

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7. N2017

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use	
BUILDING OWNER'S NAME East Georgia Builders "1			Policy Number	
BUILDING STREET ADDRESS (including Apt., Unit, Suite, or Bldg. No.) OR P.O. ROUTE AND BOX NO. 119 Grand View Drive			Company NAIC Number	
CITY Pooler	STATE Ga.	ZIP CODE 31322		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 26, Godley Station West, Forest Lake, 8 th GMD,				
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential				
LATITUDE/LONGITUDE (OPTIONAL) (36° - 89° - 00.000000° or 00.000000°)		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. FIP COMMUNITY NAME & COMMUNITY NUMBER City of Pooler 130261		B2. COUNTY NAME Chatham		B3. STATE Ga.	
B4. MAP AND PANEL NUMBER 130030 002D	B5. SUFFIX C	B6. FIRM INDEX DATE Sep. 20, 1995	B7. FIRM PANEL EFFECTIVE/REVISED DATE May 19, 1997	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AE, use depth of flooding) 18.4 (see "Z")

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile X FIRM Community Determined Other (Describe): _____

B11. Indicate the elevation datum used for the BFE in B9: X NGVD 1929 NAVD 1985 Other (Describe): _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date _____

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* X Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. 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 C3.-4) below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
 Datum NGVD 29 Conversion/Comments (as taken from Subdivision Plat Benchmarks 26S-10D)
 Elevation reference mark used 510 benchmarks. Does the elevation reference mark used appear on the FIRM? Yes X No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>20.7 ft.</u>
<input type="checkbox"/> b) Top of next higher floor	<u>29.1 ft.</u>
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>NA ft.</u>
<input type="checkbox"/> d) Attached garage (top of slab)	<u>18.0 ft.</u>
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area)	<u>none in place</u>
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	<u>17.7 ft.</u>
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	<u>17.9 ft.</u>
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>none</u>
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3. (NA)	

3-10-04

License Number, Embossed Seal, Signature, and Date

Joseph J. Stuckey, Jr.

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 in Sections A, B, and C 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.

CERTIFIER'S NAME Joseph J. Stuckey, Jr.

LICENSE NUMBER PLB 6C 8196

TITLE Land Surveyor

COMPANY NAME Stuckey Land Surveying

ADDRESS

CITY

STATE

ZIP CODE

1 Pleasant F Road

Porter

Ga.

30490

SIGNATURE

DATE

TELEPHONE

30490

March 10, 2004

912-895-2225

Joseph J. Stuckey, Jr.

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.

119 Grand View Drive

CITY
Pooler

STATE
Ga.

ZIP CODE
31322

For Insured Company Use
Policy Number
Company S.A.C. Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

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

COMMENTS

- *1 This form is for the exclusive use of the person / persons or entity named hereon, and its use does not extend to any other person / persons, or entity.
- *2 The Base has been prorated between 18' and 19' as shown on the FIRM Map.

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number __ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is __ ft.(m) __ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is __ ft.(m) __ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is __ ft.(m) __ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. For 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, C (Items C3.h and C3.i only), 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, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS CITY STATE ZIP CODE

SIGNATURE DATE TELEPHONE

COMMENTS

Check here if attachments

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.

- G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local 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-G9) 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 is:

____ ft.(m) Datum: ____
____ ft.(m) Datum: ____

G9. BFE or (in Zone AO) depth of flooding at the building site is:

LOCAL OFFICIAL'S NAME TITLE

COMMUNITY NAME TELEPHONE

SIGNATURE DATE

COMMENTS

Check here if attachments