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

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

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 THE ESTATE OF KATHERINE TSANOFF BROWN					Policy Numb	per:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3 SPRING HOLLOW STREET					Company N	AIC Number:		
City								
HOUSTON	4							
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 14, BLOCK 2 OF TIMBER LANE TERRACE IN HARRIS COUNTY, TEXAS								
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL								
A5. Latitude/Longitu	A5. Latitude/Longitude: Lat. 29.776276° Long95.480930° Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983							
A6. Attach at least	2 photograph	s of the building if the	Certific	ate is being used to	obtain flood insur	ance.		
A7. Building Diagra	m Number _	1A						
A8. For a building v	vith a crawlsp	ace or enclosure(s):				•		
a) Square foot	age of crawls	pace or enclosure(s)		sq ft				
b) Number of p	ermanent flo	od openings in the cra	wlspac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gra	ade	
c) Total net are	a of flood op	enings in A8.b	s	q in				
d) Engineered	d) Engineered flood openings? Yes No							
A9. For a building w	ith an attach	ed garage:						
a) Square footage of attached garage 294 sq ft								
b) Number of p	ermanent flo	od openings in the atta	ached g	garage within 1.0 fo	ot above adjacent	grade		
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade c) Total net area of flood openings in A9.b sq in								
d) Engineered flood openings in As.b sq in								
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Communit CITY OF HOUSTOR	=	ommunity Number		B2. County Name HARRIS			B3. State Texas	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E1	IRM Panel ffective/ evised Date	B8. Flood Zone(s	(Zol	se Flood Elevation(s) ne AO, use Base od Depth)	
48201 C 0665	М	11/15/2019	06/09		AE	48.0 FE		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:								
☐ FIS Profile 区 FIRM ☐ Community Determined ☐ Other/Source:								
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 X Other/Source: NAVD 88, 2001 ADJ.								
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🔲 Yes 🗵 No								
Designation Date: CBRS OPA								
						_		

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IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or 3 SPRING HOLLOW STREET	Policy Number:					
City State ZIP Code			Company NAIC Number			
HOUSTON Texa	as 7702	4				
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
	n Drawings* 🔲 Build		ction* X Finished Construction			
*A new Elevation Certificate will be required when co						
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: RM 210205 ELEV. = 58.04 FEET Vertical Datum: NAVD 1988, 2001 ADJUSTMENT						
Indicate elevation datum used for the elevations in ite			ABOOTMENT			
Indicate elevation datum used for the elevations in the NGVD 1929 ☐ NAVD 1988 ☒ Other/S						
Datum used for building elevations must be the same						
			Check the measurement used.			
 a) Top of bottom floor (including basement, crawlspan 	ace, or enclosure floor)		X feet meters			
b) Top of the next higher floor		N/A	X feet meters			
c) Bottom of the lowest horizontal structural membe	r (V Zones only)	N/A	X feet meters			
d) Attached garage (top of slab)		55.8	X feet meters			
e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Com	ricing the building ments)	N/A	X feet meters			
f) Lowest adjacent (finished) grade next to building	(LAG)	<u>53</u> . <u>8</u>	x feet meters			
g) Highest adjacent (finished) grade next to building	(HAG)	54. 9	x feet meters			
h) Lowest adjacent grade at lowest elevation of dec		N/A	X feet meters			
structural support						
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION						
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by 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 lic						
Certifier's Name	License Number					
JAMES P. WALKOVIAK	5971		OFTO			
Title REGISTERED PROFESSIONAL LAND SURVEYOR						
Company Name PRECISION SURVEYORS INC.						
Address 950 THREADNEEDLE STREET, SUITE NO. 150	P SURVEYOR A					
City HOUSTON	State Texas	ZIP Code 77079	The state of the s			
Signature P///	Date 01/07/2020	Telephone (281) 496-1586	•			
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.						
Comments (including type of equipment and location, per C2(e), if applicable)						
THIS CERTIFICATE WAS REVISED FROM 11/20/2019 TO ADD THE FOLLOWING; A PORTION OF THE HOUSE (915 SQUARE FEET) IS BUILDING DIAGRAM 8 WITH 5 VENTS HAVING A TOTAL NET AREA OF 432 SQUARE INCHES						

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSURANCE	CE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, ar 3 SPRING HOLLOW STREET	nd/or Bldg. No.)	or P.O. Route an	id Box No.	Policy Number:		
City	State	ZIP Code)	Company NAIC	Number	
HOUSTON	Texas	77024	LIBVEY NOT	DECITIBED)		
SECTION E – BUILDING E FOR ZON	NE AO AND ZO	NE A (WITHOL	JT BFE)	REQUIRED		
For Zones AO and A (without BFE), complete Items E complete Sections A, B,and C. For Items E1–E4, use enter meters. E1. Provide elevation information for the following an	natural grade, if	available. Checl	k the measure	ment used. In Pu	erto Rico only,	
the highest adjacent grade (HAG) and the lowest a) Top of bottom floor (including basement,	t adjacent grade	(LAG).	7 SHOW WHERE		upove or bolow	
crawlspace, or enclosure) is			feet 🗌 mete	rs 🗌 above or	below the HAG.	
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 			feet 🗌 mete	rs 🔲 above or	below the LAG.	
E2. For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in the diagrams) of the building is	openings provid		Items 8 and/or feet ☐ mete		2 of Instructions), ☐ below the HAG.	
E3. Attached garage (top of slab) is			feet 🗌 mete	rs 🔲 above or	below the HAG.	
E4. Top of platform of machinery and/or equipment servicing the building is			feet 🗌 mete	rs 🔲 above or	below the HAG.	
F5 Zone AO only: If no flood depth number is availa	ble, is the top of ☐ No ☐ Unl	the bottom floor	elevated in ac al official must	ccordance with the certify this inform	e community's ation in Section G.	
SECTION F - PROPERTY OV	VNER (OR OW	NER'S REPRES	ENTATIVE) C	ERTIFICATION		
The property owner or owner's authorized representa community-issued BFE) or Zone AO must sign here.	tive who comple The statements	etes Sections A, I in Sections A, B	B, and E for Z , and E are co	one A (without a l	EMA-issued or f my knowledge.	
Property Owner or Owner's Authorized Representative's Name						
Address		City	S	tate	ZIP Code	
Signature		Date	Ţ	elephone		
Comments						
	ř.					
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ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, S 3 SPRING HOLLOW STREET	policy Number:		
City State ZIP Code			Company NAIC Number
HOUSTON	Texas	77024	ALX
		NFORMATION (OPTION	
The local official who is authorized by law or o Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, et G1. The Information in Section C was tall engineer, or architect who is authorized.	n Certificate. Complete t nter meters. ken from other documer	ne applicable item(s) and	n management ordinance can complete I sign below. Check the measurement ned and sealed by a licensed surveyor, ate the source and date of the elevation
data in the Comments area below.)			FEMA-issued or community-issued BFE)
G3. The following information (Items G4	–G10) is provided for co	mmunity floodplain man	agement purposes.
G4. Permit Number	G5. Date Permit Issu	led	G6. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	New Construction	Substantial Improveme	nt
G8. Elevation of as-built lowest floor (includir of the building:	ng basement)		feet meters Datum
G9. BFE or (in Zone AO) depth of flooding at	t the building site:		feet meters Datum
G10. Community's design flood elevation:			feet meters Datum
Local Official's Name		Title	
Community Name		Telephone	
Signature		Date	
Comments (including type of equipment and le	ocation, per C2(e), if ap	plicable)	
			☐ Check here if attachments.

BUILDING PHOTOGRAPHS

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See Instructions for Item A6.

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE Policy Number:				
Building Street Address (including Apt., Un 3 SPRING HOLLOW STREET					
City HOUSTON	State Texas	ZIP Code 77024	Company NAIC Number		

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One Caption

RESIDENCE VIEW 11/20/2019

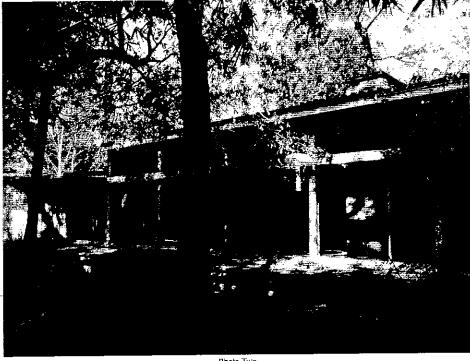


Photo Two

Photo Two Caption

RESIDENCE VIEW 11/20/2019

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

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IMPORTANT: In these spaces, copy the corresponding information from Section A.

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

3 SPRING HOLLOW STREET

City
HOUSTON

State
Texas

FOR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

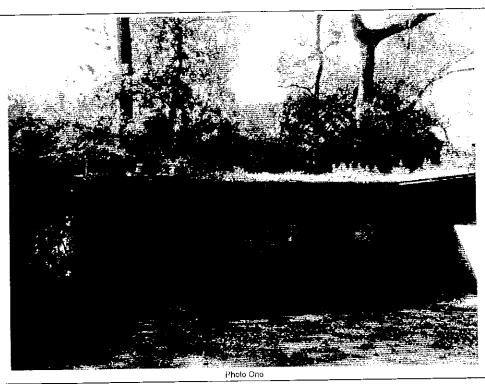


Photo One Caption

RESIDENCE VIEW 11/20/2019



Photo Two

Photo Two Caption

RESIDENCE VIEW 11/20/2019