

## R S M HARRIS ASSOCIATES, INC.

PLANNERS-CONSULTANTS-DEVELOPERS

POST OFFICE BOX 10037  
GOLDSBORO, NORTH CAROLINA 27532-0037  
TELEPHONE 919.751.0909

2719 GRAVES DRIVE, SUITE 2  
GOLDSBORO, NORTH CAROLINA 27534  
EMAIL cdharris@rsmharris.com

### REQUEST FOR BID PROPOSALS

To: Modular Housing Dealers/Contractors

From: W. Chris Harris  
Reconstruction/Relocation Specialist

Subject: Princeville 2022 CDBG-NR Project  
Request for Bid Proposals for New Modular Homes

Date: May 18, 2026

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On behalf of the Town of Princeville we will receive separate sealed bid proposals for the provision and installation of two (2) new modular homes built to the state building code. The Town intends to purchase two (2) new modular homes built to the state building code under the Town of Princeville 2022 CDBG-NR Program. Attached is a copy of the bid proposal forms. Proposals will be received in the Board Room at the Princeville Town Hall, 201 S. Main Street, Princeville, NC 27886 on **Wednesday, June 3, 2026, at 11:00 a.m.**, then be publicly opened and read aloud.

The specifications and general conditions are for the new modular home built to the state building code. However, if you have any questions regarding the specifications and general conditions, please do not hesitate to contact W. Chris Harris at (252) 521-3229. We hope that you will participate in the proposal process. The Town intends to select one firm for the modular manufactured type home, based on the lowest responsible proposal. The Town of Princeville will enter into contract for the work. The Town of Princeville reserves the right to waive any informalities or to reject any or all bids.

Small, minority, and/or women owned, veteran owned, Historically Underutilized Business (HUB), and Section 3 (low income) businesses and labor surplus area firms are encouraged to submit BIDS. The Fair Housing Act prohibits discrimination in housing based on race, color, national origin, religion, sex, family status, and disability.

This information is available in Spanish or any other language upon request. Please contact: Itia Hall, Town Manager, at 201 S. Main Street, Princeville, NC 27886, phone 252-823-1057, for accommodation for this request.

Esta información está disponible en español o en cualquier otro idioma bajo petición. Por favor, póngase en contacto con Itia Hall, Town Manager, en 201 S. Main Street, Princeville, NC 27886, teléfono 252-823-1057 de alojamiento para esta solicitud. This Municipality is an **Equal Opportunity Employer and Service Provider.**

Attachment



## ADVERTISEMENT FOR BIDS FOR HOUSING IMPROVEMENTS

### TOWN OF PRINCEVILLE CDBG-NR Grant

Separate sealed bids for the demolition/clearance of two (2) houses and the provision/installation of two (2) State Building Code modular houses will be received in the Board Room at the Princeville Town Hall, 201 S. Main Street, Princeville, NC 27886 on Wednesday June 3, 2026 at 10:00 a.m. for 2 demolition & clearance and at 11:00 a.m. for 2 State Building Code modular houses, then be publicly opened and read aloud. Proposals may be submitted to the Town Manager's office, 201 S. Main Street, Princeville, NC 27886 prior to the Bid Opening.

Bid Proposals may be examined and obtained at the following locations: RSM Harris Associates, Inc., 2719 Graves Drive-Suite 2, P.O. Box 10037, Goldsboro, NC 27532, phone 919-751-0909; and at the Town Manager's Office, 201 S. Main Street, Princeville, NC 27886, phone 252-823-1057.

The Town has received \$625,000 in a federal 2021 CDBG-NR grant representing 100% of total project costs to undertake housing clearance, reconstruction (replacement on site) and rehabilitation activities. All federal CDBG requirements will apply to the contract: Bidders on this work will be required to comply with Section 109 and E.O. 11246 which prohibits discrimination in employment regarding race, creed, color, sex, or national origin. Bidders must comply with Title VI of the Civil Rights Act of 1964, Anti-Kickback Act, E-Verify Regulations, and Contract Work Hours and Safety Standards Act. The Town is committed to and supportive of efforts to effectively maintain and/or increase the use of Small and Minority/Women-Owned Business and Historically Underutilized Businesses (HUB) contract participation for construction projects, services (including professional and consulting services) and commodities purchases; **AND** increase contract participation to offer employment, training and contracting opportunities to low and very low-income persons in the Town in accordance with Section 3 of the Housing and Urban Development Act of 1968, as amended. Small, minority, and/or women owned, Historically Underutilized Businesses (HUB), and Section 3 businesses are encouraged to submit bids. The Town supports and encourages support of the Fair Housing Act which prohibits discrimination in housing based on race, color, national origin, religion, sex, family status, and disability.

Bidders may not be debarred from receiving state or federal contracts. The Town reserves the right to waive any informalities or to reject any or all bids.

This information is available in Spanish or any other language upon request. Please contact: Itia Hall, Town Manager, at 201 S. Main Street, Princeville, NC 27886, phone 252-823-1057, for accommodation for this request.

Esta información está disponible en español o en cualquier otro idioma bajo petición. Por favor, póngase en contacto con Itia Hall, Town Manager, en 201 S. Main Street, Princeville, NC 27886, teléfono 252-823-1057 de alojamiento para esta solicitud.

This Municipality is an **Equal Opportunity Employer and Service Provider.**



## **PRINCEVILLE 2022 CDBG-NR HOUSING ASSISTANCE PROJECT**

### **General Conditions for All New Modular Housing Units**

**Property is not located in floodplain. See attached Survey and Elevation Certificate**

- Energy Star Home – (To include all energy star components from Manufacturer.)
- Built to state building code for modular unit with modular stamp.
- Vinyl Sided with OSB exterior sheathing/Shingle Roof- 5/12 minimum pitch with eaves and Architectural Type Shingles. Unfurnished home. Color of siding, shingles, shutters, etc. to be acceptable to owner.
- Price to include all permits including set-up, plumbing, electrical, etc. necessary to pass City/County inspections.
- All blocking and tie-downs shall be in accordance with Building Code and bottom of unit will be a minimum height of 24" above ground level. Including poured concrete footing for all block piers.
- Steps are to be provided at all entrances.
- Steps for Modular Housing units shall be as close to threshold height as possible.
- Install minimum 6' x 8' suspended corrugated concrete porch with brick steps and handrails at front entrance and minimum 4' x 6' concrete porch with brick steps and handrails at rear entrance. Porches to include vinyl railings, handrails, pickets, vinyl sleeve over pressure treated 4" x 4" posts at steps and porches. Install vinyl handrails, pickets on both sides of steps at all entrances.
- If client desires, pressure treated lumber decks may be substituted minimum 8' x 10' at front entrance and 6' x 8' at rear entrance with pressure treated steps, handrails, railings, pickets, posts, etc. Handrails shall be made of pressure treated 4" x 4" posts and 2" x 4" rails with rails at top and mid-height of posts. Handrails to be anchored securely in ground. Pickets should be pressure treated 2"x 2" 4" apart. Railings at decks shall be made of pressure treated 4" x 4" posts and 2" x 4" rails with 2"x 2" pickets 4" apart. Install treated handrails on both sides of steps at all entrances.
- Baths to have porcelain sink, one piece fiberglass tub/shower-hall bath, one piece fiberglass shower stall with door-master bath. Kitchen to have stainless steel sink. No plastic plumbing fixtures in baths or kitchen.
- All bedroom doors and bathroom door to have privacy lock. All interior doors to be raised panel doors. Exterior steel 6-panel front door with storm door. Exterior cottage inswing rear door (9-lite) with storm door at rear entrance. Both exterior doors to have 36" doorway.
- Electrical service 200 Amp. To be provided for all units and shall include, meter base, breaker panel and connection mounted to home in accordance with Electrical Code. Contractor to coordinate work with power-company and Building Inspector.
- Modular Units to be underpinned with brick on a continuous poured concrete footing 6" thick by 10" wide and bottom of footing is to be 12" below ground level. Louvered foundation vents to be provided according to Building Code and metal foundation access door. Unit height above ground to be a minimum height of 24".
- Contractor shall connect unit to public water supply at water meter with new minimum Schedule 40 ¾" PVC water line, two outside spigots and cut-off valve in value box within 5' of house. Water line to be buried up to connection to unit. Install foam insulation on all exposed water lines under dwelling.
- Contractor to connect unit to septic tank or sewer tap with new sewer line, as required by code.
- Contractor to provide street number address on unit in accordance with Local E-911 requirements.

- Tongues, wheels and axles to be removed and retained by Contractor. Tongues cannot be placed under unit prior to underpinning.
- Grade, seed and hay yard twenty feet (20') around all sides of house. Insure positive drainage away from foundation of house. Grade, level, seed, hay any disturbed area of yard as a result of set up of new dwelling.
- Install gravel driveway using ABC stone (Crush & Run) from street to front of home location, approximately 75' feet long by 15' feet wide and 4" inches thick. Driveway area to be smooth and level prior to gravel installation. Install gravel sidewalk using ABC Stone (Crush & Run) from gravel driveway to front steps approximately 50' feet long x 4' feet wide x 4" thick. Sidewalk area to be smooth and level prior to gravel installation.
- Contractor's cost of unit and set-up to be turn-key and include all labor, materials, general liability and builder's risk insurance, tax and title, permits, profit and overhead.
- Color of vinyl flooring, wall board, kitchen cabinets, bath vanity cabinets, counter tops, appliances, etc. to be acceptable to owner. (No carpet installed in modular unit.)
- All units to contain the following features:  
Refrigerator (Energy Star) with icemaker installed; Electric Range with exhaust hood/light vented to exterior.  
All windows to have minimum 2" blinds. 40 Gallon Electric Water Heater.  
Central Heating/AC, complete and installed.(Electric Heat Pump-15 Seer-Energy Star Label.)  
Interior walls to be finished painted sheetrock, including closets.
- No furniture is to be included in unit.
- Complete all work in accordance with building codes and manufacturer's specifications.
- First payment shall be made to manufacturer/floor planner to pay for housing unit after it is delivered to site.
- Final payment to Contractor shall be made after completion of all installation and set-up work, electric, plumbing connections, issuance of Certificate of Occupancy and Owners Statement of Acceptance.
- Unit to have 4 bedrooms/2 baths. Total dimensions =28' wide x 62' in length. Exterior entrances front, rear. No side entrances.

**Please fill in blanks below:**

Make & Model Number:

\_\_\_\_\_

Heated Square Feet:

\_\_\_\_\_

**Owner: Mervin Smith Address:602 King Avenue, Princeville, NC 27886**

**Please Note. Turn-Key Price will be for standard set-up on a cleared residential lot that is accessible with minimal to no site work needed. Any additional costs related to meeting any floodplain elevation requirements, topography, drainage or well/septic system conflicts will be paid separately, based on actual work performed to address the issues attributable to the specific site.**

**LUMP SUM TURN-KEY PRICE PER MODULAR UNIT \$ \_\_\_\_\_**

Respectfully submitted:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Company

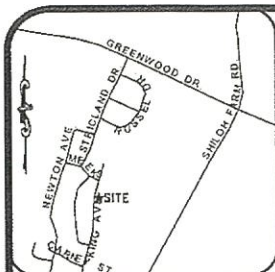
\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Company Address

\_\_\_\_\_  
Fed ID or SS Number

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
NC License Number



VICINITY MAP (NTS)

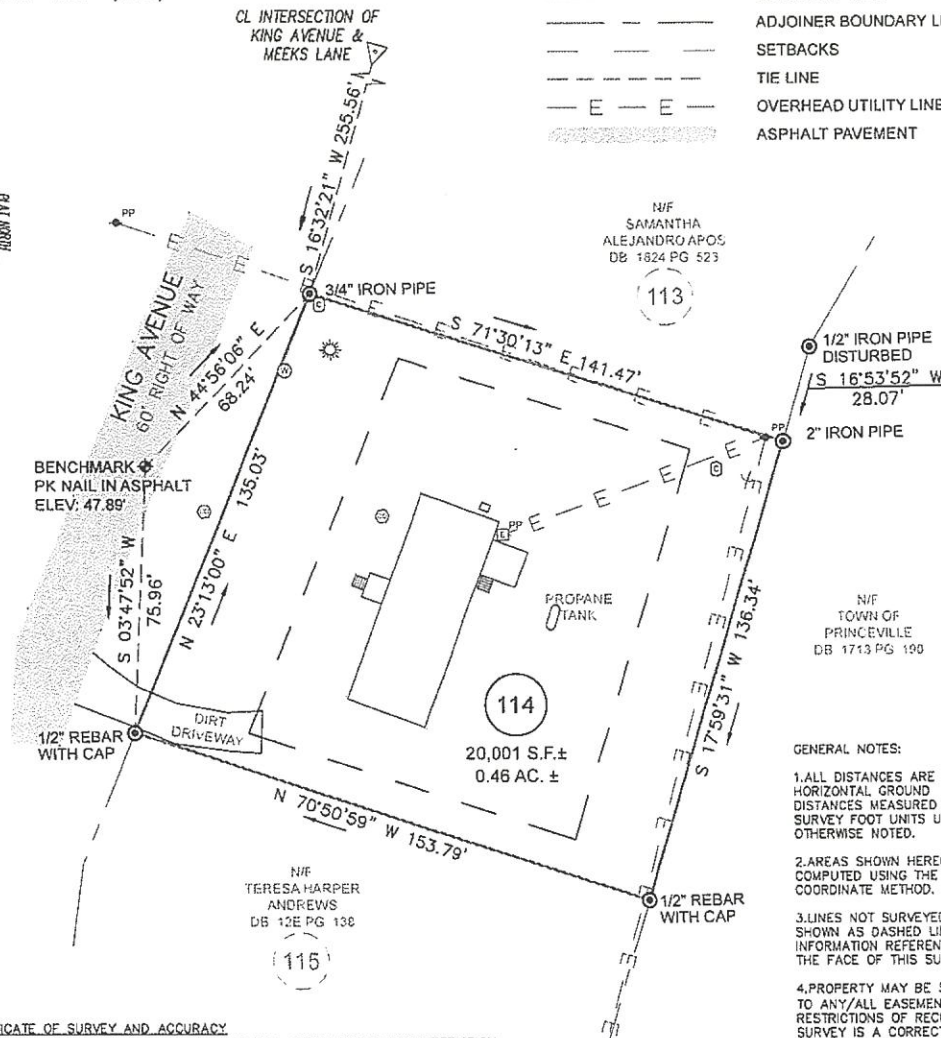
SETBACKS PER TOWN OF PRINCEVILLE ORDINANCES - ZONE R-1

FRONT	30'
SIDE	10'
REAR	25'

LEGEND

- ⊙ MONUMENT FOUND AS NOTED
- ⊙ WATER METER
- ☀ WATER WELL
- ⊙ CLEANOUT
- ⊙ COMMUNICATIONS PEDESTAL
- ⊙ ELECTRIC METER
- ⊙ UTILITY POLE
- ⊙ GUY ANCHOR
- BOUNDARY LINE
- - - ADJOINER BOUNDARY LINE
- - - SETBACKS
- - - TIE LINE
- E - E - OVERHEAD UTILITY LINES
- ▨ ASPHALT PAVEMENT

REVISION 1: 2/19/2026 ADDED BENCHMARK PER CLIENT REQUEST



GENERAL NOTES:

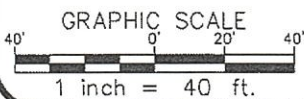
1. ALL DISTANCES ARE HORIZONTAL GROUND DISTANCES MEASURED IN U.S. SURVEY FOOT UNITS UNLESS OTHERWISE NOTED.
2. AREAS SHOWN HEREON WERE COMPUTED USING THE COORDINATE METHOD.
3. LINES NOT SURVEYED ARE SHOWN AS DASHED LINES FROM INFORMATION REFERENCED ON THE FACE OF THIS SURVEY.
4. PROPERTY MAY BE SUBJECT TO ANY/ALL EASEMENTS AND RESTRICTIONS OF RECORD. THIS SURVEY IS A CORRECT REPRESENTATION OF THE LAND PLATTED AND OR DEEDED AND HAS BEEN PREPARED WITHOUT THE BENEFIT OF A TITLE REPORT. A NORTH CAROLINA LICENSED ATTORNEY-AT-LAW SHOULD BE CONSULTED REGARDING CORRECT OWNERSHIP, WIDTH AND LOCATION OF EASEMENTS, AND OTHER TITLE QUESTIONS REVEALED BY TITLE EXAMINATION.
5. THIS PARCEL IS NOT LOCATED WITHIN A FLOOD HAZARD ZONE AS INDICATED ON CID NO. 370318 PANEL 4746, SUFFIX J TOWN OF PRINCEVILLE WITH AN EFFECTIVE DATE OF 11/03/2004.
6. ANY VISIBLE ENCROACHMENTS OR PROJECTIONS ARE SHOWN HEREON.

CERTIFICATE OF SURVEY AND ACCURACY

I, CALVIN MARTIN, CERTIFY THAT THIS PLAT WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION (DEED DESCRIPTION RECORDED IN D.B. 1313, PG. 595); THAT THE BOUNDARIES NOT SURVEYED ARE SHOWN AS BROKEN LINES PLOTTED FROM INFORMATION FOUND IN P.B. 15, PG. 74; THAT THE RATIO OF PRECISION AS CALCULATED MEETS OR EXCEEDS 1 IN 10,000; THAT THE COORDINATE METHOD WAS USED TO CALCULATE AREAS; THAT THIS PLAT WAS PREPARED IN ACCORDANCE WITH G.S. 47-30 AS AMENDED. WITNESS MY ORIGINAL SIGNATURE, REGISTRATION NUMBER AND SEAL THIS 19TH DAY OF FEBRUARY, 2026.

I CERTIFY THAT THIS PLAT IS THE FOLLOWING TYPE: G.S. 47-30 (F)(1)(C)(1) THIS SURVEY IS OF AN EXISTING PARCEL OF LAND AND DOES NOT CREATE A NEW STREET OR CHANGE AN EXISTING STREET.

*Calvin J. Martin*  
 CALVIN MARTIN, PLS NO. L-5465



BOUNDARY SURVEY

PROJECT: MB-441	DRAWN BY: CJM	CHECKED BY: CJM
SURVEYED BY: CJM	SCALE: 1"=40'	FIELD WORK: FEB. 26
	DWG DATE: 02-17-2026	

FOR  
 TOWN OF PRINCEVILLE  
 602 KING AVENUE  
 LOT 114 SOUTHERN TERRACE SECTION 3  
 TARBORO TWP., EDGECOMBE CO., NC  
 D.B. 1313 PG. 595 P.B. 15 PG. 74

**ECLS**  
 GLOBAL, INC.  
 U.S. VETERAN-OWNED  
 350 HILTON ROAD  
 MYRTLE BEACH, SC  
 843.949.4890 ECLS@GLOBALINC.COM  
 NC LICENSE NUMBER: C-4175

National Flood Insurance Program

# Elevation Certificate

## and Instructions

2023 EDITION

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# FEMA

## ELEVATION CERTIFICATE AND INSTRUCTIONS

### PAPERWORK REDUCTION ACT NOTICE

Public reporting burden for this data collection is estimated to average 3.75 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street SW, Washington, DC 20742, Paperwork Reduction Project (1660-0008). **NOTE: Do not send your completed form to this address.**

### PRIVACY ACT STATEMENT

**Authority:** Title 44 CFR § 61.7 and 61.8.

**Principal Purpose(s):** This information is being collected for the primary purpose of documenting compliance with National Flood Insurance Program (NFIP) floodplain management ordinances for new or substantially improved structures in designated Special Flood Hazard Areas. This form may also be used as an optional tool for a Letter of Map Amendment (LOMA), Conditional LOMA (CLOMA), Letter of Map Revision Based on Fill (LOMR-F), or Conditional LOMR-F (CLOMR-F), or for flood insurance rating purposes in any flood zone.

**Routine Use(s):** The information on this form may be disclosed as generally permitted under 5 U.S.C. § 552a(b) of the Privacy Act of 1974, as amended. This includes using this information as necessary and authorized by the routine uses published in DHS/ FEMA-003 – *National Flood Insurance Program Files System of Records Notice* 79 Fed. Reg. 28747 (May 19, 2014) and upon written request, written consent, by agreement, or as required by law.

**Disclosure:** The disclosure of information on this form is voluntary; however, failure to provide the information requested may impact the flood insurance premium through the NFIP. Information will only be released as permitted by law.

### PURPOSE OF THE ELEVATION CERTIFICATE

The Elevation Certificate is an important administrative tool of the NFIP. It can be used to provide elevation information necessary to ensure compliance with community floodplain management ordinances, to inform the proper insurance premium, and to support a request for a LOMA, CLOMA, LOMR-F, or CLOMR-F.

The Elevation Certificate is used to document floodplain management compliance for Post-Flood Insurance Rate Map (FIRM) buildings, which are buildings constructed after publication of the FIRM, located in flood Zones A1–A30, AE, AH, AO, A (with Base Flood Elevation (BFE)), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO, and A99. It may also be used to provide elevation information for Pre-FIRM buildings or buildings in any flood zone.

As part of the agreement for making flood insurance available in a community, the NFIP requires the community to adopt floodplain management regulations that specify minimum requirements for reducing flood losses. One such requirement is for the community to obtain the elevation of the lowest floor (including basement) of all new and substantially improved buildings, and maintain a record of such information. The Elevation Certificate provides a way for a community to document compliance with the community's floodplain management ordinance.

Use of this certificate does not provide a waiver of the flood insurance purchase requirement. Only a LOMA or LOMR-F from the Federal Emergency Management Agency (FEMA) can amend the FIRM and remove the federal mandate for a lending institution to require the purchase of flood insurance. However, the lending institution has the option of requiring flood insurance even if a LOMA/LOMR-F has been issued by FEMA. The Elevation Certificate may be used to support a LOMA, CLOMA, LOMR-F, or CLOMR-F request. Lowest Adjacent Grade (LAG) elevations certified by a land surveyor, engineer, or architect, as authorized by state law, will be required if the certificate is used to support a LOMA, CLOMA, LOMR-F, or CLOMR-F request. A LOMA, CLOMA, LOMR-F, or CLOMR-F request must be submitted with either a completed FEMA MT-EZ or MT-1 application package, whichever is appropriate. If the certificate will only be completed to support a LOMA, CLOMA, LOMR-F, or CLOMR-F request, there is an option to document the certified LAG elevation on the Elevation Form included in the MT-EZ and MT-1 application.

This certificate is used only to certify building elevations. A separate certificate is required for floodproofing. Under the NFIP, non-residential buildings can be floodproofed up to or above the BFE. A floodproofed building is a building that has been designed and constructed to be watertight (substantially impermeable to floodwaters) below the BFE. Floodproofing of residential buildings is not permitted under the NFIP unless FEMA has granted the community an exception for residential floodproofed basements. The community must adopt standards for design and construction of floodproofed basements before FEMA will grant a basement exception. For both floodproofed non-residential buildings and residential floodproofed basements in communities that have been granted an exception by FEMA, a floodproofing certificate is required.

The expiration date on the form herein does not apply to certified and completed Elevation Certificates, as a completed Elevation Certificate does not expire, unless there is a physical change to the building that invalidates information in Section A Items A8 or A9, Section C, Section E, or Section H. In addition, this form is intended for the specific building referenced in Section A and is not invalidated by the transfer of building ownership.

Additional guidance can be found in FEMA Publication 467-1, *Floodplain Management Bulletin: Elevation Certificate*.

**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>Mervin Smith et al</u>	Policy Number: _____
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>602 King Avenue</u>	Company NAIC Number: _____
City: <u>Princeville</u> State: <u>NC</u> ZIP Code: <u>27886</u>	
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: <u>Lot 114 Section 3 Southern Terrace PIN# 4747-28-8369</u>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): <u>Residential</u>	
A5. Latitude/Longitude: Lat. <u>35°52'46.53"</u> Long. <u>77°30'18.41"</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>8</u>	
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s): <u>1,468</u> sq. ft.	
b) Is there at least one permanent flood opening on two different sides of each enclosed area? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input 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 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: _____ Engineered flood openings: _____	
d) Total net open area of non-engineered flood openings in A9.c: _____ sq. in.	
e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructions): _____ sq. ft.	
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): _____ sq. ft.	

**SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

B1.a. NFIP Community Name: <u>Town of Princeville</u>	B1.b. NFIP Community Identification Number: <u>370318</u>		
B2. County Name: <u>Edgecombe</u>	B3. State: <u>NC</u>	B4. Map/Panel No.: <u>4746</u>	B5. Suffix: <u>J</u>
B6. FIRM Index Date: <u>11/03/2004</u>	B7. FIRM Panel Effective/Revised Date: <u>11/03/2004</u>		
B8. Flood Zone(s): <u>X</u> B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): <u>N/A</u>			
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: <input type="checkbox"/> FIS <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other: _____			
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			

# ELEVATION CERTIFICATE

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

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 602 King Avenue	<b>FOR INSURANCE COMPANY USE</b>
City: <u>Princeville</u> State: <u>NC</u> ZIP Code: <u>27886</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: NCGS Real Time Network (RTN) 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):  | <u>47.38</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor (see Instructions):   | <u>50.1</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (see Instructions):  | <u>N/A</u>   | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| d) Attached garage (top of slab):   | <u>N/A</u>   | <input type="checkbox"/> feet            | <input type="checkbox"/> 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): | <u>46.62</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest Adjacent Grade (LAG) next to building: <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Finished              | <u>46.59</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest Adjacent Grade (HAG) next to building: <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Finished             | <u>46.77</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Finished LAG at lowest elevation of attached deck or stairs, including structural support:   | <u>46.78</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> 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: Calvin Martin License Number: L-5465

Title: Professional Surveyor

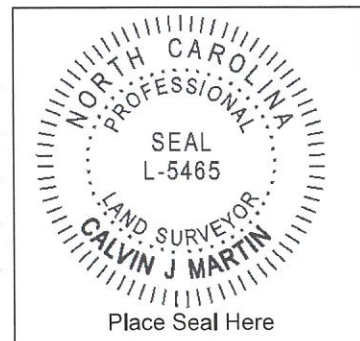
Company Name: ECLS Global, Inc.

Address: 19 N McKinley Street

City: Coats State: NC ZIP Code: 27521

Telephone: (910) 897-3257 Ext.: \_\_\_\_\_ Email: calvinm@eclsglobalinc.com

Signature:  Date: 02/18/2026



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):  
C2a: AC UNIT

# ELEVATION CERTIFICATE

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

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 602 King Avenue	<b>FOR INSURANCE COMPANY USE</b>
City: <u>Princeville</u> State: <u>NC</u> ZIP Code: <u>27886</u>	Policy Number: _____ Company NAIC Number: _____

## SECTION E – BUILDING MEASUREMENT INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO, ZONE AR/AO, AND ZONE A (WITHOUT BFE)

For Zones AO, AR/AO, and A (without BFE), complete Items E1–E5. For Items E1–E4, use natural grade, if available. If the Certificate is intended to support a Letter of Map Change request, complete Sections A, B, and C. Check the measurement used. In Puerto Rico only, enter meters.

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

E1. Provide measurements (C.2.a in applicable Building Diagram) for the following and check the appropriate boxes to show whether the measurement is above or below the natural HAG and the LAG.

a) Top of bottom floor (including basement, crawlspace, or enclosure) is: \_\_\_\_\_  feet  meters  above or  below the HAG.

b) Top of bottom floor (including basement, crawlspace, or enclosure) is: \_\_\_\_\_  feet  meters  above or  below the LAG.

E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (C2.b in applicable Building Diagram) of the building is: \_\_\_\_\_  feet  meters  above or  below the HAG.

E3. Attached garage (top of slab) is: \_\_\_\_\_  feet  meters  above or  below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is: \_\_\_\_\_  feet  meters  above or  below the HAG.

E5. 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 AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without BFE) or Zone AO must sign here. *The statements in Sections A, B, and E are correct to the best of my knowledge*

Check here if attachments and describe in the Comments area.

Property Owner or Owner's Authorized Representative Name: \_\_\_\_\_

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

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

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

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

Comments: \_\_\_\_\_

# ELEVATION CERTIFICATE

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

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 602 King Avenue	<b>FOR INSURANCE COMPANY USE</b>
City: <u>Princeville</u> State: <u>NC</u> ZIP Code: <u>27886</u>	Policy Number: _____ Company NAIC Number: _____

## 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

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

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 602 King Avenue	<b>FOR INSURANCE COMPANY USE</b>
City: <u>Princeville</u> State: <u>NC</u> ZIP Code: <u>27886</u>	Policy Number: _____
	Company NAIC Number: _____

## SECTION H – BUILDING'S FIRST FLOOR HEIGHT INFORMATION FOR ALL ZONES (SURVEY NOT REQUIRED) (FOR INSURANCE PURPOSES ONLY)

The property owner, owner's authorized representative, or local floodplain management official may complete Section H for all flood zones to determine the building's first floor height for insurance purposes. Sections A, B, and I must also be completed. Enter heights to the nearest tenth of a foot (nearest tenth of a meter in Puerto Rico). **Reference the Foundation Type Diagrams (at the end of Section H Instructions) and the appropriate Building Diagrams (at the end of Section I Instructions) to complete this section.**

H1. Provide the height of the top of the floor (as indicated in Foundation Type Diagrams) above the Lowest Adjacent Grade (LAG):

a) For Building Diagrams 1A, 1B, 3, and 5–8. Top of bottom \_\_\_\_\_  feet  meters  above the LAG floor (include above-grade floors only for buildings with crawlspaces or enclosure floors) is:

b) For Building Diagrams 2A, 2B, 4, and 6–9. Top of next higher floor (i.e., the floor above basement, crawlspace, or enclosure floor) is: \_\_\_\_\_  feet  meters  above the LAG

H2. Is all Machinery and Equipment servicing the building (as listed in Item H2 instructions) elevated to or above the floor indicated by the H2 arrow (shown in the Foundation Type Diagrams at end of Section H instructions) for the appropriate Building Diagram?  
 Yes  No

## SECTION I – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and H must sign here. *The statements in Sections A, B, and H are correct to the best of my knowledge.* **Note:** If the local floodplain management official completed Section H, they should indicate in Item G2.b and sign Section G.

Check here if attachments are provided (including required photos) and describe each attachment in the Comments area.

Property Owner or Owner's Authorized Representative Name: \_\_\_\_\_

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

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

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

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

Comments:

**ELEVATION CERTIFICATE**  
**IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11**  
**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.:  
 602 King Avenue

**FOR INSURANCE COMPANY USE**

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

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

City: Princeville State: NC ZIP Code: 27886

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

Clear Photo One



Photo Two

Photo Two Caption: LEFT SIDE

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.:  
602 King Avenue

City: Princeville State: NC ZIP Code: 27886

**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: REAR VIEW

Clear Photo Three



Photo Four

Photo Four Caption: RIGHT SIDE

Clear Photo Four

## **PRINCEVILLE 2022 CDBG-NR HOUSING ASSISTANCE PROJECT**

### **General Conditions for All New Modular Housing Units**

#### **Property is located in floodplain. See attached Survey and Elevation Certificate**

- Energy Star Home – (To include all energy star components from Manufacturer.)
- Built to state building code for modular unit with modular stamp.
- Vinyl Sided with OSB exterior sheathing/Shingle Roof- 5/12 minimum pitch with eaves and Architectural Type Shingles. Unfurnished home. Color of siding, shingles, shutters, etc. to be acceptable to owner.
- Price to include all permits including set-up, plumbing, electrical, etc. necessary to pass City/County inspections.
- All blocking and tie-downs shall be in accordance with Building Code and bottom of unit will be a minimum height to meet county floodplain requirements above ground level. Including poured concrete footing for all block piers.
- Steps are to be provided at all entrances.
- Steps for Modular Housing units shall be as close to threshold height as possible.
- Install minimum 6' x 8' suspended corrugated concrete porch with brick steps and handrails at front entrance and minimum 4' x 6' concrete porch with brick steps and handrails at rear entrance. Porches to include vinyl railings, handrails, pickets, vinyl sleeve over pressure treated 4" x 4" posts at steps and porches. Install vinyl handrails, pickets on both sides of steps at all entrances.
- If client desires, pressure treated lumber decks may be substituted minimum 8' x 10' at front entrance and 6' x 8' at rear entrance with pressure treated steps, handrails, railings, pickets, posts, etc. Handrails shall be made of pressure treated 4" x 4" posts and 2" x 4" rails with rails at top and mid-height of posts. Handrails to be anchored securely in ground. Pickets should be pressure treated 2"x 2" 4" apart. Railings at decks shall be made of pressure treated 4" x 4" posts and 2" x 4" rails with 2"x 2" pickets 4" apart. Install treated handrails on both sides of steps at all entrances.
- Bath to have porcelain sink, one piece fiberglass shower stall with door at bath. Kitchen to have stainless steel sink. No plastic plumbing fixtures in bath or kitchen.
- All bedroom doors and bathroom door to have privacy lock. All interior doors to be raised panel doors. Exterior steel 6-panel front door with storm door. Exterior cottage inswing rear door (9-lite) with storm door at rear entrance. Both exterior doors to have 36" doorway.
- Electrical service 200 Amp. To be provided for all units and shall include, meter base, breaker panel and connection mounted to home in accordance with Electrical Code. Contractor to coordinate work with power-company and Building Inspector.
- Modular Units to be underpinned with brick on a continuous poured concrete footing 6" thick by 10" wide and bottom of footing is to be 12" below ground level. Louvered foundation vents to be provided according to Building Code and metal foundation access door. Unit height above ground to be a minimum height to meet county floodplain requirements.
- Contractor shall connect unit to public water supply at water meter with new minimum Schedule 40 ¾" PVC water line, two outside spigots and cut-off valve in value box within 5' of house. Water line to be buried up to connection to unit. Install foam insulation on all exposed water lines under dwelling.
- Contractor to connect unit to septic tank or sewer tap with new sewer line, as required by code.
- Contractor to provide street number address on unit in accordance with Local E-911 requirements.

- Tongues, wheels and axles to be removed and retained by Contractor. Tongues cannot be placed under unit prior to underpinning.
- Grade, seed and hay yard twenty feet (20') around all sides of house. Insure positive drainage away from foundation of house. Grade, level, seed, hay any disturbed area of yard as a result of set up of new dwelling.
- Install gravel driveway using ABC stone (Crush & Run) from street to front of home location, approximately 45' feet long by 12' feet wide and 4" inches thick. Driveway area to be smooth and level prior to gravel installation. Install gravel sidewalk using ABC Stone (Crush & Run) from gravel driveway to front steps approximately 15' feet long x 4' feet wide x 4" thick. Sidewalk area to be smooth and level prior to gravel installation.
- Contractor's cost of unit and set-up to be turn-key and include all labor, materials, general liability and builder's risk insurance, tax and title, permits, profit and overhead.
- Color of vinyl flooring, wall board, kitchen cabinets, bath vanity cabinets, counter tops, appliances, etc. to be acceptable to owner. (No carpet installed in modular unit.)
- All units to contain the following features:  
Refrigerator (Energy Star) with icemaker installed; Electric Range with exhaust hood/light vented to exterior.  
All windows to have minimum 2" blinds. 40 Gallon Electric Water Heater.  
Central Heating/AC, complete and installed.(Electric Heat Pump-15 Seer-Energy Star Label.)  
Interior walls to be finished painted sheetrock, including closets.
- No furniture is to be included in unit.
- Complete all work in accordance with building codes and manufacturer's specifications.
- First payment shall be made to manufacturer/floor planner to pay for housing unit after it is delivered to site.
- Final payment to Contractor shall be made after completion of all installation and set-up work, electric, plumbing connections, issuance of Certificate of Occupancy and Owners Statement of Acceptance.
- Unit to have 2 bedrooms/1 bath. Total dimensions =28' wide x 30' in length. Exterior entrances front, rear. No side entrances.

**Please fill in blanks below:**

Make & Model Number:

---

Heated Square Feet:

---

**Owner: Mildred J. Staton Address:605 Otis Avenue, Princeville, NC 27886**

**Please Note. Turn-Key Price will be for standard set-up on a cleared residential lot that is accessible with minimal to no site work needed. Any additional costs related to meeting any floodplain elevation requirements, topography, drainage or well/septic system conflicts will be paid separately, based on actual work performed to address the issues attributable to the specific site.**

**LUMP SUM TURN-KEY PRICE PER MODULAR UNIT \$\_\_\_\_\_**

Respectfully submitted:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Company

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Company Address

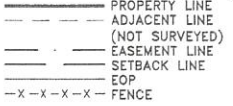
\_\_\_\_\_  
Fed ID or SS Number

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
NC License Number



VICINITY MAP (NTS)



- LEGEND**
- AC=AIR CONDITIONING UNIT
  - AG=ABOVE GROUND
  - BG=BELOW GROUND
  - BOC=BACK OF CURB
  - CATV=CABLE TV
  - CB=CATCH BASIN
  - CVRD=COVERED
  - DW=CONC DRIVEWAY
  - EB=ELECTRIC BOX
  - EM=ELECTRIC METER
  - EOP=EDGE OF PAVEMENT
  - EP=ELECTRIC PEDESTAL
  - FH=FIRE HYDRANT
  - ICV=IRRIGATION CONTROL VALVE
  - LP=LIGHT POLE
  - MTR=METER
  - N/F=NOW OR FORMERLY
  - PD=PORCH
  - PP=POWER POLE
  - RCP=REINFORCED CONC PIPE
  - R/W=RIGHT OF WAY
  - SCO=CLEANOUT
  - SW=SIDEWALK
  - TF=TRANSFORMER
  - TP=TELEPHONE PEDESTAL
  - WM=WATER METER
  - WV=WATER VALVE
  - EIP=EXISTING IRON PIPE
  - NIR=NEW IRON ROD SET
  - EIR=EXISTING IRON ROD

**SETBACKS PER: TOWN OF PRINCEVILLE, NC ZONING ORDINANCE, SECTION 150.41.**

- FRONT 30'
- SIDE 10'
- REAR 25'

**IMPERVIOUS AREA**

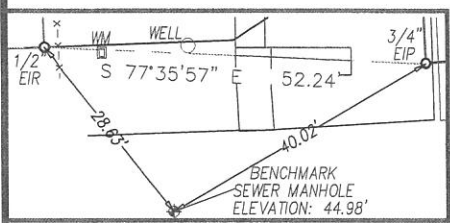
HOUSE	663	SQ.FT.
DRIVE TO R/W	8	SQ.FT.
STEPS & LANDING	177	SQ.FT.
SHED	119	SQ.FT.
A/C PAD	16	SQ.FT.
<b>TOTAL</b>	<b>983</b>	<b>SQ.FT.</b>



**CERTIFICATE OF SURVEY AND ACCURACY**

I, CALVIN MARTIN, CERTIFY THAT THIS PLAT WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION (DESCRIPTION RECORDED IN R.B. 90E, PG. 35); THAT THE BOUNDARIES NOT SURVEYED ARE SHOWN AS BROKEN LINES PLOTTED FROM INFORMATION FOUND IN M.B. 5, PG. 13; THAT THE RATIO OF PRECISION MEETS OR EXCEEDS 1:10,000; THAT THE COORDINATE METHOD WAS USED TO CALCULATE AREAS; THAT THIS PLAT WAS PREPARED IN ACCORDANCE WITH GS 47-30 AS AMENDED, WITNESS MY ORIGINAL SIGNATURE, REGISTRATION NUMBER AND SEAL THIS 20TH DAY OF MARCH, 2026.

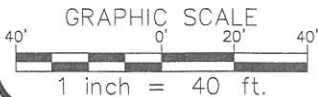
*Calvin Martin*  
 CALVIN MARTIN, PLS NO. L-5465



INSET (NTS)

**GENERAL NOTES:**

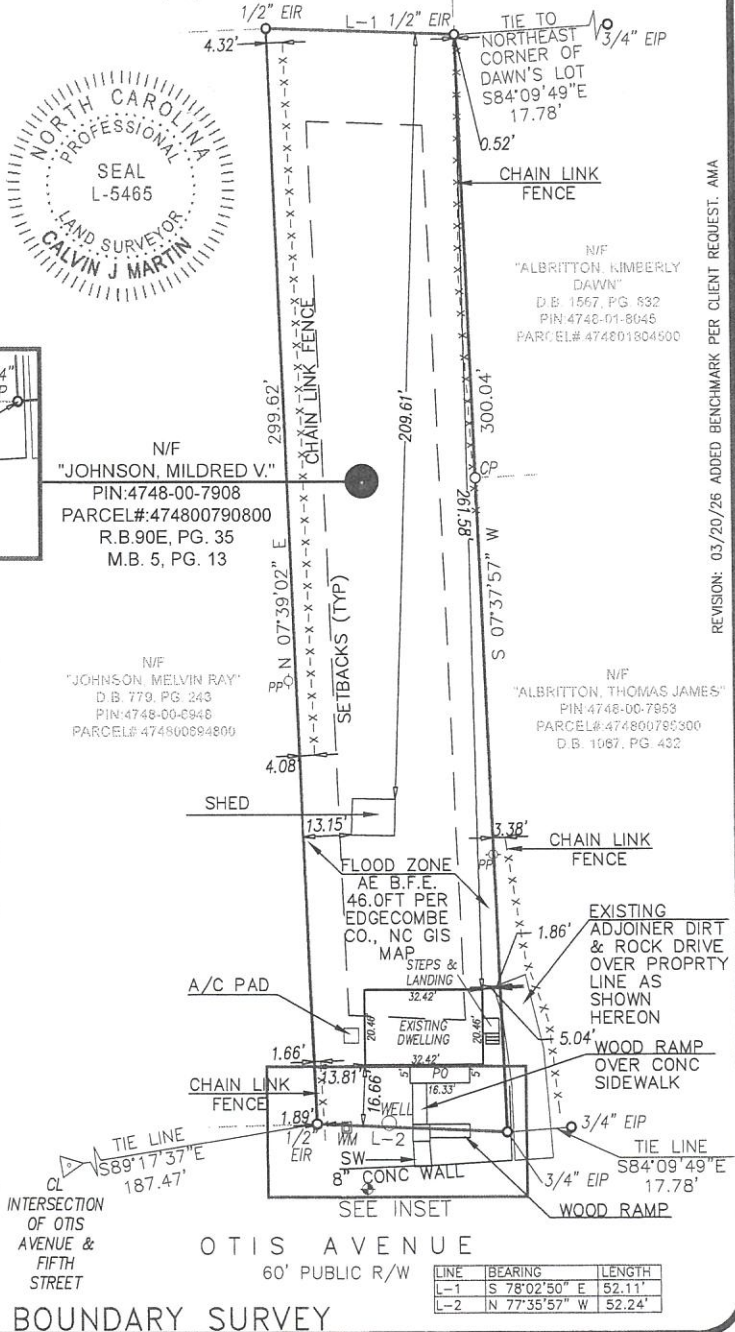
1. ALL DISTANCES ARE HORIZONTAL GROUND DISTANCES MEASURED IN U.S. SURVEY FOOT UNITS UNLESS OTHERWISE NOTED.
2. AREAS SHOWN HEREON WERE COMPUTED USING THE COORDINATE METHOD.
3. LINES NOT SURVEYED ARE SHOWN AS DASHED LINES FROM INFORMATION REFERENCED ON THE FACE OF THIS SURVEY.
4. PROPERTY MAY BE SUBJECT TO ANY/ALL EASEMENTS AND RESTRICTIONS OF RECORD. THIS SURVEY IS A CORRECT REPRESENTATION OF THE LAND PLATTED AND OR DEEDED AND HAS BEEN PREPARED WITHOUT THE BENEFIT OF A TITLE REPORT. A NORTH CAROLINA LICENSED ATTORNEY-AT-LAW SHOULD BE CONSULTED REGARDING CORRECT OWNERSHIP, WIDTH AND LOCATION OF EASEMENTS, AND OTHER TITLE QUESTIONS REVEALED BY TITLE EXAMINATION.
5. A PORTION OF THIS PARCEL IS LOCATED WITHIN A FLOOD HAZARD ZONE "AE" AS INDICATED ON CID NO. 370318 PANEL 2037, SUFFIX L TOWN OF PRINCEVILLE WITH AN EFFECTIVE DATE OF 04/30/2025. WITH A BASE FLOOD ELEVATION OF: 46'. BUILDING AREA IS LOCATED AT FLOOD ZONE "AE" AS SHOWN ON THIS MAP.
7. DRIVEWAY IMPERVIOUS CALCULATION SHOWN HEREON CALCULATED TO THE FRONT PROPERTY LINE/RIGHT-OF-WAY.
8. ANY VISIBLE ENCROACHMENTS ARE SHOWN HEREON.
9. ALL RECORD DATA SHOWN HEREON TAKEN FROM R.B. 90E, AT PAGE 35 AS RECORDED IN EDGECOMBE COUNTY REGISTRY OF DEEDS.



N/F  
 "JOHNSON, MILDRED V."  
 PIN: 4748-00-7908  
 PARCEL#: 474800790800  
 R.B. 90E, PG. 35  
 M.B. 5, PG. 13

N/F  
 "JOHNSON, MELVIN RAY"  
 D.B. 779, PG. 243  
 PIN: 4748-00-6946  
 PARCEL#: 474800694800

N/F  
 "ALBRITTON, THOMAS JAMES"  
 PIN: 4748-00-7953  
 PARCEL#: 474800795300  
 D.B. 1067, PG. 432



**BOUNDARY SURVEY**

LINE	BEARING	LENGTH
L-1	S 78°02'50" E	52.11'
L-2	N 77°35'57" W	52.24'

**PROJECT: MB-440**  
**DRAWN BY: LJS**  
**SURVEYED BY: C. WHITFIELD**  
**SCALE: 1"=40'**  
**FIELD WORK: 07-03-2025** **DWG DATE: 07-07-2025**

FOR  
**MILDRED V. JOHNSON**  
 605 OTIS AVENUE  
 LOTS 21-22, BLOCK H PRINCEVILLE EXTENSION  
 PRINCEVILLE TWP., EDGECOMBE CO., NC  
 PIN: 4748-00-7908-00, R.B. 90E, PG 35, M.B. 5, PG. 13

**ECLS**  
 GLOBAL, INC.  
 U.S. VETERAN-OWNED  
 350 HILTON ROAD  
 MYRTLE BEACH, SC  
 843.949.4890 ECLS@GLOBALINC.COM  
 NC LICENSE NUMBER: C-4175

REVISION: 03/20/25 ADDED BENCHMARK PER CLIENT REQUEST. AMA

National Flood Insurance Program

# Elevation Certificate and Instructions

**2023 EDITION**

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**FEMA**

## ELEVATION CERTIFICATE AND INSTRUCTIONS

### PAPERWORK REDUCTION ACT NOTICE

Public reporting burden for this data collection is estimated to average 3.75 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street SW, Washington, DC 20742, Paperwork Reduction Project (1660-0008). **NOTE: Do not send your completed form to this address.**

### PRIVACY ACT STATEMENT

**Authority:** Title 44 CFR § 61.7 and 61.8.

**Principal Purpose(s):** This information is being collected for the primary purpose of documenting compliance with National Flood Insurance Program (NFIP) floodplain management ordinances for new or substantially improved structures in designated Special Flood Hazard Areas. This form may also be used as an optional tool for a Letter of Map Amendment (LOMA), Conditional LOMA (CLOMA), Letter of Map Revision Based on Fill (LOMR-F), or Conditional LOMR-F (CLOMR-F), or for flood insurance rating purposes in any flood zone.

**Routine Use(s):** The information on this form may be disclosed as generally permitted under 5 U.S.C. § 552a(b) of the Privacy Act of 1974, as amended. This includes using this information as necessary and authorized by the routine uses published in DHS/ FEMA-003 – *National Flood Insurance Program Files System of Records Notice* 79 Fed. Reg. 28747 (May 19, 2014) and upon written request, written consent, by agreement, or as required by law.

**Disclosure:** The disclosure of information on this form is voluntary; however, failure to provide the information requested may impact the flood insurance premium through the NFIP. Information will only be released as permitted by law.

### PURPOSE OF THE ELEVATION CERTIFICATE

The Elevation Certificate is an important administrative tool of the NFIP. It can be used to provide elevation information necessary to ensure compliance with community floodplain management ordinances, to inform the proper insurance premium, and to support a request for a LOMA, CLOMA, LOMR-F, or CLOMR-F.

The Elevation Certificate is used to document floodplain management compliance for Post-Flood Insurance Rate Map (FIRM) buildings, which are buildings constructed after publication of the FIRM, located in flood Zones A1–A30, AE, AH, AO, A (with Base Flood Elevation (BFE)), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO, and A99. It may also be used to provide elevation information for Pre-FIRM buildings or buildings in any flood zone.

As part of the agreement for making flood insurance available in a community, the NFIP requires the community to adopt floodplain management regulations that specify minimum requirements for reducing flood losses. One such requirement is for the community to obtain the elevation of the lowest floor (including basement) of all new and substantially improved buildings, and maintain a record of such information. The Elevation Certificate provides a way for a community to document compliance with the community's floodplain management ordinance.

Use of this certificate does not provide a waiver of the flood insurance purchase requirement. Only a LOMA or LOMR-F from the Federal Emergency Management Agency (FEMA) can amend the FIRM and remove the federal mandate for a lending institution to require the purchase of flood insurance. However, the lending institution has the option of requiring flood insurance even if a LOMA/LOMR-F has been issued by FEMA. The Elevation Certificate may be used to support a LOMA, CLOMA, LOMR-F, or CLOMR-F request. Lowest Adjacent Grade (LAG) elevations certified by a land surveyor, engineer, or architect, as authorized by state law, will be required if the certificate is used to support a LOMA, CLOMA, LOMR-F, or CLOMR-F request. A LOMA, CLOMA, LOMR-F, or CLOMR-F request must be submitted with either a completed FEMA MT-EZ or MT-1 application package, whichever is appropriate. If the certificate will only be completed to support a LOMA, CLOMA, LOMR-F, or CLOMR-F request, there is an option to document the certified LAG elevation on the Elevation Form included in the MT-EZ and MT-1 application.

This certificate is used only to certify building elevations. A separate certificate is required for floodproofing. Under the NFIP, non-residential buildings can be floodproofed up to or above the BFE. A floodproofed building is a building that has been designed and constructed to be watertight (substantially impermeable to floodwaters) below the BFE. Floodproofing of residential buildings is not permitted under the NFIP unless FEMA has granted the community an exception for residential floodproofed basements. The community must adopt standards for design and construction of floodproofed basements before FEMA will grant a basement exception. For both floodproofed non-residential buildings and residential floodproofed basements in communities that have been granted an exception by FEMA, a floodproofing certificate is required.

The expiration date on the form herein does not apply to certified and completed Elevation Certificates, as a completed Elevation Certificate does not expire, unless there is a physical change to the building that invalidates information in Section A Items A8 or A9, Section C, Section E, or Section H. In addition, this form is intended for the specific building referenced in Section A and is not invalidated by the transfer of building ownership.

Additional guidance can be found in FEMA Publication 467-1, *Floodplain Management Bulletin: Elevation Certificate*.

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

**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>MILDRED V JOHNSON</u>	Policy Number: _____
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>605 OTIS AVENUE</u>	Company NAIC Number: _____
City: <u>PRINCEVILLE</u> State: <u>NC</u> ZIP Code: <u>27886</u>	
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: <u>21-22 BLK H, PIN: 4748-00-7908-00, BK/PG 090E/0035, M.B. 5, PG. 13</u>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): <u>RESIDENTIAL</u>	
A5. Latitude/Longitude: Lat. <u>35.8865167262</u> Long. <u>-77.5122597032</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>8</u>	
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s): <u>663</u> sq. ft.	
b) Is there at least one permanent flood opening on two different sides of each enclosed area? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input 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>4</u> Engineered flood openings: <u>0</u>	
d) Total net open area of non-engineered flood openings in A8.c: <u>512</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>N/A</u> Engineered flood openings: <u>N/A</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>TOWN OF PRINCEVILLE</u> B1.b. NFIP Community Identification Number: <u>370318</u>	
B2. County Name: <u>EDGECOMBE</u> B3. State: <u>NC</u> B4. Map/Panel No.: <u>3720474800/4748</u> B5. Suffix: <u>L</u>	
B6. FIRM Index Date: <u>06/02/2015</u> B7. FIRM Panel Effective/Revised Date: <u>4/30/2025</u>	
B8. Flood Zone(s): <u>AE</u> B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): <u>46.0FT</u>	
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: <input type="checkbox"/> FIS <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other: _____	
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: <u>N/A</u> <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	

# ELEVATION CERTIFICATE

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

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <b>605 OTIS AVENUE</b>	<b>FOR INSURANCE COMPANY USE</b>
	Policy Number: _____ Company NAIC Number: _____
City: <u>PRINCEVILLE</u> State: <u>NC</u> ZIP Code: <u>27886</u>	

## 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: NCGS Real Time Network(RTN) 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):  | <u>48.79</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor (see Instructions):   | <u>46.42</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (see Instructions):  | <u>N/A</u>   | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| d) Attached garage (top of slab):   | <u>N/A</u>   | <input type="checkbox"/> feet            | <input type="checkbox"/> 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): | <u>45.16</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest Adjacent Grade (LAG) next to building: <input type="checkbox"/> Natural <input checked="" type="checkbox"/> Finished              | <u>46.26</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest Adjacent Grade (HAG) next to building: <input type="checkbox"/> Natural <input checked="" type="checkbox"/> Finished             | <u>46.50</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Finished LAG at lowest elevation of attached deck or stairs, including structural support:   | <u>45.16</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> 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: D.B. FLOYD License Number: L-3640

Title: PROFESSIONAL LICENSED SURVEYOR

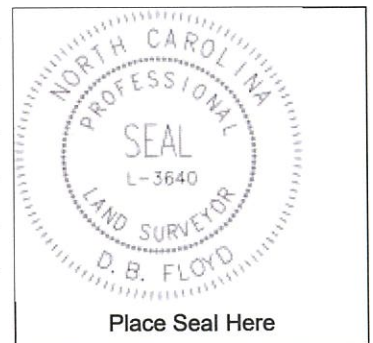
Company Name: ECLS GLOBAL, INC

Address: 350 HILTON ROAD

City: MYRTLE BEACH State: SC ZIP Code: 29572

Telephone: (843) 949-1800 Ext.: \_\_\_\_\_ Email: dbfloyd@eclsglobalinc.com

Signature:  Date: 07/07/2025



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):  
B5EEF9356B5A478  
 A8-A9. There are no engineered vents attached to existing building.  
 B2: Flood map is based on a preliminary flood map per post flooding. BFE:46.0FT  
 C2E: Current lowest Machinery and Equipment is the A/C unit (45.16ft)  
 Proposed A/C must be installed at or above regulatory protection elevation (RFPE), which is a min. 2' above 100-year line.  
 MB-440 FFE: 48.79FT

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

See Instructions for Item A6.

**FOR INSURANCE COMPANY USE**

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

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

City: PRINCEVILLE State: NC ZIP Code: 27886

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

Clear Photo One



Photo Two

Photo Two Caption: RIGHT VIEW

Clear Photo Two

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

Continuation Page

**FOR INSURANCE COMPANY USE**

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

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

City: PRINCEVILLE State: NC ZIP Code: 27886

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: REAR VIEW

Clear Photo Three

Photo Four

Photo Four Caption:

Clear Photo Four

**CERTIFICATIONS REGARDING DEBARMENT, SUSPENSION AND OTHER  
RESPONSIBILITY MATTERS**

CONTRACTOR should refer to the regulations cited below. CONTRACTOR should also review the instructions for certification included in the regulations before completing this form. Signature on this form provides for compliance with certification requirements implementing Federal Executive Order 12549 and guidance issued in the *Federal Register*, Volume 70, No. 168, pages 51863 through 51880 for “Government wide Debarment and Suspension (Non-procurement).” The certification shall be treated as a material representation of fact upon which reliance will be placed when the Department of Commerce or its grantee (TOWN) determines to award the covered transaction, grant or cooperative agreement.

**1. DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS**

As required by Executive Order 12549, Debarment and Suspension, for prospective participants (CONTRACTOR) in primary covered transactions.

- (1) The prospective primary participant (CONTRACTOR) certifies to the best of its knowledge and belief, that it and its principals:
  - (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by a Federal department or agency;
  - (b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
  - (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
  - (d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.
- (2) Where the prospective primary participant (CONTRACTOR) is unable to certify to any of the statements in this certification, such prospective participant (CONTRACTOR) shall attach an explanation to this proposal.

**As the duly authorized representative of the CONTRACTOR, I hereby certify that the CONTRACTOR will comply with the above applicable certification(s).**

NAME OF CONTRACTOR	GRANT NUMBER AND PROJECT NAME GRANT NO. 21-C-4031 TOWN OF PRINCEVILLE 2022 CDBG NEIGHBORHOOD REVITALIZATION PROJECT
PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE	
SIGNATURE	DATE

**NON-COLLUSION CERTIFICATION**

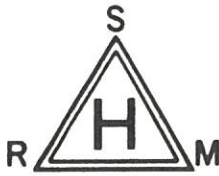
\_\_\_\_\_ (name of individual), being first duly sworn, deposes and says that:

1. He is the \_\_\_\_\_ (title) of \_\_\_\_\_  
(company name), the proposer that has submitted the attached proposal;
2. He is fully informed respecting the preparation and contents of the attached proposal and of all pertinent circumstances respecting such proposal;
3. Such proposal is genuine and is not a collusive or sham proposal;
4. Neither the said proposer nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant, has in any way colluded, conspired, connived or agreed, directly or indirectly, with any other proposer firm or person to submit a collusive or sham proposal in connection with the contract for which the attached proposal has been submitted or to refrain from proposing in connection with such contract, or has in any manner, directly or indirectly sought by agreement or collusion of communication or conference with any other proposer, firm or person to fix the price or prices in the attached proposal or of any other proposers, or to fix any overhead, profit or cost element of the proposal price of the proposal of any other proposer or to secure through collusion, conspiracy, connivance or unlawful agreement any advantage against the County or any person interested in the proposed contract; and
5. The price or prices quoted in the attached proposal are fair and proper and are not tainted by any collusion, conspiracy, connivance or unlawful agreement on the part of the proposer or any of its agents, representatives, owners, employees, or parties in interest, including this affiant.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date



## R S M HARRIS ASSOCIATES, INC.

PLANNERS-CONSULTANTS-DEVELOPERS

POST OFFICE BOX 10037  
GOLDSBORO, NORTH CAROLINA 27532-0037  
TELEPHONE 919.751.0909

2719 GRAVES DRIVE, SUITE 2  
GOLDSBORO, NORTH CAROLINA 27534  
EMAIL cdharris@rsmharris.com

### MEMORANDUM

TO: Modular Housing Dealers/Contractors

FROM: W. Chris Harris  
Reconstruction/Relocation Specialist

DATE: May 18, 2026

SUBJECT: Princeville 2022 CDBG-NR Project  
Request for Proposals for New Modular Homes  
Section 3 Provisions

Section 3 of the Housing and Urban Development Act of 1968 provides preference to low and very low income residents of the community (regardless of race or gender), and the businesses that substantially employ these persons, for new employment, training, and contracting opportunities. Businesses may receive a preference for work if they qualify as a Section 3 business. Attached is a certification form for you to complete and a list of documents you need to provide with your proposal if you want to be considered a Section 3 qualified firm. Please note this is optional and is not a requirement in order to submit a proposal.

All Contractors doing work with the Town are required to list any new hires with the local Employment Security Commission and to report any new hires to the Town. Firms are encouraged to provide preference to low income community residents and residents in public housing units. Attached is a brochure that explains the Section 3 Program and the Section 3 Clause which is part of the Contract.

The Town of Princeville is an equal opportunity employer and service provider. Small, minority, and/or women owned, Historically Underutilized Business (HUB), and Section 3 (low income) businesses and labor surplus area firms are encouraged to submit BIDS. The Fair Housing Act prohibits discrimination in housing based on race, color, national origin, religion, sex, family status, and disability.

This information is available in Spanish or any other language upon request. Please contact: Itia Hall, Town Manager, at 201 S. Main Street, Princeville, NC 27886, phone 252-823-1057, for accommodation for this request.

Esta información está disponible en español o en cualquier otro idioma bajo petición. Por favor, póngase en contacto con Itia Hall, Town Manager, en 201 S. Main Street, Princeville, NC 27886, teléfono 252-823-1057 de alojamiento para esta solicitud. This Municipality is an **Equal Opportunity Employer and Service Provider.**

Attachment



**CERTIFICATION FOR BUSINESS CONCERNS SEEKING SECTION 3  
PREFERENCE IN CONTRACTING AND DEMONSTRATION OF CAPABILITY**

Name of Business \_\_\_\_\_

Address of Business \_\_\_\_\_

Type of Business:       Corporation                       Partnership  
                                  Sole Proprietorship       Joint Venture

Attached is the following documentation as evidence of status:

**For Business claiming status as a Section 3 resident-owned enterprise:**

- |  |   |
|--|---|
| <input type="checkbox"/> Copy of resident lease  | <input type="checkbox"/> Copy of receipt of public assistance |
| <input type="checkbox"/> Copy of evidence of participation<br>in a public assistance program | <input type="checkbox"/> Other evidence                       |

**For business entity as applicable:**

- |   |   |
|---|---|
| <input type="checkbox"/> Copy of Articles of Incorporation  | <input type="checkbox"/> Certificate of Good Standing             |
| <input type="checkbox"/> Assumed Business Name Certificate  | <input type="checkbox"/> Partnership Agreement                    |
| <input type="checkbox"/> List of owners/stockholders and<br>% ownership of each                   | <input type="checkbox"/> Corporation Annual Report                |
| <input type="checkbox"/> Organization chart with names and titles<br>and brief function statement | <input type="checkbox"/> Latest Board minutes appointing officers |
|   | <input type="checkbox"/> Additional documentation                 |

**For business claiming Section 3 status by subcontracting 25 percent of the dollar awarded to qualified Section 3 business:**

- List of subcontracted Section 3 business(es) and subcontract amount

**For business claiming Section 3 status, claiming at least 30 percent of their workforce are currently Section 3 residents or were Section 3 eligible residents within 3 years of date of first employment with the business:**

- |  |  |
|--|--|
| <input type="checkbox"/> List of all current full-time employees                               | <input type="checkbox"/> List of employees claiming Section 3 status                                     |
| <input type="checkbox"/> PHA/IHA Residential lease less than 3<br>years from day of employment | <input type="checkbox"/> Other evidence of Section 3 status less than 3<br>years from date of employment |

Evidence of ability to perform successfully under the terms and conditions of the proposed contract:

- Current financial statement
- Statement of ability to comply with public policy
- List of owned equipment
- List of all contracts for the past two years

\_\_\_\_\_  
Authorizing Name and Signature

(Corporate Seal)

Attested by: \_\_\_\_\_

### Section 3 Clause

A. The work to be performed under this contract is subject to the requirements of section 3 of the Housing and Urban Development Act of 1968, as amended, 12 U.S.C. 1701u (Section 3). The purpose of Section 3 is to ensure that employment and other economic opportunities generated by HUD assistance or HUD-assisted projects covered by Section 3, shall, to the greatest extent feasible, be directed to low- and very low-income persons, particularly persons who are recipients of HUD assistance for housing.

B. The parties to this contract agree to comply with HUD's regulations in 24 CFR part 135, which implement Section 3. As evidenced by their execution of this contract, the parties to this contract certify that they are under no contractual or other impediment that would prevent them from complying with the part 135 regulations.

C. The contractor agrees to send to each labor organization or representative or workers with which the contractor has a collective bargaining agreement or other understanding, if any, a notice advising the labor organization or workers' representative of the contractor's commitments under this Section 3 clause, and will post copies of the notice in conspicuous places at the work site where both employees and applicants for training and employment positions can see the notice. The notice shall describe the Section 3 preference, shall set forth minimum number and job titles subject to hire, availability of apprenticeship and training positions, the qualifications for each; and the name and location of the person(s) taking applications for each of the positions; and the anticipated date the work shall begin.

D. The contractor agrees to include this Section 3 clause in every subcontract subject to compliance with regulations in 24 CFR part 135, and agrees to take appropriate action, as provided in an applicable provision of the subcontract or in this Section 3 clause, upon a finding that the subcontractor is in violation of the regulations in 24 CFR part 135. The contractor will not subcontract with any subcontractor where the contractor has notice or knowledge that the subcontractor has been found in violation of the regulations in 24 CFR part 135.

E. The contractor will certify that any vacant employment positions, including training positions, that are filled (1) after the contractor is selected but before the contract is executed, and (2) with persons other than those to whom the regulations of 24 CFR part 135 require employment opportunities to be directed, were not filled to circumvent the contractor's obligations under 24 CFR part 135.

F. Noncompliance with HUD's regulations in 24 CFR part 135 may result in sanctions, termination of this contract for default, and debarment or suspension from future HUD assisted contracts.

G. With respect to work performed in connection with Section 3 covered Indian housing assistance, section 7(b) of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 450e) also applies to the work to be performed under this contract. Section 7(b) requires that to the greatest extent feasible (i) preference and opportunities for training and employment shall be given to Indians, and (ii) preference in the award of contracts and subcontracts shall be given to Indian organizations and Indian-owned Economic Enterprises. Parties to this contract that are subject to the provisions of Section 3 to the maximum extent feasible, but not in derogation of compliance with section 7(b).

## HUD Compliance and Monitoring?

HUD monitors the performance of recipients and contractors. HUD examines employment and contract records for evidence of actions taken to train and employ Section 3 residents and to award contracts to Section 3 businesses. HUD provides technical assistance to recipients and contractors in order to obtain compliance with Section 3 requirements.

## What if it appears that an entity is not complying with Section 3?

There is a complaint process. Section 3 residents and business concerns may file complaints if they think a violation of Section 3 requirements has occurred where a HUD-funded project is planned or underway. Complaints will be investigated; if appropriate, voluntary resolutions will be sought. There are appeal rights to the Secretary. Section 3 residents and businesses may also seek judicial relief.

## How can Section 3 businesses or residents complain about a violation of Section 3 requirements?

They can file a complaint in writing to the local HUD FHEO Office or to:

**The Assistant Secretary for Fair Housing  
and Equal Opportunity**  
U.S. Department of Housing and Urban Development  
451 Seventh Street, SW, Room 5100  
Washington, DC 20410-2000  
1-800-669-9777  
1-800-927-9276 (TTY)  
[www.hud.gov](http://www.hud.gov) [www.espanol.hud.gov](http://www.espanol.hud.gov)

A written complaint should contain:

1. Name and address of the person filing the complaint;
2. Name and address of subject of complaint (HUD recipient or contractor);
3. Description of acts or omissions in alleged violation of Section 3;
4. Statement of corrective actions sought.

04736

# U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

## Section 3 Economic Opportunity *A Piece of the American Dream*



U.S. Department of Housing  
and Urban Development



Fair Housing and Equal  
Opportunity

April 2006  
HUD-1476-FHEO Rev 2  
OMB Approval Number 2529-0043 (exp. 8/31/2007)  
Previous Editions are Obsolete

## Section 3 Act

Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u) (as amended), requires that economic opportunities generated by certain HUD financial assistance for housing (including Public and Indian Housing) and community development programs shall, to the greatest extent feasible, be given to low and very low-income persons, particularly those who are recipients of government assistance for housing, and to businesses that provide economic opportunities for these persons.

Other HUD programs covered by Section 3 (to distinguish between HUD Public and Indian housing programs) are those that provide housing or community development assistance for housing rehabilitation, housing construction, or other public construction project.

## Who are Section 3 residents?

Public housing residents including persons with disabilities.

Low and very low income persons who live in the area where a HUD assisted project is located.

## What is a Section 3 business?

A section 3 business is one:

That is owned by Section 3 residents  
Employs Section 3 residents or;  
Subcontracts with businesses that provide opportunities to low and very low income persons.

## What types of Economic Opportunities are available under Section 3?

- ✓ Jobs and Employment opportunities
- ✓ Training and Educational opportunities
- ✓ Contracts and Business opportunities

## Who will provide the Economic Opportunities?

Recipients of HUD financial assistance and their contractors and subcontractors are expected to develop a Section 3 Plan to assure that economic opportunities to the greatest extent feasible, are provided to low and very low-income persons and to qualified Section 3 businesses. One element of that Plan is the use of a Section 3 clause which indicates that all work performed under the contract are subject to the requirements of Section 3.

## Who receives Economic Opportunities under Section 3?

*For training and employment:*

- ✓ persons in public and assisted housing;
- ✓ persons in the affected project neighborhood;
- ✓ participants in HUD Youth-build programs;
- ✓ homeless persons.

*For contracting:*

- ✓ businesses which fit the definition of a Section 3 business.

## How can individuals and businesses find out more about Section 3?

Contact the Fair Housing and Equal Opportunity representative at your nearest HUD Office.



### ¿Cómo obliga el HUD a cumplir la ley y cómo vigila su cumplimiento?

El HUD vigila el desempeño de los receptores de la asistencia y de los contratistas. El HUD examina las constancias de empleo y de las contrataciones para saber si se han tomado medidas para capacitar y dar empleo a los residentes según la Sección 3, así como para adjudicar contratos a las empresas según la Sección 3.



### ¿Qué se hace si alguna empresa parece no cumplir con la Sección 3?

Existe un procedimiento de denuncia. Los residentes y las empresas según la

Sección 3 pueden presentar denuncias si consideran que ha ocurrido una infracción de los requisitos de la Sección 3 que afecta a un proyecto financiado por el HUD, planificado o en vías de realización. Estas denuncias se investigarán y se procurará resolverlas de forma voluntaria. Hay derecho de apelación ante el Secretario. Los residentes y las empresas según la Sección 3 también pueden recurrir al desagravio por vía judicial.



### ¿Cómo pueden quejarse las empresas o los residentes según la Sección 3 de las infracciones de la misma?

Pueden presentar una denuncia por escrito a la delegación local de HUD/FHEO o a:

#### **The Assistant Secretary for Fair Housing and Equal Opportunity**

U.S. Department of Housing and Urban Development  
451 Seventh Street, SW, Room 5100  
Washington, DC 20410-2000  
1-800-669-9777  
1-800-927-9276 (TTY)  
[www.espanol.hud.gov](http://www.espanol.hud.gov)

En las denuncias por escrito se incluirán los datos siguientes:

- Nombre y dirección del denunciante;
- Nombre y dirección del denunciado (beneficiario o contratista del HUD);
- Descripción de los actos u omisiones que supuestamente han infringido la Sección 3;
- Declaración de las medidas correctivas que se solicitan.

HUD-1476-FHEO Rev 2 (Spanish) (4/06)

# Departamento de Vivienda y Desarrollo Urbano de los Estados Unidos de América

## SECCIÓN 3 OPORTUNIDAD ECONÓMICA

*Un trozo del ideal americano*



Departamento  
de Vivienda y Desarrollo Urbano de los  
Estados Unidos



Equidad de Vivienda e Igualdad de  
Oportunidades

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## Sección 3 de la Ley

Conforme a la Sección 3 de la Ley de Vivienda y Desarrollo Urbano de los Estados Unidos de 1968 (que figura en la Sección 1701u, enmendada, del título 12 del Código de los Estados Unidos), las oportunidades económicas que generen determinados tipos de asistencia financiera concedida por el Departamento de Vivienda y Desarrollo Urbano (HUD), incluida la destinada a la vivienda pública y la de los pueblos indígenas, se deberá proporcionar, en lo que sea factible, a las personas de ingresos bajos o muy bajos, especialmente a las que reciben asistencia pública para la vivienda, así como a las empresas que ofrecen oportunidades económicas a esas personas.

El HUD también administra otros programas conforme a la Sección 3. Para distinguir entre los programas para la vivienda pública y los destinados a los pueblos indígenas, estos otros programas proporcionan asistencia para la vivienda o para el desarrollo comunitario dirigida a la rehabilitación y construcción de viviendas o a otros proyectos de construcción pública.

## ¿Quiénes son los residentes según la Sección 3?

Los residentes de viviendas públicas, incluidos los discapacitados.

Las personas de ingresos bajos o muy bajos que viven donde hay bloques de viviendas que reciben asistencia del HUD.

## ¿Cuáles son las empresas según la Sección 3?

Por una empresa según la Sección 3 se entiende:

- La que es propiedad de residentes según la Sección 3.
- La que emplea a residentes según la Sección 3.
- La que subcontrata a empresas que proporcionan oportunidades a personas de ingresos bajos o muy bajos.

## ¿Qué tipos de oportunidades económicas se ofrecen según la Sección 3?

- ✓ Oportunidades de trabajo y empleo
- ✓ Oportunidades de capacitación y educación
- ✓ Contracts and Business opportunities

## ¿Quién proporcionará las oportunidades económicas?

Los receptores de la asistencia financiera del HUD y sus contratistas y subcontratistas están obligados a elaborar planes conforme a la Sección 3 para asegurar que, en lo que sea factible, se proporcionen oportunidades a las personas de ingresos bajos o muy bajos y a las empresas que reúnan las condiciones que estipula la Sección 3. En esos planes se especificará que todos los trabajos efectuados conforme al contrato cumplan con los requisitos de la Sección 3.

## ¿Quién recibe las oportunidades económicas según la Sección 3?

Con fines de capacitación y empleo:

- ✓ Los residentes en viviendas públicas o subvencionadas;
- ✓ Los residentes en el vecindario de las viviendas públicas o subvencionadas;
- ✓ Los participantes en los programas del HUD de ayuda a la juventud (Youth-build programs);
- ✓ Las personas sin hogar.

Para conseguir contratos:

- ✓ Los negocios que se ajusten a la definición de las empresas según la Sección 3.

## ¿Cómo pueden las personas y las empresas recibir más información acerca de la Sección 3?

Deben comunicarse con el representante de la Oficina para la Equidad de Vivienda e Igualdad de Oportunidades (Fair Housing and Equal Opportunity, FHEO), en la delegación del HUD más cercana.