

U.S. DEPARTMENT OF HOMELAND SECURITY  
Federal Emergency Management Agency  
National Flood Insurance Program

OMB Control No 1660-0008  
Expiration Date: 06/30/2026

**ELEVATION CERTIFICATE**

**IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11**

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

SECTION A – PROPERTY INFORMATION	FOR INSURANCE COMPANY USE
A1. Building Owner's Name: <u>ACG Shiloh, LLC</u>	Policy Number: _____
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>516 Wounded Knee Circle</u>	Company NAIC Number: _____
City: <u>Peachtree City</u> State: <u>GA</u> ZIP Code: <u>30269</u>	
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: <u>Mobile Home Lot 516 of Shiloh Mobile Home Park, A portion of Tax Parcel 0719010</u>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): <u>Residential</u>	
A5. Latitude/Longitude: Lat. <u>33.4242971°N</u> Long. <u>-084.5534721°W</u> Horiz. Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983 <input type="checkbox"/> WGS 84	
A6. Attach at least two and when possible four clear color photographs (one for each side) of the building (see Form pages 7 and 8).	
A7. Building Diagram Number: <u>5</u>	
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s): <u>1031 +/-</u> sq. ft.	
b) Is there at least one permanent flood opening on two different sides of each enclosed area? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>0</u> Engineered flood openings: <u>0</u>	
d) Total net open area of non-engineered flood openings in A8.c: <u>N/A</u> sq. in.	
e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructions): <u>N/A</u> sq. ft.	
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): <u>N/A</u> sq. ft.	
A9. For a building with an attached garage:	
a) Square footage of attached garage: <u>N/A</u> sq. ft.	
b) Is there at least one permanent flood opening on two different sides of the attached garage? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>0</u> Engineered flood openings: <u>0</u>	
d) Total net open area of non-engineered flood openings in A9.c: <u>N/A</u> sq. in.	
e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructions): <u>N/A</u> sq. ft.	
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): <u>N/A</u> sq. ft.	
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	
B1.a. NFIP Community Name: <u>Fayette County</u>	B1.b. NFIP Community Identification Number: <u>130432</u>
B2. County Name: <u>Fayette</u>	B3. State: <u>GA</u> B4. Map/Panel No.: <u>13113C0091</u> B5. Suffix: <u>E</u>
B6. FIRM Index Date: <u>09/26/2008</u>	B7. FIRM Panel Effective/Revised Date: <u>09/26/2008</u>
B8. Flood Zone(s): <u>X Unshaded</u>	B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): <u>906.03</u>
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: <input type="checkbox"/> FIS <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input checked="" type="checkbox"/> Other: <u>Flood Hazard Certificate issued by Fayette County</u>	
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA	
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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City: <u>Peachtree City</u> State: <u>GA</u> ZIP Code: <u>30269</u>	Policy Number: _____
	Company NAIC Number: _____

## SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

- C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction  
\*A new Elevation Certificate will be required when construction of the building is complete.
- C2. Elevations – Zones A1–A30, AE, AH, AO, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO, A99. Complete Items C2.a–h below according to the Building Diagram specified in Item A7. In Puerto Rico only, enter meters.  
Benchmark Utilized: EGPS Real Time Network Vertical Datum: NAVD 1988

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929  NAVD 1988  Other: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE. Conversion factor used?  Yes  No  
If Yes, describe the source of the conversion factor in the Section D Comments area.

- Check the measurement used:
- a) Top of bottom floor (including basement, crawlspace, or enclosure floor): 954.2  feet  meters
- b) Top of the next higher floor (see Instructions): \_\_\_\_\_  feet  meters
- c) Bottom of the lowest horizontal structural member (see Instructions): \_\_\_\_\_  feet  meters
- d) Attached garage (top of slab): \_\_\_\_\_  feet  meters
- e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area): 950.2  feet  meters
- f) Lowest Adjacent Grade (LAG) next to building:  Natural  Finished 947.7  feet  meters
- g) Highest Adjacent Grade (HAG) next to building:  Natural  Finished 951.7  feet  meters
- h) Finished LAG at lowest elevation of attached deck or stairs, including structural support: 949.8  feet  meters

## SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by state law to certify elevation information. I certify that the information 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.

Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No

Check here if attachments and describe in the Comments area.

Certifier's Name: Warren Gray License Number: 2984

Title: Ga. Registered Land Surveyor

Company Name: W.D. Gray and Associates, Inc.

Address: 160-B Greencastle Road

City: Tyrone State: GA ZIP Code: 30290

Telephone: (770) 486-7552 Ext.: \_\_\_\_\_ Email: wdgraywarren@gmail.com

Signature: Warren Gray Date: 09/25/2025



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

Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and description of any attachments):  
Per the referenced flood insurance rate map, this MH is graphically shown in a Zone "X" unshaded designated area. However, per the attached Flood Hazard Certificate, the Base Flood Elevation is 906.03 and the required Minimum Finished Floor Elevation is 909.03. This MH and lowest adjacent grade to the MH is above and out of the 100 year flood plain. W. D. Gray and Associates, Inc. did not participate in establishing the Base Flood Elevation. The machinery in section "C" (C2e) is an outside HVAC unit. The latitude and longitude are taken from Google Earth.



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## SECTION G – COMMUNITY INFORMATION (RECOMMENDED FOR COMMUNITY OFFICIAL COMPLETION)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Section A, B, C, E, G, or H of this Elevation Certificate. Complete the applicable item(s) and sign below when:

- G1.  The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by state law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.a.  A local official completed Section E for a building located in Zone A (without a BFE), Zone AO, or Zone AR/AO, or when item E5 is completed for a building located in Zone AO.
- G2.b.  A local official completed Section H for insurance purposes.
- G3.  In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E and H.
- G4.  The following information (Items G5–G11) is provided for community floodplain management purposes.
- G5. Permit Number: \_\_\_\_\_ G6. Date Permit Issued: \_\_\_\_\_
- G7. Date Certificate of Compliance/Occupancy Issued: \_\_\_\_\_
- G8. This permit has been issued for:  New Construction  Substantial Improvement
- G9.a. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_  feet  meters Datum: \_\_\_\_\_
- G9.b. Elevation of bottom of as-built lowest horizontal structural member: \_\_\_\_\_  feet  meters Datum: \_\_\_\_\_
- G10.a. BFE (or depth in Zone AO) of flooding at the building site: \_\_\_\_\_  feet  meters Datum: \_\_\_\_\_
- G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member: \_\_\_\_\_  feet  meters Datum: \_\_\_\_\_
- G11. Variance issued?  Yes  No If yes, attach documentation and describe in the Comments area.

The local official who provides information in Section G must sign here. *I have completed the information in Section G and certify that it is correct to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.*

Local Official's Name: \_\_\_\_\_ Title: \_\_\_\_\_

NFIP Community Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Ext.: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information in Sections A, B, D, E, or H):



**ELEVATION CERTIFICATE**  
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**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:

516 Wounded Knee Circle

City: Peachtree City State: GA ZIP Code: 30269

**FOR INSURANCE COMPANY USE**

Policy Number: \_\_\_\_\_

Company NAIC Number: \_\_\_\_\_

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Photo One

Photo One Caption: Front View 09-16-2025

Clear Photo One



Photo Two

Photo Two Caption: Rear View 09-16-2025

Clear Photo Two

**ELEVATION CERTIFICATE**  
**IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11**  
**BUILDING PHOTOGRAPHS**

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:  
516 Wounded Knee Circle

City: Peachtree City State: GA ZIP Code: 30269

**FOR INSURANCE COMPANY USE**

Policy Number: \_\_\_\_\_

Company NAIC Number: \_\_\_\_\_

Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Photo Three

Photo Three Caption: Left Side View 09-16-2025

Clear Photo Three



Photo Four

Photo Four Caption: Right Side View 09-16-2025

Clear Photo Four



<b>Environmental Management Department</b>  <b>Flood Hazard Certificate</b>	Permit No: <b>FYAZ-09-2025-075314</b>
	Parcel No: <b>0719 010</b>
	Permit Status: <b>Issued</b>

140 Stonewall Avenue West Suite 203  
 Fayetteville, GA 30214  
 Phone: (770) 305-5410

**Permit Note :**

**Permit Issued Date: 9/11/2025**

<b>Subdivision:</b>	<b>Shiloh Mobile Home Park</b>	<b>Lot #:</b>	<b>516</b>
<b>Address:</b>	<b>516 WOUNDED KNEE CIR, Peachtree City, GA 30269 100 Yr. Flood Plain Elevation 906.03</b>		
<b>FIRM Panel #:</b>	<b>13113C0091E</b>	<b>Date:</b>	<b>9/26/2008</b>
<b>Creek Name:</b>		<b>Watercourse Type:</b>	<b>Unnamed Stream</b>
<b>Total Acreage:</b>	<b>.1</b>	<b>Disturbed Acreage:</b>	
<b>Owner:</b>	<b>MikeConlon</b>	<b>Phone Number:</b>	<b>4049145864</b>
<b>Builder:</b>	<b>WesleyRaburn</b>	<b>Phone Number:</b>	<b>4782443579</b>
<b>Natural Buffer:</b>	<b>25</b>	<b>Impervious Setback:</b>	<b>N/A</b>
<b>Base Flood Elevation</b>	<b>906.03</b>	<b>MFFE:</b>	<b>909.03</b>

NOTE: SEE ATTACHED PLAT FOR EXACT STRUCTURE(S) LOCATION AND SETBACKS. PROPERTY CORNERS MUST BE ADEQUATELY STAKED.

**APPLICANT'S COVENANT**

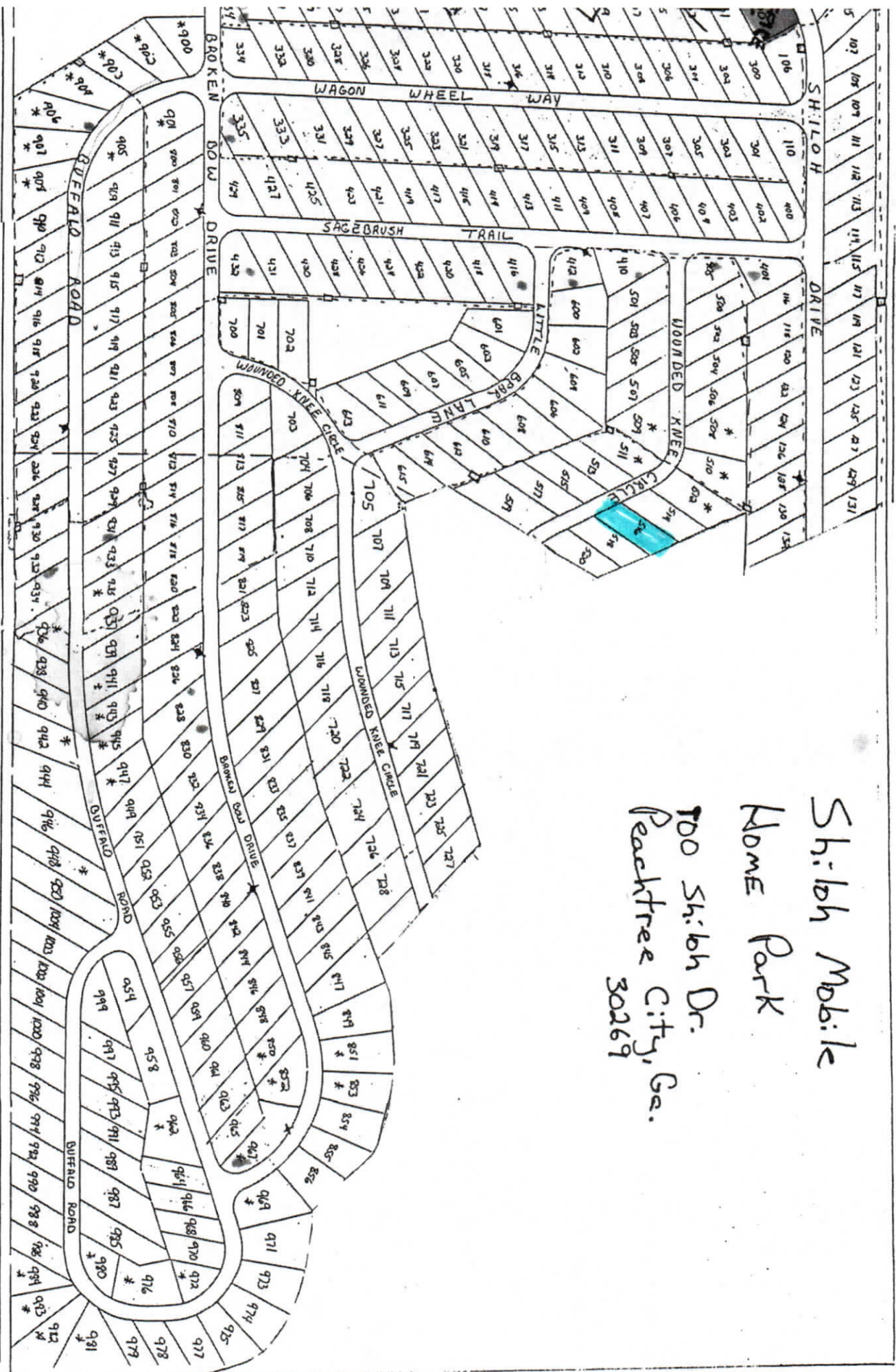
As the applicant for a Certification of Stormwater Compliance for the property hereon described, I do hereby covenant that the information supplied with this application is true and correct and I do hereby agree to comply with the ordinances of Fayette County pertaining to floodplain, watershed protection, and erosion & sediment control. It is understood and agreed by the applicant that any error, misstatement, or misrepresentation of fact, either with or without intention on his part, such as might if known, cause a refusal of this application or any alteration or change in plans made without approval of the Stormwater Compliance, shall constitute sufficient grounds for revocation of said Certificate of Stormwater and any Building Permit resulting therefrom.

APPLICANT

DATE

\_\_\_\_\_

\_\_\_\_\_



Shiloh Mobile  
 Home Park  
 700 Shiloh Dr.  
 Peachtree City, Ga.  
 30269