

**T-47 RESIDENTIAL REAL PROPERTY AFFIDAVIT
(MAY BE MODIFIED AS APPROPRIATE FOR COMMERCIAL TRANSACTIONS)**

Date: 12/12/2019 GF No. _____
Name of Affiant(s): Laurie W. Alexander
Address of Affiant: 841 5th St, San Leon, Tx 77539
Description of Property: ABST 10 A EDWARDS LTS 5-7 & LTS 43-44 & W 15 FT 42 BLK 144 S
County GALVESTON, Texas


"Title Company" as used herein is the Title Insurance Company whose policy of title insurance is issued in reliance upon the statements contained herein.

Before me, the undersigned notary for the State of Texas, personally appeared Affiant(s) who after by me being sworn, stated:

1. We are the owners of the Property. (Or state other basis for knowledge by Affiant(s) of the Property, such as lease, management, neighbor, etc. For example, "Affiant is the manager of the Property for the record title owners.")
2. We are familiar with the property and the improvements located on the Property.
3. We are closing a transaction requiring title insurance and the proposed insured owner or lender has requested area and boundary coverage in the title insurance policy(ies) to be issued in this transaction. We understand that the Title Company may make exceptions to the coverage of the title insurance as Title Company may deem appropriate. We understand that the owner of the property, if the current transaction is a sale, may request a similar amendment to the area and boundary coverage in the Owner's Policy of Title Insurance upon payment of the promulgated premium.
4. To the best of our actual knowledge and belief, since 10/4/2013 there have been no:
 - a. construction projects such as new structures, additional buildings, rooms, garages, swimming pools or other permanent improvements or fixtures;
 - b. changes in the location of boundary fences or boundary walls;
 - c. construction projects on immediately adjoining property(ies) which encroach on the Property;
 - d. conveyances, replattings, easement grants and/or easement dedications (such as a utility line) by any party affecting the Property.

EXCEPT for the following (If None, Insert "None" Below:)

5. We understand that Title Company is relying on the truthfulness of the statements made in this affidavit to provide the area and boundary coverage and upon the evidence of the existing real property survey of the Property. This Affidavit is not made for the benefit of any other parties and this Affidavit does not constitute a warranty or guarantee of the location of improvements.
6. We understand that we have no liability to Title Company that will issue the policy(ies) should the information in this Affidavit be incorrect other than information that we personally know to be incorrect and which we do not disclose to the Title Company.

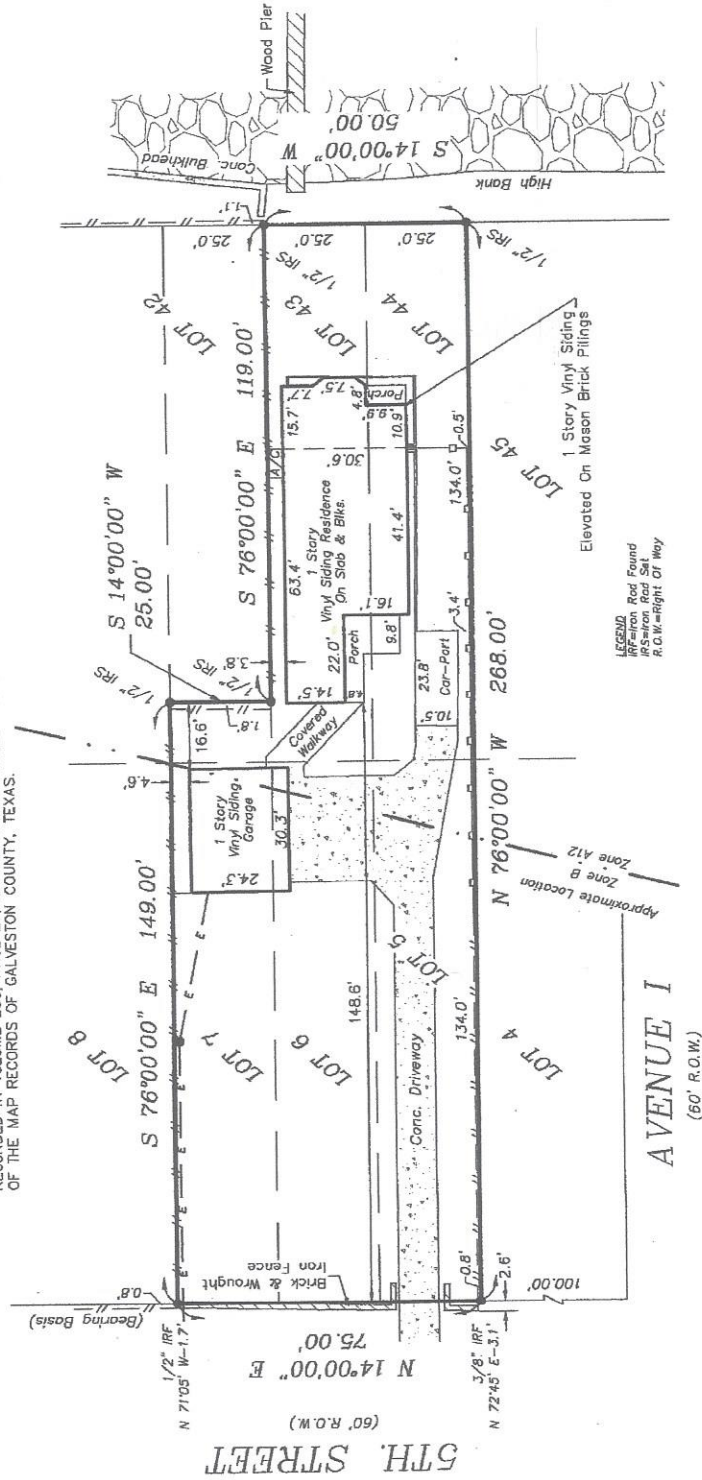
 Laurie W. Alexander
Laurie W. Alexander

SWORN AND SUBSCRIBED this _____ day of _____, 20_____.

Notary Public
(TXR 1907) 02-01-2010

SURVEY OF

THE PROPERTY LOCATED AT 841 5TH. STREET, BEING LOTS 5, 6, 7, 43, 44, AND THE WEST 15 FEET OF LOT 42, IN BLOCK 144, OF SAN LEON TOWNSITE, IN GALVESTON COUNTY, TEXAS, ACCORDING TO THE MAP OR PLAT THEREOF RECORDED IN VOLUME 236, PAGE 27, OF THE MAP RECORDS AND TRANSFERRED TO PLAT RECORD 8, MAP NO. 32, OF THE MAP RECORDS OF GALVESTON COUNTY, TEXAS.



TO: STEARNS LENDING, INC. and STARTEX TITLE COMPANY, EXCLUSIVELY.

I, Todd J. Slaton, Registered Professional Land Surveyor No. 5082, do hereby certify that the plat shown hereon was prepared from an actual survey made on the ground under my supervision and conforms to the Texas Board of Professional Land Surveying minimum standards adopted September 1, 1992; the size, location and type of improvements are shown with setback dimensions where applicable. There are no apparent visible encroachments, conflicts or protrusions as shown. All easements shown are per the reference plat unless noted otherwise. This plat was prepared specifically for the transaction referenced below. The undersigned assumes no responsibility for any other use. Certification shown below is revoked and this survey is null and void if this document is altered in any manner, or does not bear an original seal and signature of Todd J. Slaton in blue ink. All 1/2 inch iron rods set with a cap stamped "True Meridian".

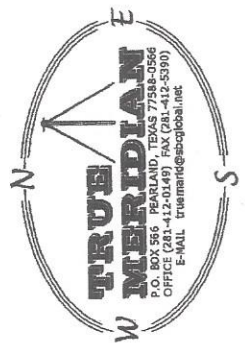
By: *Todd J. Slaton*
 Todd J. Slaton, Registered Professional Land Surveyor No. 5082

PURCHASER: Laurie W. Alexander
 StarTex Title Company
 GF No. 1813735251

FLOOD STAMP
 IT APPEARS THROUGH VISUAL INTERPOLATION THAT ACCORDING TO THE FLOOD INSURANCE RATE MAPS, COMMUNITY-PANEL NO. 485470 0105 C, EFFECTIVE DATE MAY 2, 1983, THIS PROPERTY LIES IN SHADED ZONE B AND ZONE A12, BFE=11'.

NOT FOR CONSTRUCTION

SCALE: 1" = 30'
 DATE SURVEYED: MAY 16, 2013
 REVISED: SEPT. 16, 2013
 JOB NO. 13-2078



SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name Richard Green and Carmen Green	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 841 5th Street	Company NAIC Number:
City San Leon State TX ZIP Code 77639	

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
Lots 6, 8, 7, 43, 44 and the West 16 feet of Lot 42, in Block 144, San Leon Townsite

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **Residential**

A5. Latitude/Longitude: Lat. **29°28'57.5"** Long. **94°55'06.0"** Horizontal Datum: NAD 1927 NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number **8**

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s)	1,287	sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	0	
c) Total net area of flood openings in A8 b	0	sq in
d) Engineered flood openings?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

A9. For a building with an attached garage:

a) Square footage of attached garage	0	sq ft
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade	0	
c) Total net area of flood openings in A9.b	0	sq in
d) Engineered flood openings?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number UNINCORPORATED 485470		B2. County Name GALVESTON		B3. State TEXAS	
B4. Map/Panel Number 485470 0105	B5. Suffix C	B6. FIRM Index Date 12-8-02	B7. FIRM Panel Effective/Revised Date 6-2-83	B8. Flood Zone(s) A12	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 11

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
 FIS Profile FIRM Community Determined Other/Source: _____

B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source: _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?
 Designation Date: _____ CBRS OPA Yes No

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, 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: **H 1243** Vertical Datum: **NGVD 1929**

Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 NAVD 1988 Other/Source: _____
 Datum used for building elevations must be the same as that used for the BFE.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	11.2	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	20.8	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	NA	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	NA	<input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	11.7	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	9.3	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	10.0	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	9.8	<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 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.

Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Check here if attachments.

Certifier's Name TODD J. SLATON	License Number RPLS 5082
Title MANAGER	Company Name TRUE MERIDIAN
Address P.O. BOX 566	City PEARLAND State TX ZIP Code 77586
Signature <i>Todd J. Slaton</i>	Date 6-3-13 Telephone 281-412-0149



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

FOR INSURANCE COMPANY USE

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No
841 5th. Street

Policy Number:

City San Leon

State TX

ZIP Code 77539

Company NAIC Number:

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

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

Comments (1) SECTION C2.E) IS THE BOTTOM OF A/C COMPRESSOR UNIT.

Signature

Scott D. Martin

Date 6-3-13

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (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 8-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in the diagrams) 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 REPRESENTATIVE) CERTIFICATION

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

Property Owner's or Owner's Authorized Representative's Name

Address	City	State	ZIP Code
Signature	Date	Telephone	

Comments

Check here if attachments.

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in items G8-G10. In Puerto Rico only, enter meters.

- G1. The information in Section G was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
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- G7. This permit has been issued for. New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters Datum _____
- G9. BFE or (in Zone AO) depth of flooding at 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

Check here if attachments.

See Instructions for Item A6.

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

FOR INSURANCE COMPANY USE

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
841 5th Street

Policy Number:

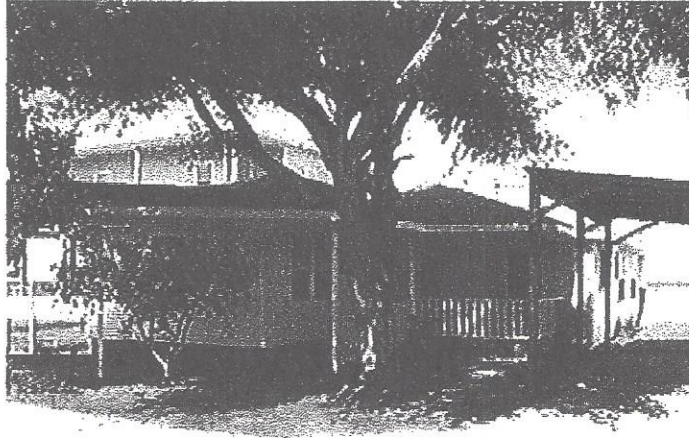
City San Leon

State TX

ZIP Code 77639

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.



FRONT VIEW (DATED 5-31-13)



REAR VIEW (DATED 5-31-13)

STANDARD FLOOD HAZARD DETERMINATION

Contact Name: Wendy Patterson
 Contact Phone: 832-630-0157
 Contact Email: harmonyinsuranceservices@yahoo.com
 Contact Fax: 832-630-0157

SECTION I - LOAN INFORMATION

1. LENDER NAME AND ADDRESS		2. COLLATERAL (Building/MobileHome/Personal Property) PROPERTY ADDRESS (Legal Description may be attached) Certified Address: ALEXANDER, LAURIE 841 5TH ST DICKINSON TX 77539-2458		
3. LENDER ID. NO	4. LOAN IDENTIFIER	5. AMOUNT OF FLOOD INSURANCE REQUIRED		

SECTION II

A. NATIONAL FLOOD INSURANCE PROGRAM (NFIP) COMMUNITY JURISDICTION

1. NFIP Community Name	2. County(ies)	3. State	4. NFIP Community Number	
GALVESTON COUNTY*	GALVESTON COUNTY	TX	485470	

B. NATIONAL FLOOD INSURANCE PROGRAM(NFIP) DATA AFFECTING BUILDING/MOBILE HOME

1. NFIP Map Number or Community-Panel Number (Community name, if not the same as "A")	2. NFIP Map Panel Effective/Revised Date	3. LOMA/LOMR	4. Flood Zone	5. No NFIP Map
485470-0105-C	05-02-1983	No	B	No

C. FEDERAL FLOOD INSURANCE AVAILABILITY (Check all that apply)

Federal Flood Insurance is available (community participates in NFIP). Regular Program Emergency Program of NFIP
 Federal Flood Insurance is not available because the community is not participating in the NFIP
 Building/Mobile Home is in a Coastal Barrier Resource Area(CBRA) or Otherwise Protected Area(OPA), Federal Flood Insurance may not be available

CBRA/OPA Designation date:

D. DETERMINATION

IS BUILDING/MOBILE HOME IN SPECIAL FLOOD HAZARD AREA (ZONES BEGINNING WITH LETTER "A" OR "V")? [] YES [X] NO

If yes, flood insurance is required by the Flood Disaster Protection Act of 1973.
 If no, flood insurance is not required by the Flood Disaster Protection Act of 1973.

E. COMMENTS: This flood determination is provided solely for the use and benefit of the entity named in Section 1, Box 1 in order to comply with the 1994 Reform Act and may not be used for or relied upon by any other entity or individual for any purpose, including, but not limited to deciding whether to purchase a property or determining the value of a property. 8655993

Determination No. K01_E0601FL2F094608	Borrower: ALEXANDER, LAURIE Reg. Pgm. Entry: 04-09-1971 BFE: BFD: Det Ref ID: 12455202	MSA: 26420 Parcel No: Legal Description:	State/County Code: 48-5470
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This determination is based on examining the NFIP map, and any Federal Management Agency revisions to it, and any other information needed to locate the building/mobile home on the NFIP map.

F. PREPARER'S INFORMATION

NAME, ADDRESS, TELEPHONE NUMBER Factual Data Flood 5200 Hahns Peak Drive Loveland, CO 80538	DATE OF DETERMINATION 09-18-2013
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G. PRIOR COMMUNITY INFORMATION

1. NFIP Map Number or Community-Panel Number	2. NFIP Map Panel Effective/Revised Date	3. LOMA/LOMR	4. Flood Zone	Determination Inquiries:
		No		800-371-0061