

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:	
BUILDING OWNER'S NAME			Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 74 County Road 299			Company NAIC Number	
CITY Near Sargent	STATE TX	ZIP CODE 77414		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lots 213, 214 & SE 1/2 215 Downey's Caney Creek Club Section 10				
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential				
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##"##" or ##.#####)		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983		SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Near Sargent 485489		B2. COUNTY NAME Matagorda		B3. STATE TEXAS	
B4. MAP AND PANEL NUMBER 0450	B5. SUFFIX D	B6. FIRM INDEX DATE 5-1-71	B7. FIRM PANEL EFFECTIVE/REVISED DATE 5-4-92	B8. FLOOD ZONE(S) V-13	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 11'

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

B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe):

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

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. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. 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 C3-a-i below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum Conversion/Comments

Elevation reference mark used Does the elevation reference mark used appear on the FIRM? Yes No

- o a) Top of bottom floor (including basement or enclosure) 7.3 ft.(m)
- o b) Top of next higher floor 17.2 ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) 15.3 ft.(m)
- o d) Attached garage (top of slab) N/A ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 17.0 ft.(m)
- o f) Lowest adjacent (finished) grade (LAG) 6.0 ft.(m)
- o g) Highest adjacent (finished) grade (HAG) 7.1 ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade N/A
- o i) Total area of all permanent openings (flood vents) in C3.h N/A sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date



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 in Sections A, B, and C 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.

CERTIFIER'S NAME **Max L. Hagan** LICENSE NUMBER No. **937**

TITLE **Reg. Professional Land Surveyor** COMPANY NAME **Max Hagan Surveying & Engineering**

ADDRESS **P.O. BOX 462** CITY **Lake Jackson** STATE **TX** ZIP CODE **77566**

SIGNATURE *Max L. Hagan* DATE **August 4, 2005** TELEPHONE **979-265-5887**

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. 74 County Road 299			Policy Number
CITY Near Sargent	STATE TX	ZIP CODE 77414	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 **Note: The bottom of electrical box is at 12.2' above mean sea level. The top of the slab below the house is at 7.1' above mean sea level.**

Check here if attachments

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

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is ___ ft.(m) ___ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is ___ ft.(m) ___ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is ___ ft.(m) ___ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. For 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, C (Items C3.h and C3.i only), 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, C, 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.

- G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local 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-G9) 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 is: ___ ft.(m) Datum:

G9. BFE or (in Zone AO) depth of flooding at the building site is: ___ ft.(m) Datum:

LOCAL OFFICIAL'S NAME TITLE

COMMUNITY NAME TELEPHONE

SIGNATURE DATE

COMMENTS

Check here if attachments



TEXAS DEPARTMENT OF INSURANCE

Windstorm Inspections / MC 103-1E 333 Guadalupe Street P.O. Box 149104 Austin, Texas 78714-9104
(512) 322-2203 or toll free 1-(800) 248-6032 Fax (512) 322-2273 TDI website: www.tdi.state.tx.us

Inspection Verification

Form WPI-2-BC-4

For projects that commenced construction on or after January 1, 2005

I, the undersigned, do hereby notify that I am a professional engineer licensed to practice in the State of Texas and that I am a qualified inspector appointed by the Commissioner of the Texas Department of Insurance to perform inspections in accordance with Article 21.49 §6A of the Texas Insurance Code and with 28 Texas Administrative Code §5.4604. I do state that I am personally responsible as the engineer-of-record for the windstorm inspection of this project and I have provided standard and customary construction review services including an inspection or inspections by myself or an employee under my direct supervision for:

- Entire Building (Type): Residential
- Entire Re-Roof (Type): _____
- Re-Jacking
- Partial Re-roof (Type and Area): _____
- Re-Jacking
- Alteration (Type): _____

- Repair (Type): _____
- Mechanical Only (Type): _____
- * Foundation Only (Type): _____
- Addition (Type): _____
- ** Retrofit of All Exterior Openings: _____

Comments

**The foundation has been designed in accordance with the wind load provisions indicated below and the entire structure was considered in the design of the foundation.*

***For windborne debris protection only (impact resistant exterior opening products or shutters). All exterior openings shall include windows, doors, garage doors, and skylights.*

The building is located at: (Complete 9-1-1 Street Address including house/building Number):

Street Address: 74 County Road 299 City: Sargent and County: Matagorda

I certify that the project was designed and inspected in compliance with the wind load provisions of:

- International Residential Code, 2003 Edition or International Building Code, 2003 Edition
(Amended with 2003 Texas Revisions) (Amended with 2003 Texas Revisions)

The design conditions used were:

Wind Speed (3-second gust):

- 110 mph (Required for Inland II) 120 mph (Required for Inland I) 130 mph (Required for Seaward)

Note: ¹ All exterior openings (exterior doors, windows, garage doors, and skylights) contain products that have been designed and inspected for compliance with uniform static wind pressure requirements (Applicable only to those projects which include the installation of exterior opening products).

Protection of Exterior Openings:

- Provided for as specified in the Texas Revisions (required for projects located in the Inland I and Seaward areas).
- Not provided for as specified in the Texas Revisions (applicable to projects located in the Inland II area).

Date(s) of Inspection(s): 6-23-05, 7-28-05, 8-10-05, 9-20-05

I understand and intend that the Texas Department of Insurance will rely upon this statement of compliance in determining whether to issue a Certificate of Compliance for the building/structure and to notify the Texas Windstorm Insurance Association that the building/structure is eligible for a windstorm and hail insurance policy.



Max L. Hagan

Name (please print or type)

Max L. Hagan

Signature

P.O. Box 462

Address

Lake Jackson, TX 77566

979-265-5887

City and State and Zip

September 20, 2005¹

Business Telephone

Date

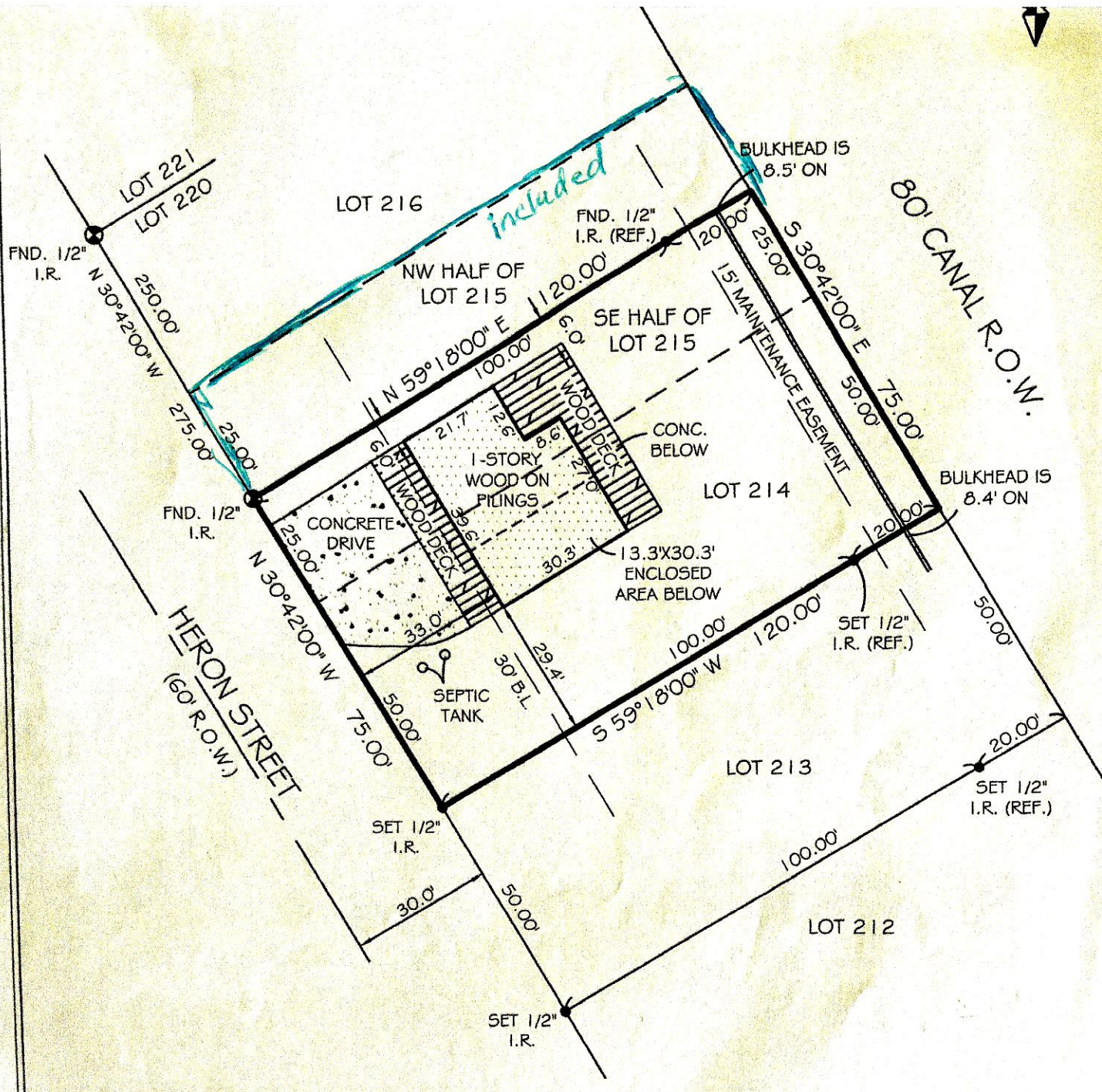
No. 9811

Texas Registration Number

As per Article 21.47, Texas Insurance Code, a person commits an offense if the person knowingly or intentionally makes, files, or uses any instrument in writing required to be made to or filed with the Texas Department of Insurance or the Insurance Commissioner, either by the Insurance Code or by rule or regulation of the Texas Department of Insurance, when the instrument in writing contains any false, fictitious, or fraudulent statement or entry with regard to any material fact. "Texas Department of Insurance" includes any association, corporation, or person created by the Insurance Code. An offense under this article is a felony of the third degree.

WS# 4922

FORM WPI-2-BC-4
Effective January 1, 2005



MAX HAGAN SURVEYING & ENGINEERING

1420 OLD ANGLETON ROAD CLUTE, TEXAS. 77531 (979) 265-5887 (800) 460-3456

I have consulted the HUD-FIA Flood Hazard Boundary Map in the above described property IS in a designated flood hazard area. The plat hereon is a true, correct and accurate representation of the property as determined by survey. The lines and dimensions of said property being as indicated by the plat; the size, location and type of buildings and improvements are as shown, all improvements being within the boundaries of the property, set back and distances from property lines are as indicated. There are no encroachments, conflicts, or protrusions, except as shown.

NOTES:
 1. PROPERTY SUBJECT TO RECORDED, RESTRICTIONS, REGULATIONS, & ORDINANCES (IF ANY), INCLUDING THOSE IN THE CITY OF: SARGENT
 2. ALL BUILDING LINES, EASEMENTS, BUILDING RESTRICTIONS (DEED RESTRICTIONS, ETC.) AND ZONING ORDINANCES, IF ANY, THAT MAY AFFECT SUBJECT PROPERTY SHOULD BE VERIFIED BY BUILDER BEFORE COMMENCING CONSTRUCTION.
 3. BEARING ORIENTATION BASED ON RECORDED PLAT.

COMMUNITY NO: 485489 PANEL NO: 0450 SUFFIX: D_ZONE-V13 BASE: 11' MAP REVISED: 5-4-92

	ASPHALT		CHAIN LINK FENCE		CONTROLLING MONUMENT
	COVERED		WOOD FENCE		U.E. UTILITY EASEMENT
	CONCRETE		IRON FENCE		A.E. AERIAL EASEMENT
					B.L. BUILDING LINE
					R.O.W. RIGHT-OF-WAY
					I.R. IRON ROD
					I.P. IRON PIPE
					FND. FOUND

LEGEND

ABSTRACT INFORMATION PROVIDED HEREON IS BELIEVED TO BE SUFFICIENT AND CORRECT BY THE UNDERSIGNED SURVEYOR, THIS SURVEY DOES NOT CONSTITUTE A TITLE SEARCH BY THE SURVEYOR. THE ENCUMBRANCES OF RECORD, AS REFLECTED ON THIS SURVEY ARE BASED ON THE RECORDED MAP OR PLAT AND MAY NOT CONSTITUTE ALL ENCUMBRANCES OF RECORD.

TO ALL PARTIES INTERESTED IN PREMISES SURVEYED:
 This is to certify that I have, this day, made a careful and accurate survey on the ground of the property located at:
 10215 HERON STREET NEAR SARGENT, TEXAS.

