FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires December 31, 2005

			ad the instructions on pages		
		SECTION A	PROPERTY OWNER INFOR	MATION	For Insurance Company Use:
BUILDING OWNER'S NA					Policy Number
Sanco Builders Corp).		•		
200 Florence Avenue	RESS (Including	Apt., Unit, Suite, and/or E	Bidg. No.) OR P.O, ROUTE AN	D BOX NO.	Company NAIC Number
CITY Carolina Beach			STATE NC	ZIP (2844	CODE
PROPERTY DESCRIPTI Lot 8 Blk. 66 Carolina Bea	ON (Lot and Blod ach	k Numbers, Tax Parcel N	lumber, Legal Description, etc.)		,
BUILDING USE (e.g., Re- Residential	sidential, Non-resi	dential, Addition, Access	ory, etc. Use a Comments area	, if necessary.)	
LATITUDE/L'ONGITUDE	(OPTIONAL)	HORIZON	ITAL DATUM:	SOURCE: GPS (T	· · · · · · · · · · · · · · · · · · ·
(##°-##-##,##" or ##	:#####*)	□ NAD 1927	☐ NAD 1983	DUSGS	ype): Quad Map
					dodd map
D4 NICID COARM BUTCANAME			ISURANCE RATE MAP (FIRI	(I) INFORMATION	
B1. NFIP COMMUNITY NAME TOWN OF CAROLINA BEACH			2. COUNTY NAME EW HANOVER		B3. STATE NC
B4, MAP AND PANEL NUMBER 0001	B5, SUFFIX C	B6. FIRM INDEX DATE 5-26-1972	B7. FIRM PANEL EFFECTIVE/REVISED DATE 9-04-1986	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 11
B10. Indicate the source of the	Base Flood Elevat	ion (BFE) data or base floor	d depth entered in B9.		
	⊠ FIRM	☐ Community Detern			
B11. Indicate the elevation date	um used for the BH	E in B9: ⊠ NGVD 1929	☐ NAVD 19	88 Other (Describe):	
b 12. is the building located in a	Coastal Barrier Re	sources System (CBRS) a	rea or Otherwise Protected Area (0	OPA)? 🗌 Yes 🗵 No	Designation Date
	SEC		EVATION INFORMATION (S	URVEY REQUIRED)	
C1. Building elevations are bas	ed on: 🔲 Constru	ction Drawings*	Building Under Construction*	Finished Construction	
A new Elevation Certificat	e will be required w	hen construction of the buil	ding is complete.		
oz. building Diagram Number	(Selectine buildin	g dragram most similar to th	he building for which this certificate	is being completed - see p	ages 6 and 7. If no diagram
accurately represents the t	outland, broside as	keton or photograph.)			
Complete Home C3 at he), AE, AH, A (With B	FE), VE, V1-V30, V (with 6	FE), AR, AR/A, AR/AE, AR/A1-A3	0, AR/AH, AR/AO	
Corriginate sterring Cost-84 Del	low according to the	building diagram specified	In Item C2. State the datum used,	If the datum is different from	m the datum used for the BFE in
Section D. or Section C	in to that used for t	ne Br.E. Show held measur	rements and datum conversion cal	culation. Use the space pro	ovided or the Comments area of
Section D or Section G, as Datum NGVD29 Convers	appropriate, to doc	ument ine datum conversio	n.		
Elevation reference mode of	on/Connents n/a	alas allas alla			TH CAROL SESSION OF ESSION
o a) Top of bottom floor (in	sed <u>P.N.</u> Does the	aevation reference mark us	sed appear on the FIRM? Yes 10. 2ft.(m)	3 ⊠ No [Cathering and California
	STH CAPO				
o b) Top of next higher floo			<u>19</u> , <u>6</u> ft.(m)	d Seal	OFESS/OFFS/O
o c) Bottom of lowest horiz		nber (V zones only)	<u>N/A</u> ft.(m)	S S S S S S S S S S S S S S S S S S S	3544 4029
o d) Attached garage (top	\$ /\$/ / S				
o e) Lowest elevation of m	achinery and/or equ	Jipment .		m/a	
servicing the building	(Describe in a Con	nments area)	<u>N/A</u> ft.(m)	License Number, Embossed Signatury, and Date	5 7 6 0 C C C C C C C C C C C C C C C C C C
o f) Lowest adjacent (finish			<u>8</u> . <u>5</u> ft.(m)	Sign N	To book to the sale
o g) Highest adjacent (finis		10.1 40 4 4 4	<u>8</u> . <u>6</u> ft.(m)	anse.	TERRITORIES PROPERTY
o h) No. of permanent oper	nings (11000 vents) v	Mithin 1 ft. above adjacent g	rade <u>N/A</u>	Ľis.	Society of the second of the s
o i) Total area of all permar				_	
	SEC	TION D - SURVEYOR,	ENGINEER, OR ARCHITECT	CERTIFICATION	
This certification is to be sig I certify that the information	ned and sealed by	a land surveyor, engine	er, or architect authorized by la represents my best efforts to inte	w to codify alcustion info	rmation.
i uriderstand that any faise s	tatement mav be	punishable by fine or im	onsonment under 18 U.S. Code	Profice data available.	
CERTIFIER'S NAME JOHN J	ERNIGAN	The state of the	anddinion briddi 10 0.5. Obde	LICENSE NUMBER L-3	820
TITLE DEOCECCIONAL LANG	O ID CO				
TITLE PROFESSIONAL LAND	SURVEYOR		COMPANY NAME F	ANOVER DESIGN SERV	ICES, P.A.
ADDRESS			CITY	STATE	ZIP CODE
319 WALNUT STREET			WILMINGTON	NC	28401
SIGNATURE	1//		DATE	TELEPH	
Joh M	· Cha	0-	, 06-01-2005	910-343-	
, ,	//	/			

IMPORTANT: In these spaces, copy	the corresponding information fro	m Section A.		For Insurance Company Use:
BUILDING STREET ADDRESS (Induding Apt., U 205 Florence Avenue	Init, Suite, and/or Bldg. No.) OR P.O. ROUTE A	ND BOX NO.		Palicy Number
CITY		TATE	ZIP CODE 28449	Company NAIC Number
Carolina Beach	ON D - SURVEYOR, ENGINEER, OF	C ADCHITECT CERTI		·
Copy both sides of this Elevation Certificate	TOF (1) CONTINUARY ORIGINA, (2) INSURANCE AS	gertivoorriparty, artu (5) bui	Iding Owner.	
COMMENTS				
· · · · · · · · · · · · · · · · · · ·	,		+	
				Check here if attachm
	LEVATION INFORMATION (SURVE			
For Zone AO and Zone A (without BFE), com	plete Items E1 through E4. If the Elevation	n Certificate is intended fo	r use as supporting inform	nation for a LOMA or LOMR-F,
Section C must be completed. E1. Building Diagram Number _(Select the b	uilding diagram most similar to the building	for Woich this certificate is	s being completed see i	pages 6 and 7. If no diagram accur
represents the building, provide a sketch		, tor third and oddinado	o baing completed too	30900 0 4114111 1110 41091411 4004
E2. The top of the bottom floor (including base		ft.(m) _in.(cm) 🔲 above	e or 🔲 below (check on	e) the highest adjacent grade. (Usi
natural grade, if available).			r 1 - H.B 1	2. 7 A
E3. For Building Diagrams 6-8 with openings		ated floor (elevation b) of the	he building isfL(m)_	_in.(cm) above the highest adjacen
grade. Complete items C3.h and C3.i on E4. The top of the platform of machinery and/		ft.(m) in.(cm) 🗆 above	e or 🔲 below (check on	e) the highest adiacent grade, (Usi
natural grade, if available).	or equipment our naing to ballaning to	W(1.1) 1.(01.1) 400 1.	201011 (411011111111111111111111111111111	-,
E5. For Zone AO only: If no flood depth numi	ber is available, is the top of the bottom flo	or elevated in accordance	with the community's floo	odplain management ordinance?
	ocal official must certify this information in S			(A) I
	ON F - PROPERTY OWNER (OR O)			
The property owner or owner's authorized re	•			without a FEMA-issued or commun
issued BFE) or Zone AO must sign here. To PROPERTY OWNER'S OR OWNER'S AU			ny kriowieuge.	
1 NOI EIGH OMNEIGOONOMIEROAG	ALIOHISED ICT ACCUMANTED WANT			
ADDRESS		CIŢY	STA	ATE ZIP CODE
SIGNATURE		DATE	TEI	EPHONE
COMMENTO				
COMMENTS				
				Check here if attachm
	SECTION G - COMMUNIT	Y INFORMATION (OF	TIONAL)	
The local official who is authorized by law or o	ordinance to administer the community's fix	codplain management ord	inance can complete Sec	tions A, B, C (or E), and G of this E
Certificate. Complete the applicable item(s) a				
G1. The information in Section C was take	en from other documentation that has bee nation. (Indicate the source and date of the	-		gineer, or architect who is authorize
G2. A community official completed Section				one AO.
G3. The following information (Items G4-C			, ,	
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. D	DATE CERTIFICATE OF CO	MPLIANCE/OCCUPANCY ISSUED
G7. This permit has been Issued for: New		ent		B
G8, Elevation of as-built lowest floor (including G9, BFE or (in Zone AO) depth of flooding at l	, , ,		ft.(m)	Datum:
69, BFE or (in Zone AO) depin or nooding at i	the building site is:	· · · · · · · · · · · · · · · · · · ·	ft.(m)	Dafum:
		TITLE		
LOCAL OFFICIAL'S NAME		ME SPILO	NE	
LOCAL OFFICIAL'S NAME COMMUNITY NAME		TELEPHO	714	
COMMUNITY NAME		DATE	714	