30.00

U.S. DEPARTMENT OF HOMELAND SECURITY

## **ELEVATION CERTIFICATE**



OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency onal Flood Insurance Program

Important: Read the instructions on pages 1-8,

	S	ECTION A - PROPERTY INFOR	MATION	For Insurance Company Use:
A1. Building Owner's Name	KAYE BLOME			Policy Number
	(including Apt., Unit, Suite, and	or Bldg. No.) or P.O. Route and Box	No.	Company NAIC Number
POOLER		State State		ZIP Code 31322
A3. Property Description (Lo		cel Number, Legal Description, etc.)		
4. Building Use (e.g., Resid		on, Accessory, etc.) RESIDE	NTIAL	
5. Latitude/Longitude: Lat.	N 32°04'28.3"	Long. W 81017'45.4	Horizontal [	Datum: NAD 1927 NAD 1983
<ol> <li>Attach at least 2 photogram.</li> <li>Building Diagram Number</li> </ol>		ficate is being used to obtain flood in	surance.	
· · · · · · · · · · · · · · · · · · ·	wl space or enclosure(s), provio rawl space or enclosure(s)	h -	a building with an atta Square footage of atta	nched garage, provide:
b) No. of permanent flo	od openings in the crawl space	or b)	No. of permanent floo	d openings in the attached garage
enclosure(s) walls w c) Total net area of floo	ithin 1.0 foot above adjacent gr od openings in A8.5			bove adjacent grade _ ~ A   I openings in A9.b   ~ A   sq in
NFIP Community Name I		DD INSURANCE RATE MAP (F	IRWI) INFORMATIC	B3. State
TOWN OF POOL		CHATHAM		CDEDIZOIS
B4. Map/Panel Number	B5. Suffix B6. FIRM Inc		B8. Flood	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
305100180	F 09-26	Effective/Revised Date	Zone(s)	/4.5
	e Base Flood Elevation (BFE) o	data or base flood depth entered in It	em B9.	
	FIRM Community Det	= '		
	n used for BFE in Item B9: 🔲 I na Coastal Barrier Resources S	NGVD 1929 X NAVD 1988 System (CBRS) area or Otherwise Pr	Other (Describe) otected Area (OPA)?	Yes 🔀 No
Designation Date		CBRS _ OPA	, ,	
	SECTION C - BUILDI	NG ELEVATION INFORMATION	I (SURVEY REQUI	RED)
. Building elevations are ba	esed on: Construction Dr			Finished Construction
*A new Elevation Certification	ate will be required when constr	uction of the building is complete.		
<ul> <li>Elevations – Zones A1-A3 below according to the bu</li> </ul>	30, AE, AH, A (with BFE), VE, \ uilding diagram specified in Item	/1-V30, V (with BFE), AR, AR/A, AR 1 A7.	/AE, AR/A1-A30, AR/	AH, AR/AO. Complete Items C2.a-g
Benchmark Utilized PL	ATTED WESTBROOM	C S/D B.M. Vertical Da	tum_NAYD	1988
Conversion/Comments _	NONE		Check the measure	ement used
a) Top of bottom floor (	including basement, crawl spac	e, or enclosure floor)	10-2	eters (Puerto Rico only)
b) Top of the next higher	er floor	A-1A	feetm	eters (Puerto Rico only)
	l horizontal structural member (\	V Zones only)		eters (Puerto Rico anly) eters (Puerto Rico anly)
<ul><li>d) Attached garage (top</li><li>e) Lowest elevation of r</li></ul>	o of slad) machinery or equipment servicia			eters (Puerto Rico only)
	uipment in Comments)	(3.5		
<ul> <li>f) Lowest adjacent (fining)</li> <li>f) Highest adjacent (fining)</li> </ul>		<u> </u>	- Control	eters (Puerto Rico only) eters (Puerto Rico only)
	SECTION D. SUDVE	YOR, ENGINEER, OR ARCHIT	ECT CEPTIFICATI	ION
his certification is to be sign		or, engineer, or architect authorized	The state of the s	
		epresents my best efforts to interpre fine or Imprisonment under 18 U.S.		CORC
_	are provided on back of form.			GEGISTERE
	are provided on back or form.			161 1
Pertifier's Name JAMES M. KEATON, RL	2.	License Numb	er GEDRGIA #2743	No. 2743
itle  LAND SURVEYOR	Company Nan	CHATHAM SURVEYING SER	VICEC THE	TO E IN
Address P. D. BOX 61649	City SAVANNA	Slate	ZIP Code	TO SURVE OF
ignature	AA Da	ate Telephone	-303-0305	ES M. KEA
5		1 06,2009 912		N. San San
MA Form 81-31 Februa	ry 2006	See reverse side for continuat	ion	Penlaces all previous edition

IMPORTANT: In these spa-				For Insurance Company Use:
Building Street Address (includin		. No.) or P.O. Route and Box N	0.	Policy Number
		State	ZIP Code	Company NAIC Number
YOOLER SEC	CTION D - SURVEYOR, EN	GINEER, OR ARCHITECT	3/322 CERTIFICATION (CON	I NTINUED)
Copy both sides of this Elevation			here were the control of the control	
Comments CZa 15	& SLAB ON	A BACK FILLS	D FOUNDAT	ION. ITEM CZ
S HVAC EQUIP	ON A CONCR	ETE PAD. TA	HERE IS A	DETATCHED
DARAGE AT	ELEVATION 1	1.5. 3-1	K -	
ignature M. 1	245	MARCH 06.	2009	Check here if attach
				AND ZONE A (WITHOUT BEE
b) Top of bottom floor (inc E2. For Building Diagrams 6-8 (elevation C2.b in the diag E3. Altached garage (top of sli E4. Top of platform of machine E5. Zone AO only: If no flood	cluding basement, crawl space, cluding basement, crawl space, is with permanent flood openings grams) of the building is leb) is feet ery and/or equipment servicing	or enclosure) iss provided in Section A Items 8 feet meters above or the building is he top of the bottom floor elevation.	above or below to below the HAG. feet meters and accordance with the	belowe or below the LAG. Instructions the next higher floor the HAG.
	CTION F - PROPERTY OWN			FICATION
perty Owner's or Owner's Au  Address	Ithorized Representative's Nam	ALCOHOL STATES	State	ZIP Code
Signature		Date	Telepho	ine
Comments				
				(N-V
		3.004		Check here if allace
		COMMUNITY INFORMATION		
ne local official who is authorized nd G of this Elevation Certificate	a by law of ordinance to admini . Complete the applicable item	ster the community's hoodplair	i management ordinance	can complete Secions A, b, c (o
1. The information in Section is authorized by law to a community official columns.		cumentation that has been sign ndicate the source and date of g located in Zone A (without a l	ed and sealed by a licens the elevation data in the C FEMA-issued or communi	ms G8. and G9. ed surveyor, engineer, or architer Comments area below.)
1. The information in Section is authorized by law to community official colors.  The following information	tion C was taken from other doc certify elevation information. (In impleted Section E for a building	numentation that has been sign ndicate the source and date of g located in Zone A (without a l for community floodplain manage	ed and sealed by a licens the elevation data in the C FEMA-issued or communi gement purposes.	ms G8. and G9. ed surveyor, engineer, or architer Comments area below.)
1. The information in Sectific authorized by law to a community official countries.  2. A community official countries.  3. The following information.  G4. Permit Number.  7. This permit has been issued to a countries.  8. Elevation of as-built lowest flower.  9. BFE or (in Zone AO) depth of a countries.	tion C was taken from other doc certify elevation information. (In impleted Section E for a building on (Items G4G9.) is provided f G5. Date Permit Issue for: New Construction our (including basement) of the	cumentation that has been sign indicate the source and date of g located in Zone A (without a lifer community floodplain managed G6  Substantial Improvement	ed and sealed by a licens the elevation data in the C FEMA-issued or communi gement purposes.  Date Certificate Of Com	ms G8. and G9. ed surveyor, engineer, or architectomments area below.) ty-issued BFE) or Zone AO. pliance/Occupancy Issued PR) Datum
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## **Building Photographs**

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

SEATON CROSS

City Pooler State ZIP Code 31322

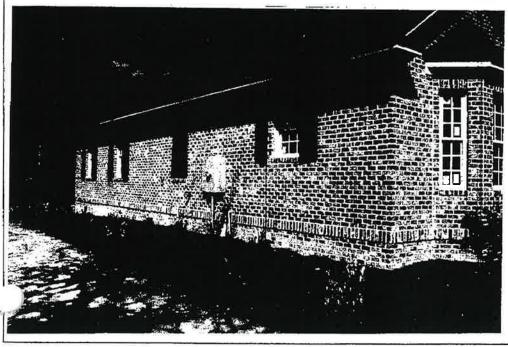
Company NAIC Number

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.

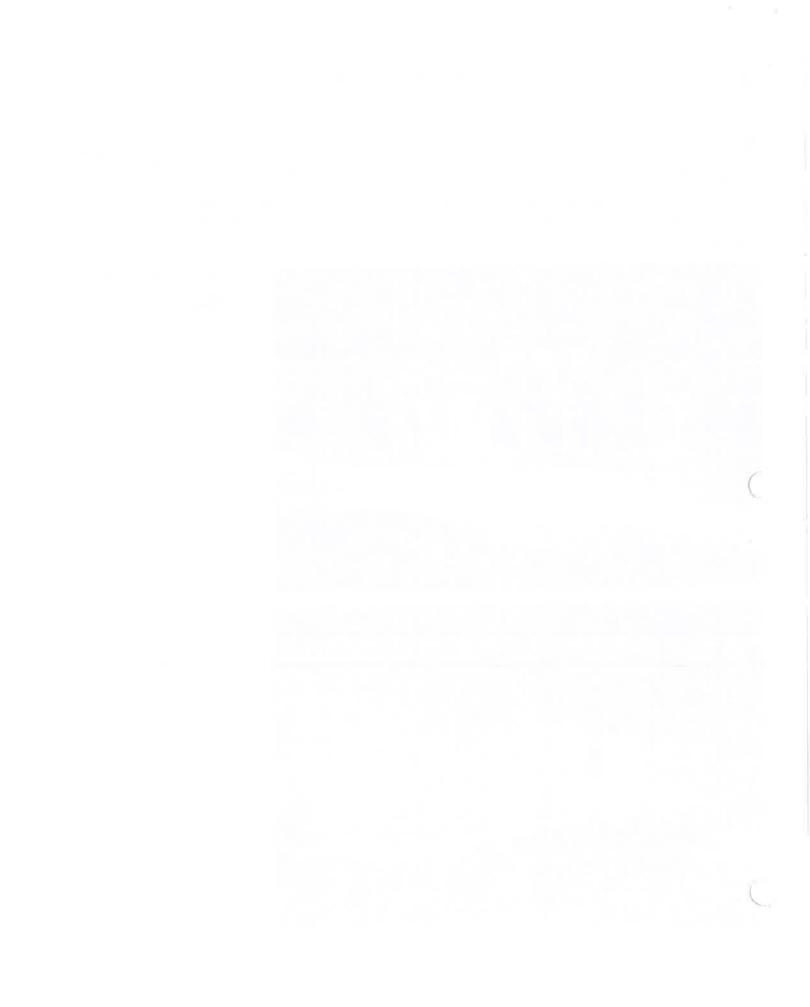


PHOTOS TAKEN
MARCH 06,2009

FRONT VIEW



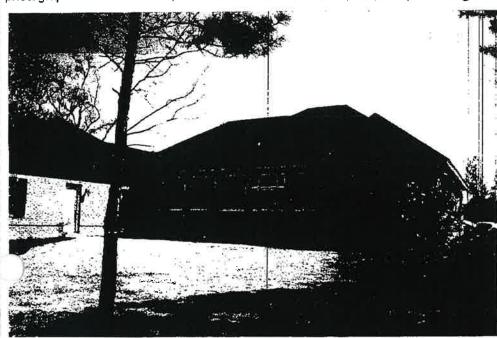
LEFT SIDE VIEW



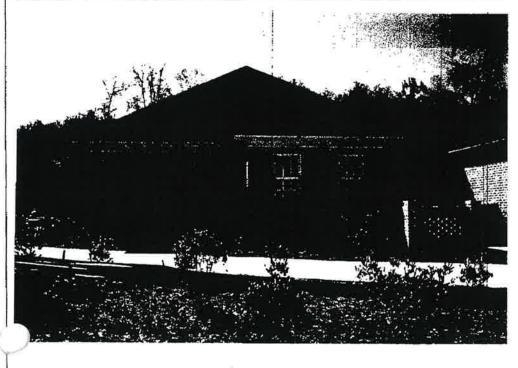
## Building Photographs Continuation Page

			For Insurance Company Use:
2/	iing Apt., Unit, Suite, and/or Bldg. No.) or P.	O. Route and Box No.	Policy Number
CityPooler	State	ZIP Code 3 / 3 2 2	Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View."



REAR VIEW



RIGHT SIDE VIEW

