

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name **SEASIDE HOME OWNERS ASSOCIATION**

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
211 NORTH SEASIDE DRIVE

Company NAIC Number:

City **SURFSIDE BEACH**

State **SC**

ZIP Code **29575**

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
LOT 6, BLOCK F, FLORAL SECTION (TMS 195-04-12-029 THRU -032)

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

A5. Latitude/Longitude: Lat. **33°36'25.7300 N** Long. **78°58'12.8500 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 **6**

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) **365** sq ft
 b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade **0**
 c) Total net area of flood openings in A8.b **0** 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
TOWN OF SURFSIDE 450111

B2. County Name
HORRY

B3. State
SC

B4. Map/Panel Number
45051C 0751

B5. Suffix
H

B6. FIRM Index Date
09/17/2003

B7. FIRM Panel Effective/
 Revised Date
08/23/1999

B8. Flood Zone(s)
VE

B9. Base Flood Elevation(s) (Zone
 A0, use base flood depth)
17

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

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, AR/A, 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: **SCCC MON. 5130**

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.

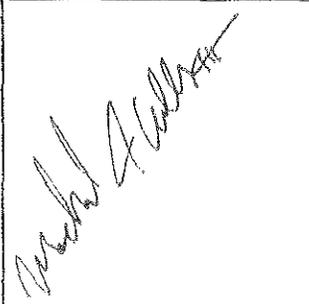
- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) **9 . 8** feet meters
 b) Top of the next higher floor **19 . 6** feet meters
 c) Bottom of the lowest horizontal structural member (V Zones only) **18 . 0** feet meters
 d) Attached garage (top of slab) **N/A** feet meters
 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) **18 . 8** feet meters
 f) Lowest adjacent (finished) grade next to building (LAG) **8 . 0** feet meters
 g) Highest adjacent (finished) grade next to building (HAG) **9 . 2** feet meters
 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support **N/A** 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.

- Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a
 Check here if attachments. licensed land surveyor? Yes No

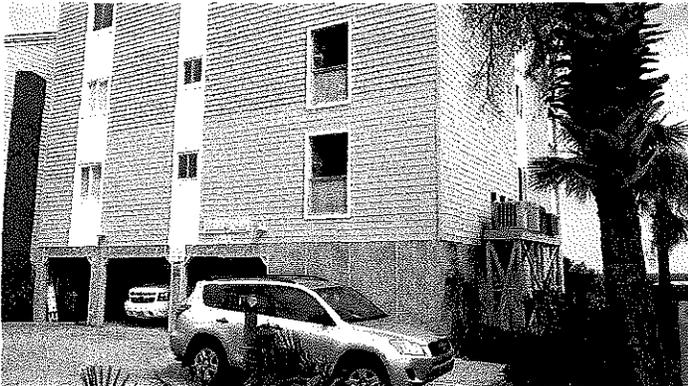
| | | | |
|--|--|--|--------------------------|
| Certifier's Name MICHAEL S CULLER, III | | License Number 29114 | |
| Title PRESIDENT | | Company Name CULLER LAND SURVEYING III, INC. | |
| Address 1010 5th AVE. NW EXT | | City SURFSIDE BEACH | State SC |
| Signature <i>Michael S Culler III</i> | | Date 08/19/2014 | ZIP Code 29575 |
| | | Telephone (843) 238-2333 | |



See Instructions for Item A6.

| | | | |
|--|-------------|-------------------|----------------------------------|
| 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. 211 NORTH SEASIDE DRIVE | | | Policy Number: |
| City SURFSIDE BEACH | State SC | ZIP Code 29575 | 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.



FRONT VIEW
PHOTOS TAKEN
AUGUST 19, 2014



RIGHT SIDE



LEFT VIEW