

1600A-095

CERTIFICATION OF ELEVATION

DATE 10 4 1989

ADDRESS OF PROPERTY LOT 24 RIVERDAKS SUBDIVISION
POINT PETER AREA 29TH. GMD

required lowest 11.0 floor elevation MSL
[IF V ZONE, required elevation of the bottom of the
lowest horizontal structural member]

actual lowest floor elevation	18.58'	MSL.
high ground elevation	6.9	MSL.
lowest ground elevation	6.6'	MSL.
airconditioner PAD	No. 1	13.03' MSL.
airconditioner PAD	No. 2	13.03 MSL.

FIRM FLOOD INSURANCE RATE MAP no. 13039c0395c
PANEL NO. 395 of 480


LEONARD E. HENRY R. L. S.

box 1246, kingsland, ga. 31548
state of GEORGIA.
registration no. 1942

FLOODPLAIN DEVELOPMENT/SPECIAL USE PERMIT

160A-095

Date: 6-7-89

912 POINT PETER PLACE

Permit # R 1427

FIRM # 1303900395 C

Location of Property: Lot 24 River Oaks @ Point Peter

Applicant: Terry STOVER

Address _____ Phone _____

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

Other structures: _____ Other alterations (Specify): _____

Size of Development: LOT

- Location in Floodplain: a. _____ In Velocity Zone
- b. 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 _____ 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 6/7/89

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

Date of Issuance 6-7-89 By Terry Stover

Department Use only:

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