

ELEVATION CERTIFICATE

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 8-15

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

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 Michael Roberts Custom Homes, LLC		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 55 River Park Place		Company NAIC Number:
City Richmond Hill	State GA	Zip Code 31324
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 54 The Bluff at Belle Island		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential		
A5. Latitude/Longitude: Lat. 31.775677° Long. 81.2247 Horizontal Datum: <input type="radio"/> NAD 1927 <input checked="" type="radio"/> 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 1B		
A8. For a building with a crawlspace or enclosure(s):		
a) Square footage of crawlspace or enclosure(s) N/A sq ft	A9. For a building with an attached garage:	a) Square footage of attached garage 618 sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade None	
c) Total net area of flood openings in A8.b N/A sq in	c) Total net area of flood openings in A9.b N/A sq in	
d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No	d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION		
B1. NFIP Community Name & Community Number Bryan County 130016		B3. State GA
B2. County Name Bryan (unincorporated)		
B4. Map/Panel Number 13029C0400	B5. Suffix C	B6. FIRM Index Date 5/5/2014
	B7. FIRM Panel Effective/ Revised Date 3/2/2009	B8. Flood Zone(s) AE
		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: <input type="radio"/> FIS Profile <input checked="" type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other/Source: _____		
B11. Indicate elevation datum used for BFE in item B9: <input type="radio"/> NAVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> Other/Source: _____		
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="radio"/> Yes <input checked="" type="radio"/> No Designation Date: <input type="radio"/> CBRS <input type="radio"/> OPA		
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)		
C1. Building elevations are based on: <input type="radio"/> Construction Drawings* <input type="radio"/> Building Under Construction* <input checked="" type="radio"/> 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: C.O.E. Oak Level-2		Vertical Datum: NGVD 1929
Indicate elevation datum used for the elevations in items a) through h) below. <input type="radio"/> NGVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> 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)	_____	<input checked="" type="radio"/> feet <input type="radio"/> meters 16.0
b) Top of the next higher floor	_____	<input checked="" type="radio"/> feet <input type="radio"/> meters 26.6
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input checked="" type="radio"/> feet <input type="radio"/> meters N/A.
d) Attached garage (top of slab)	_____	<input checked="" type="radio"/> feet <input type="radio"/> meters 14.7
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	_____	<input checked="" type="radio"/> feet <input type="radio"/> meters 14.7
f) Lowest adjacent (finished) grade next to building (LAG)	_____	<input checked="" type="radio"/> feet <input type="radio"/> meters 13.2
g) Highest adjacent (finished) grade next to building (HAG)	_____	<input checked="" type="radio"/> feet <input type="radio"/> meters 14.4
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____	<input checked="" type="radio"/> feet <input type="radio"/> meters 13.2

ELEVATION CERTIFICATE, page 2

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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.
55 River Park Place

FOR INSURANCE COMPANY USE
Policy Number:

City
Richmond Hill

State
GA

Zip Code
31324

Company NAIC Number:

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

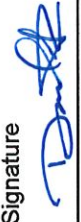
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

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

Certifier's Name
David A. Brunson

Title
President

Address
518 Edsel Drive, Suite D

Signature


License Number
2538

Company Name
Southeast Georgia Surveying, P.C.

City
Richmond Hill

State
GA

Zip Code
31324


Date
06/03/2016

Telephone
912 756-2211



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

Comments (including type of equipment and location, per C2(e), if applicable)
Job #98-113(16) Lot 54 Belle Island Latitude and Longitude were taken from Google Earth. NGS program VERTCON was used for benchmark transformation to NAVD 1988. The lowest servicing equipment for C2e is an A/C unit located on the right side of house.

Signature


Date
06/03/2016

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 LOMIR-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 page 8 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

ELEVATION CERTIFICATE, page 3

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IMPORTANT: In these spaces, copy the corresponding information from Section A.		FOR INSURANCE COMPANY USE
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City Richmond Hill	State GA	Zip Code 31324
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. <input type="checkbox"/> 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. <input type="checkbox"/> 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. <input type="checkbox"/> 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
G7. This permit has been issued for: <input type="radio"/> New Construction <input type="radio"/> Substantial Improvement		
G8. Elevation of as-built lowest floor (including basement) of the building: _____ . _____ <input type="radio"/> feet <input type="radio"/> meters Datum _____		
G9. BFE or (in Zone AO) depth of flooding at the building site: _____ . _____ <input type="radio"/> feet <input type="radio"/> meters Datum _____		
G10. Community's design flood elevation: _____ . _____ <input type="radio"/> feet <input type="radio"/> 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.

ELEVATION CERTIFICATE, page 4

BUILDING PHOTOGRAPHS

See instructions for Item A6.

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City Richmond Hill	State GA	Company NAIC Number:
	Zip Code 31324	

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



Rear View



Right Side View (showing lowest servicing equipment for C2e)