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.
1639 ROLLING WATERS WAY

City BEAUFORT State SC ZIP Code 29935

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

LOT 7, RIVERPOINTE SUBDIVISION

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

A5. Latitude/Longitude: Lat. 32°23'58.03"N Long. 80°42'24.30"W

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number 1A

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 400 sq ft
   b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0
   c) Total net area of flood openings in A9.b 0 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

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on:
   ☐ Construction Drawings* ☐ Building Under Construction* ☑ Finished Construction

*C a new Elevation Certificate will be required when construction of the building is complete.


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) 13.83
   ☑ feet ☐ meters (Puerto Rico only)

b) Top of the next higher floor N/A
   ☑ feet ☐ meters (Puerto Rico only)

c) Bottom of the lowest horizontal structural member (V Zones only) N/A
   ☑ feet ☐ meters (Puerto Rico only)

d) Attached garage (top of slab) N/A
   ☑ feet ☐ meters (Puerto Rico only)

e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 13.53
   ☑ feet ☐ meters (Puerto Rico only)

f) Lowest adjacent (finished) grade next to building (LAG) 13.23
   ☑ feet ☐ meters (Puerto Rico only)

g) Highest adjacent (finished) grade next to building (HAG) 13.43
   ☑ feet ☐ meters (Puerto Rico only)

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 13.23
   ☑ feet ☐ meters (Puerto Rico only)

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 available data. 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 JEFFREY W. SAYWYER License Number SC, PLS-28590

Title PROFESSIONAL LAND SURVEYOR Company Name RLA ASSOCIATES, PA

Address 100 S. MAIN STREET, SUITE L City SUMMERVILLE State SC ZIP Code 29483

Signature [Signature] Date 12/14/11 Telephone 843-879-9091

Replaces all previous editions

See reverse side for continuation.
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

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

Comments: BENCHMARK USED NGVD 29 (03/21/89) = 16.87', DESIGNATION - 7 119, PID - CK2221, STATE/COUNTY - BEAUFORT, USGS Quad - BEAUFORT (1998), ELEVATION FOR C2(E) TAKEN ON HVAC PAD AT HVAC.

Signature: [Signature]  
Date: [12/14/11]

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

E1. Provide elevation information for the following and check the 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.b 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 of this 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 surveyor, 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 is ______ 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

Local Official's Name:  
Title:  
Community Name:  
Telephone:  
Signature:  
Date:  
Comments:

☐ Check here if attachments:

Replaces all previous editions
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
1639 ROLLING WATERS WAY

City BEAUFORT State SC ZIP Code 29935

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.