

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

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

SECTION A – PROPERTY INFORMATION				FOR INSURANCE COMPANY USE
A1. Building Owner's Name CRAVEN COTTAGE				Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 806 CRAVEN STREET				Company NAIC Number:
City BEAUFORT	State South Carolina	ZIP Code 29908		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PB:125 PG:175 TAX PARCEL NUMBER R120 004 000 1013 0000				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) NON-RESIDENTIAL				
A5. Latitude/Longitude: Lat. 32°25'56.89"N Long. 80°40'16.74"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 5				
A8. For a building with a crawlspace or enclosure(s):				
a) Square footage of crawlspace or enclosure(s)		N/A	sq ft	
b) Number 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) Number 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 450026 / 0005	B5. Suffix D	B6. FIRM Index Date 9/29/86	B7. FIRM Panel Effective/ Revised Date 9/29/86	B8. Flood Zone(s) A11
				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/Source: _____				
B11. Indicate elevation datum used for BFE in Item B9: ☒ NGVD 1929 ☐ NAVD 1988 ☐ Other/Source: _____				
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No Designation Date: _____ ☐ CBRS ☐ OPA				

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OMB No. 1660-0008
Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 806 CRAVEN STREET	
City BEAUFORT	ZIP Code 29908
Company NAIC Number	

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. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, ARA, AR/AE, AR/A1–A30, AR/AH, AR/AO.
Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: SITE Vertical Datum: NGVD 29

Indicate elevation datum used for the elevations in items a) through h) below.

☒ NGVD 1929 ☐ NAVD 1988 ☐ Other/Source: _____

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

- | | | | |
|---|----------------------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) | <u>14.</u> <u>16</u> | ☒ feet | ☐ meters |
| b) Top of the next higher floor | <u>25.</u> <u>08</u> | ☒ feet | ☐ meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | <u>N/A.</u> | ☒ feet | ☐ meters |
| d) Attached garage (top of slab) | <u>N/A.</u> | ☒ feet | ☐ meters |
| e) Lowest elevation of machinery or equipment servicing the building
(Describe type of equipment and location in Comments) | <u>14.</u> <u>09</u> | ☒ feet | ☐ meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | <u>10.</u> <u>37</u> | ☒ feet | ☐ meters |
| g) Highest adjacent (finished) grade next to building (HAG) | <u>10.</u> <u>57</u> | ☒ feet | ☐ meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support | <u>N/A.</u> | ☒ feet | ☐ meters |

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.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No ☐ Check here if attachments.

Certifier's Name MARK ELLIS LAMB, SR	License Number 23200
Title LAND SURVEYOR	
Company Name ATLAS SURVEYING INC.	
Address 49 BROWNS COVE ROAD, SUITE 5	
City RIDGELAND	State South Carolina
ZIP Code 29936	Telephone (843)645-9277
Signature 	Date 11/01/17



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

Comments (including type of equipment and location, per C2(e), if applicable)

PROJECT #BFT-16331 C2a. ELEVATION FOR FIRST FINISHED FLOOR OF COMMERCIAL. C2b. ELEVATION FOR SECOND FINISHED FLOOR OF COMMERCIAL. C2e. ELEVATION IS FOR AIR CONDITIONER PAD.

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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 806 CREAVERN STREET			Policy Number:	
City BEAUFORT	State South Carolina	ZIP Code 29908	Company NAIC Number	
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 1–2 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 or Owner's Authorized Representative's Name				
Address	City	State	ZIP Code	
Signature	Date	Telephone		
Comments				
☐ Check here if attachments.				

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OMB No. 1660-0008
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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 806 CRAVEN STREET			Policy Number:
City BEAUFORT	State South Carolina	ZIP Code 29908	Company NAIC Number
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–G10. In Puerto Rico only, enter meters.

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–G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
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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 Datum _____

G9. BFE or (in Zone AO) depth of flooding at the building site: ☐ feet ☐ meters Datum _____

G10. Community's design flood elevation: ☐ feet ☐ meters Datum _____

Local Official's Name	Title
Community Name	Telephone
Signature	Date

Comments (including type of equipment and location, per C2(e), if applicable)

☐ Check here if attachments.

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BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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City BEAUFORT	State South Carolina
ZIP Code 29908	FOR INSURANCE COMPANY USE Policy Number:
	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One Caption FRONT VIEW



Photo Two

Photo Two Caption REAR VIEW

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BUILDING PHOTOGRAPHS

Continuation Page

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City BEAUFORT	State South Carolina	ZIP Code 29908
		FOR INSURANCE COMPANY USE Policy Number:
		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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

Photo One

Photo One Caption

Photo Two

Photo Two Caption