ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name: D.R. HORTON
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
1607 DEANNE DRIVE
City: BEAUFORT State: SC Zip Code: 29902

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
LOT 97 LIVE OAKS AT BATTERY CREEK SUBDIVISION

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL

A5. Latitude/Longitude: Lat. 32°25'58.03"N Long. 80°42'24.30"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 Number: 1B

A8. For a building with a crawlspace or enclosure(s):
   a) Square footage of crawlspace or enclosure(s) N/A sq ft
   b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A
   c) Total net area of flood openings in A8.b N/A sq in
   d) Engineered flood openings? ☐ Yes ☑ No

A9. For a building with an attached garage:
   a) Square footage of attached garage N/A sq ft
   b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A
   c) Total net area of flood openings in A9.b N/A sq in
   d) Engineered flood openings? ☐ Yes ☑ No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number
   CITY OF BEAUFORT 450026
B2. County Name
   BEAUFORT
B3. State
   SOUTH CAROLINA

B4. Map/Panel Number
   450025 0065
B5. Suffix D
B6. FIRM Index Date
   NOV. 4, 1992
B7. FIRM Panel Effective/Revised Date
   SEPT. 29, 1986
B8. Flood Zone(s)
   A8
B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
   13.0

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
   ☐ FIS Profile ☑ 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* ☑ Finished Construction
   "A new Elevation Certificate will be required when construction of the building is complete.

   Complete Items C2.a-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.
   Benchmark Utilized: SEE COMMENTS Vertical Datum: NGVD 1929
   Conversion/Comments: SEE COMMENTS ON BACK
   
   Check the measurement used.
   a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 16.10
   b) Top of the next higher floor N/A
   c) Bottom of the lowest horizontal structural member (V Zones only) N/A
   d) Attatched garage (top of slab) 14.30
   e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 14.40
   f) Lowest adjacent (finished) grade next to building (LAG) 12.86
   g) Highest adjacent (finished) grade next to building (HAG) 13.45
   h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 12.69

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. Were latitude and longitude in Section A provided by a licensed land surveyor? ☐ Yes ☑ No

Certifier's Name: ROBERT L. ARRINGTON
License Number: SC, PLS-19889
Title: PROFESSIONAL LAND SURVEYOR
Company Name: RLA ASSOCIATES, PA
Address: 100 SOUTH MAIN STREET, SUMMERTON
City: SUMMERVILLE
Signature: ____________________________ Date: 4/4/2012 Telephone: 843-879-9091

FEMA Form 81-31, Mar 09
See reverse side for continuation. Replaces all previous editions
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of the Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments

BENCHMARK USED NVGD 29 (03/21/89) = 16.87' DESIGNATION: Y 119, PID: CKZ155, STATE/COUNTY: SC/HANDS, UPR

ELEVATION OR CODE TAKEN BULK 00/10/2012 AT HVAC

Date: 10/2/12

Signature:

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND Zone C (WITHIN T1)

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LCMR request, complete Sections A, B, and C. For items E1-E5 use natural grade, if available. Check the measurement used in Puerto Rico only, enter meters.

E1 Provide elevation information for the following and check appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).

a) Top of bottom floor (including basement, crawlspace, or enclosure) is ______ feet ______ meters above or below the HAG.

b) Top of bottom floor (including basement, crawlspace, or enclosure) is ______ feet ______ meters above or below the LAG.

E2 For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of instructions), the next higher floor elevation (c2 in the diagrams) of the building is ______ feet ______ meters above or below the HAG.

E3 Attached garage (top of slab) is ______ feet ______ meters above or below the HAG.

E4 Top of platform of machinery and/or equipment servicing the building is ______ feet ______ meters above or below the HAG.

E5 Zone AO only. If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner’s or Owner’s Authorized Representative’s Name

Address

City

State

ZIP Code

Signature

Date

Telephone

Comments

☐ Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G. Provide Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9.

G1 The information in Section C was taken from other documentation that has been signed and sealed by a licensed survey, engineer, or architect who is authorized by law to certify elevation information. Indicate the source and date of the elevation data in the Comments area below.

G2 A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3 The following information (Items G4-G9) is provided for community floodplain management purposes.

G4 Permit Number

G5 Date Permit Issued

G6 Date Certificate Of Compliance/Occupancy Issued

G7 This permit has been issued for:  □ New Construction  □ Substantial Improvement

G8 Elevation of as-built/lowest floor (including basement) of the building: ______ feet ______ meters (PR Datum)

G9 BFE or (in Zone AO) depth of flooding at the building site: ______ feet ______ meters (PR Datum)

G10 Community's design flood elevation: ______ feet ______ meters (PR Datum)

Local Official’s Name

Title

Community Name

Telephone

Signature

Date

Comments

☐ Check here if attachments

FEMA Form 81-31, Mar 06

Replaces all previous editions
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.
1607 DEANNE DRIVE

City BEAUFORT State SC ZIP Code 29902

For Insurance Company Use:
Policy Number

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.