U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program ELEVATION CERTIFICATE IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 8-15

OMB Control Number: 1660-0008 Expiration: 11/30/2018 building owner.

SE A1. Building Owner's Name Dream Finders Homes, LLC A2. Building Street Address Box No. #160 Lake Lilly Drive	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 USB A1. Building Owner's Name Dream Finders Homes, LLC Policy Number: Policy Number: #160 Lake Lilly Drive Company NAIC Number:	or (1) community official IATION IR Bldg. No.) or P.O. Ro	, (2) insura	Policy Number: Company NAIC Number:	FOR INSURANCE COMPANY USE Number: any NAIC Part of James 19 19 19 19 19 19 19 19 19 19 19 19 19	g owner.
City Richmond Hill A3. Property Description	ers, Ta	State Number, Legal Description	ate GA ption, etc.		Zip Code 31324	*
	28 Buckhead East Subdivision Phase 4 Lots 1-50 Townho Building Use (e.g., Residential, Non-Residential, Addition	Townhome Building #3 Addition, Accessory, etc.) Residentia	dential			
	Lat. 31°52'37.1" Long. 81°15'23.4"	5'23.4" Horizontal Datum:	atum:	(NAD 1927	(● NAD 1983	
	Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance	ate is being used to ob	tain flood	insurance.		
A7. Building Diagram Number 1A A8. For a building with a crawlspa	Building Diagram Number 1A For a building with a crawlspace or enclosure(s):	A9. F	or a buildir	A9. For a building with an attache	ned garage:	
	a) Square footage of crawlspace or enclosure(s) N/A	sq ft a) Squ	ıare foota		age 242	sq ft
b) Number of permanen crawlspace or enclosu above adjacent grade	b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A	b) Nur in th abo	nber of pe ne attache ve adjace	 b) Number of permanent flood open in the attached garage within 1. above adjacent grade 	penings 1.0 foot N/A	
c) Total net area of fi	Total net area of flood openings in A8.b N/A	sq in c) Tot	al net area	Total net area of flood openings	gs in A9.b N/A	sq in
d) Engineered flood openings?	openings? (Yes (No	d) En	gineered fi	d) Engineered flood openings?	(Yes €N	No
B1. NFIP Community Na	NFIP Community Name & Community Number B2. County Name	B2. County Name	(FIRM) INI	ORMATION	B3.	B3. State
B4. Map/Panel Number	B5. Suffix B6. FIRM Index Date	B7. FIRM Panel Effective/ Revised Date	tive/ B8.	Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth	Elevation(s) e base flood
B10. Indicate the source of the Base	Flood Elevation (BFE) d	ata or base flood depth Other/Source:	entered in	Item B9:		
B11. Indicate elevation da	B11. Indicate elevation datum used for BFE in Item B9: (N	NGVD 1929 (* NAVD 1988	γ	Other/Source:		
B12. Is the building locate Designation Date:	B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date: CBRS COPA	stem (CBRS) area or C `OPA	therwise I	Protected Area (O	PA)? (Yes	∘ No
	SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	EVATION INFORMATION	N (SURV	EY REQUIRED)		
C1. Building elevations are based on: * A new Elevation Certificate will be re	 Building elevations are based on: ○ Construction Drawings* ○ Building Under C new Elevation Certificate will be required when construction of the building is complete. 	ngs* C Building Under Construction* n of the building is complete.	der Const plete.	9	Finished Construction	ction
C2. Elevations: Zones A1-A Items C2.a-h below according Benchmark Utilized: Local	C2. Elevations: Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A (terns C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: Local Vertical Datum: NAVD 1988	.V30, V (with BFE), AR, AR/A, AR/AE, A d in Item A7. In Puerto Rico only, enter r	AR/A, AR Rico only, Rum: NAV	AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Rico only, enter meters. tum: NAVD 1988	AR/AH, AR/AO.	Complete
Indicate elevation datum	Indicate elevation datum used for the elevations in items a) through h) below.	rough h) below. (NG	NGVD 1929	(€ NAVD 1988		
Datum used for building e	Datum used for building elevations must be the same as that used for the BF	used for the BFE.			Check the measurement used.	rement used.
a) Top of bottom floor (in	Top of bottom floor (including basement, crawlspace, or enclosure floor)	closure floor)	18.		(• feet (meters
b) Top of the next higher floor c) Bottom of the lowest horizo	Top of the next higher floor Bottom of the lowest horizontal structural member (V Zones only)	s only)	28.6 N/A	6	• feet (meters
d) Attached garage (top of slab) e) Lowest elevation of machiner	y or equipment servicing the	building	17. 6 17. 8	& O	• feet (∩ meters ∩ meters
f) Lowest adjacent (finish	Lowest adjacent (finished) grade next to building (LAG)		17.2	2	(e) feet (meters
g) Highest adjacent (finis h) Lowest adjacent grade	Highest adjacent (finished) grade next to building (HAG) Lowest adjacent grade at lowest elevation of deck or stairs, including	, including		6		meters
structural support			17.	7	(•) feet ((meters

ELEVATION CERTIFICATE, page 2			OMB Control Number: 1660-0003 Expiration: 11/30/2011
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. #160 Lake Lilly Drive	esponding informatio lite, and/or Bldg. No.) o	n from Section A. or P.O. Route and Box No.	FOR INSURANCE COMPANY USE Policy Number:
City Richmond Hill	State GA	Zip Code 31324	Company NAIC Number:
	SECTION D - SURVEYOR, ENGINEER,	ER, 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>I certithat 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.</i>	land surveyor, enginees my best efforts to inte	er, or architect authorized by larger the data available. I und	by law to certify elevation information. <i>I certify</i> understand that any false statement may be
Check here if attachments.	0 0	gitude in Section A d land surveyor?	. 8
	⊙Yes (No		NO R G
Certifier's Name David A. Brunson	Lice	License Number 2538	PLACE
Title President	Company Name Southeast Georgia Su	Surveying, P.C.	HERE SON
Address	City	State Zip Code	9
טוס במצבו טוואר, סמוני ט	N. C. III	0.024	
Signature	Date 10/18/2017	Telephone 912 756-2211	
Copy all pages of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.	community official, (2)) insurance agent/company, a	and (3) building owner.
Comments (including type of equipment and location, per C2(e), if applicable) Job #17-109(Lot 28) Longitude and Latitude were obtained from Google Earth. The lowest servicing equipment for C2e is an A/C unit located at the rear of town home	ation, per C2(e), if appl vere obtained from Goo	icable) ogle Earth. The lowest servici	ng equipment for C2e is an A/C unit
Signature			Date 10/18/2017
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BE 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. F1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the	ORMATION (SURVEY ms E1-E5. If the Certification in the control of	not REQUIRED) FOR ZON icate is intended to support a Check the measurement used check the measurement used to show whether the characteristics in the control of the contro	LOMA or LOMR-F request, complete d. In Puerto Rico only, enter meters. the elevation is above or below the
a) Top of bottom floor (including basement of	crawispace		
a) Top of bottom floor (including basement, crawlspace, or enclosure) is	crawispace,	· C feet C meters	ers
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 	crawlspace,	C feet C meters	ters 🔲 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 page higher floor (elevation C2.b in the diagrams) of the building is feet C meters a	ood openings provided	in Section A Items 8 and/or 9 (s	9 (see page 8 of Instructions), the next lers ☐ above or ☐ below the HAG.
E3. Attached garage (top of slab) is		· C feet C meters	ters 🔲 above or 🔲 below the HAG.
E4. Top of platform of machinery and /or equipment servicing the building is	ent	· (feet (meters	ters $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
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.	available, is the top of th	he top of the bottom floor elevated in accordance with the The local official must certify this information in Section G	cordance with the community's floodplain ation in Section G.
SECTION F - PROPER	RTY OWNER (OR OW	SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION	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.	sentative who complet here. The statements in	es Sections A, B, and E for Z n Sections A, B, and E are co	one A (without a FEMA-issued or prect to the best of my knowledge.
Property Owner or Owner's Authorized Representative's Name	entative's Name		
Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			
			Thort has if attachments
			Chack hard if attachments

ELEVATION CERTIFICATE, page 3

OMB Control Number: 1660-0008 Expiration: 11/30/2018

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE, page 4

See instructions for Item A6.

OMB Control Number: 1660-0008 Expiration: 11/30/2018

AND ADDRESS OF THE PARTY OF THE		
Company NAIC Number:	Zip Code 31324	City State GA
Policy Number:) or P.O. Route and Box No.	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. #160 Lake Lilly Drive
FOR INSURANCE COMPANY USE	tion from Section A.	IMPORTANT: In these spaces, copy the corresponding information from Section A.

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 taken 10/17/17



Rear View taken 10/17/17