

CERTIFICATION OF ELEVATION

106C-007B

DATE: NOVEMBER 13, 1989

NAME OF PROPERTY OWNER: TERRY STOVER

LOCATION OF PROPERTY...: WINDGABLES SUBDIVISION

ADDRESS OF PROPERTY....: LOT 7, BLOCK B, PHASE I

G.M.D.#.....: 31ST

REQUIRED LOWEST FINISHED FLOOR ELEVATION 11.00 FEET MSL. (IF V ZONE,
REQUIRED ELEVATION OF THE BOTTOM OF THE LOWEST HORIZONTAL STRUCTURAL
MEMBER: (N/A FEET MSL).

ACTUAL BOTTOM OF BEAM ELEVATION: N/A FEET MSL.

THE FINISHED FLOOR ELEVATION IS 14.69

THE GROUND ELEVATION IS 12.0

THE A/C PAD IS 11.85



LEONARD E. HENRY, R.L.S.

HENRY & ASSOCIATES

POST OFFICE BOX 1246

KINGSLAND, GA 31548

STATE OF GEORGIA

REGISTRATION NO. 1842

REFERENCE WORK ORDER #00671

100C-007B

Date: 6-9-89

1731 MARIAH DR.

Permit# 1433

FIRM # 13039C0360C

Location of Property: LOT 7-B WINDGABLES

Applicant: TERRY STOVER

P.O. Box 57 K
Address

(1729-4243)
Phone

Type of Development: _____ Excavation: _____ Fill: _____ Grading: _____ Buildings

or other structures: _____ Other alterations (Specify): _____

Size of Development: _____

Location in Floodplain: a. _____ In Velocity Zone

b. AF 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 11.0 MSL(NGVD).
3. Proposed lowest floor elevation 12.0 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) [Signature] Date [Date]

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

Date of Issuance _____ By _____

Department Use only:

- Inspection # _____ By _____
- Inspection # _____ By _____
- Inspection # _____ By _____
- Inspection # _____ By _____