

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use
BUILDING OWNER'S NAME STACIE VAN VULPEN		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX 108 PALMER LANE		Company NAIC Number
CITY BEAUFORT	STATE SC	CODE 29907

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
LOT 118 BATTERY POINT 120 29A 0286

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary)
RESIDENTIAL

LATITUDE/LONGITUDE (OPTIONAL) (#° - ##' - ###.###" or ##.#####) HORIZONTAL DATUM: NAD 1927 NAD 1983 SOURCE: GPS (Type): USGS Quad Map Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER CITY OF BEAUFORT 450026		B2. COUNTY NAME BEAUFORT		B3. STATE S. C.	
B4. MAP AND PANEL NUMBER 450026 0065	B5. SUFFIX D	B6. FIRM INDEX DATE 11/4/92	B7. FIRM PANEL EFFECTIVE/REVISED DATE 9/29/86	B8. FLOOD ZONE(S) A-8	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 13.00

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe):

B11. Indicate the elevation datum used for the BFE in B9: XX 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

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

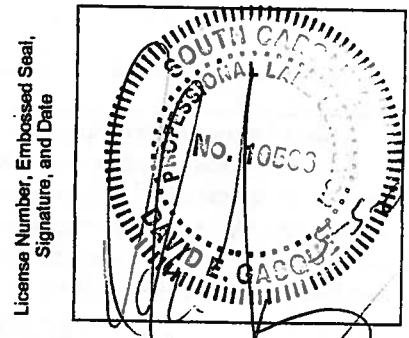
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 8 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO
Complete Items C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
Datum 1929 Conversion/Comments

Elevation reference mark used BM. Does the elevation reference mark used appear on the FIRM? Yes No

- ▶ a) Top of bottom floor (including basement or enclosure) 8.90 ft.(m)
- ▶ b) Top of next higher floor 14.55 ft.(m)
- ▶ c) Bottom of lowest horizontal structural member (V zones only) N/A ft.(m)
- ▶ d) Attached garage (top of slab) 8.95 ft.(m)
- ▶ e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 14.45* t.(m)
- ▶ f) Lowest adjacent (finished) grade (LAG) 8.23 ft.(m)
- ▶ g) Highest adjacent (finished) grade (HAG) 8.94 ft.(m)
- ▶ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 14**
- ▶ i) Total area of all permanent openings (flood vents) in C3.h 3587 sq. in. (sq. cm)



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 in Sections A, B, and C 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.

CERTIFIER'S NAME David E. Gasque LICENSE NUMBER 10506

TITLE Professional Land Surveyor COMPANY NAME Gasque & Associates, Inc.

ADDRESS 28 Professional Village Circle CITY Beaufort STATE SC ZIP CODE 29907

SIGNATURE [Signature] DATE 5/3/05 TELEPHONE 843-522-1798

