ed or the Comments area of
Section D of Section G, as	sappropriate, to do	curnent the datum conver	sion.		·	•	
Datum Conversion		-					
Elevation reference mark u	usedDoes t	he elevation reference ma	rk used appear on the FIRM?	Yes	: □ No		
o a) Top of bottom floor (ii		or enclosure)	<u>17</u> . <u>27</u> ft.(m)		Seal,		
 b) Top of next higher flo 			<u>na</u> ft.(m)		S S	-	EORO
o c) Bottom of lowest hori		ember (V zones only)	<u>na</u> ft_(m)		License Number, Embossed Signature, and Date		GGISTE
o d) Attached garage (top o			14. 96 ft.(m)		ğe	//	AFE CAR T
o e) Lowest elevation of m					, a .	$\parallel \parallel \parallel$	No. 1850
servicing the building		mments area)	0.00 ft.(m)		ture	اچا	- 1050
 f) Lowest adjacent (finish 			13 . 62 ft.(m)		Nu Sen j	113	1/2 3/0-/
 g) Highest adjacent (finis 			14. 69 ft.(m)		Se	1/2	SURVE SURVE
 h) No. of permanent ope 	enings (flood vents)	within 1 ft. above adjacen	t grade		je j	1	O. PART
o i) Total area of all perma	nent openings (flo		q. in. (sq. cm)		- L		
	SEC1	TON D - SURVEYOR.	ENGINEER, OR ARCHIT	FCT CF	RTIFICATION		
This certification is to be sig	ned and sealed b	y a land surveyor, engin	eer, or architect authorized	by law to	certify elevation in	formatio	n
i ceruity that the information	in Sections A, B,	and C on this certificate	represents my best efforts	to intern	ret the data availah	le.	15.
I understand that any false s	statement may be	punishable by fine or in	nprisonment under 18 U.S.	Code, Se	ection 1001.		
CERTIFIER'S NAME John O.	. Parker			LIC	ENSE NUMBER 18	350	
TITLERLS #1850			COMPANY NA	ME John	O. Parker Surveying	R	
ADDRESS			CITY				
9.0. BOX 233			CITY Gleenville		STATE		ZIP CODE
GNATURE Z	1		DATE		GA	LIONE	30427
TO A UNIO			04/23/07		TELEP 912-826		
at here			7 "2001		312-020	/ JZ00	

BUILDING STREET ADDRESS / Incl.	ces, copy the corresponding information funding Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE	from Section A.		For Insurance Company Use:
328 Spanton Cresent	uvuriy Apr., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE	: AND BOX NO.		Policy Number
CITY Pooler		STATE GA	ZIP CODE 31322	Company NAIC Number
	SECTION D - SURVEYOR, ENGINEER, OF	R ARCHITECT CERT		JED)
	Certificate for (1) community official, (2) insurance			
COMMENTS				
SECTION E - BUILD	ING ELEVATION INFORMATION (SURVE	Y NOT REQUIRED) F	OR ZONE AO AND Z	Check here if attachmer
or Zone AO and Zone A (without E	BFE), complete Items E1 through E4. If the Elevat	ion Certificate is intended	for use as supporting inf	ormation for a LOMA or LOMPLE
ection of must be completed.				
Building Diagram Number_(Sel	lect the building diagram most similar to the building	for which this certificate is	s being completed – see p	ages 6 and 7. If no diagram accurate
represents the building, provide	e a sketch or photograph.)			
 The top of the bottom hoor (incit natural grade, if available). 	uding basement or enclosure) of the building is fi	r(m)in.(cm) [_] above	or Libelow (check on	e) the highest adjacent grade. (Use
	openings (see page 7), the next higher floor or elev	rated floor (elevation b) of	fthe huilding is 4 ()	in (one) observe the Link of F
grade. Complete items Co.n an	1a C3.1 on Iront of form.			
4. For Zone AO only: If no flood d	epth number is available, is the top of the bottom fi	loor elevated in accordan	ce with the community's	floodplain management ordinance?
LI IES LI INO LI UNKNOV	vn. The local official must certify this information in	n Section G.		
The man and the same of the sa	SECTION F - PROPERTY OWNER (OR OW	NER'S REPRESENT	ATIVE) CERTIFICATI	ON
i he property owner or owner's autr ssued BFF) or Zone AO must sin	norized representative who completes Sections A, I n here. The statements in Sections A, B, C, and E	B, C (Items C3.h and C3.i	only), and E for Zone A (v	vithout a FEMA-issued or communit
PROPERTY OWNER'S OR OWN	IER'S AUTHORIZED REPRESENTATIVE'S NAM	are correct to the best o	r my knowledge.	
	- TO NOT TO THE OUT TH			
ADDRESS		CITY	STAT	E ZIP CODE
SIGNATURE		DATE	TELE	PHONE
COMMENTS		0-100-00-00-00-00-00-00-00-00-00-00-00-0		
70/111/2				
	OFOTON O COMMUNICATION			Check here if attachments
e local official who is authorized by	SECTION G - COMMUNITY	INFORMATION (OPT	TONAL)	
a uncare. Complete the applicable	law or ordinance to administer the community's floo item(s) and sign below.			
. The information in Section C	was taken from other documentation that has been	n signed and embossed b	v a licensed surveyor en	nineer or architect who is authorized
state or local law to certify er	evalion information. (Indicate the source and date	of the elevation data in the	he Commente area holou	eX.
 A community official complet 	ted Section E for a building located in Zone A (with	out a FFMA-issued or co	mmunity-issued BFE) or	Zone AO.
	ms G4-G9) is provided for community floodplain m	nanagement purposes.		
64. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DA	TE CERTIFICATE OF COM	PLIANCE/OCCUPANCY ISSUED
. This permit has been issued for F				
. Elevation of as-built lowest floor (including basement) of the building is:	IL	64 (ma)	D-4
. BFE or (in Zone AO) depth of floo	oxing at the building site is:		ft.(m) ft.(m)	Datum: Datum:
OCAL OFFICIAL'S NAME		TITLE		Damil
OMMUNITY NAME				
IGNATURE		TELEPHONE		
		DATE		
OMMENTS				
9				
				Check here if attachments