

033C-009

CERTIFICATION OF ELEVATION

DATE: October 27, 1989

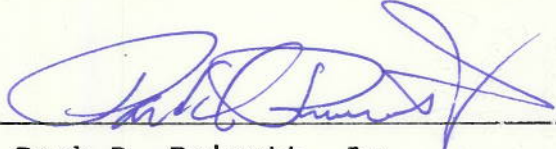
ADDRESS OF PROPERTY Lot 9, Springhill S/D  
Phase One, Camden County,  
Georgia

FLOOD ZONE      A                       V       OTHER \_\_\_\_\_

Required lowest finished floor elevation 9.00 MSL  
(If V Zone, required elevation of the bottom of  
the lowest horizontal structural member)

Actual lowest floor elevation 9.91 MSL

The undersigned hereby certifies to the above information.

  
\_\_\_\_\_  
Park D. Privett, Jr.  
Privett & Associates, Inc.  
\_\_\_\_\_

STATE OF Georgia

REGISTRATION NO. 2218

F.B. 147, Pg. 25  
and  
F.B. 80, Pg. 14

033C-009

FLOODPLAIN DEVELOPMENT/SPECIAL USE PERMIT

Date: 8.30-89

Permit# R-1589

FIRM # 13039C0250C

Location of Property: 4322 SPRINGMILL COURT (Lot 9)

Applicant: Hammond Const.

P.O. Box 1342 Kingsland ( ) 929-7160  
Address Phone

Type of Development: \_\_\_\_\_ Excavation: \_\_\_\_\_ Fill: \_\_\_\_\_ Grading:  Buildings  
or other structures: \_\_\_\_\_ Other alterations (Specify): \_\_\_\_\_

Size of Development: LOT

Location in Floodplain: a. \_\_\_\_\_ In Velocity Zone  
b. AE In Numbered A Zone  
c. \_\_\_\_\_ In Unnumbered A Zone

Development Standards Data (Ref: Ordinance# \_\_\_\_\_):

1. If a. above is checked, attach engineering certification and supporting data as required.
2. Required lowest floor elevation 9.0 MSL (NGVD).
3. Proposed lowest floor elevation 9.6 MSL (NGVD).  
Attach surveyed certification as required.
4. Flood-proofing information (if Applicable):
  - a. Required flood-proofed elevation \_\_\_\_\_ MSL (NGVD)
  - b. Actual (as built) flood-proofed elevation \_\_\_\_\_ MSL (NGVD).  
Attach engineering certification and supporting data as required

Applicant acknowledgement: I understand that the issuance of this permit is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required. I agree to comply with all applicable provisions of Ordinance# \_\_\_\_\_ and all other laws or ordinances affecting the proposed development.

Applicant (Signature) X Date X

Has the correct fee been paid? (  ) Yes ( ) No Amount \$ 5.00

Date of Issuance 8.30-89 By Tate Johnson

Department Use only:

Inspection # \_\_\_\_\_ By \_\_\_\_\_

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