
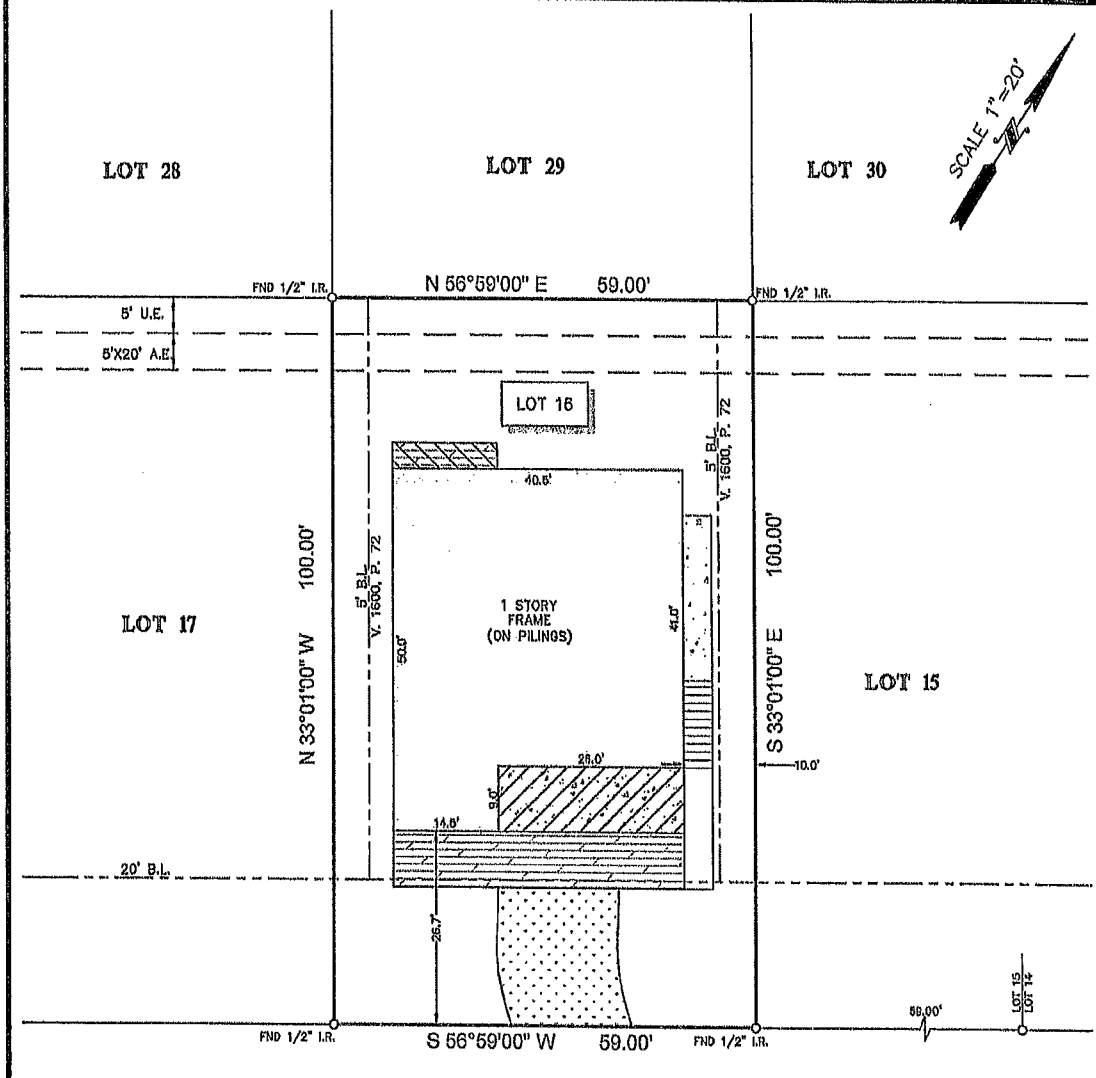


TITLE COMPANY:

 409-744-0727
 O.F. #: GV1538127 ISSUE DATE: JUNE 25, 2015



GORDON PEAN WAY
 (60' R.O.W.)

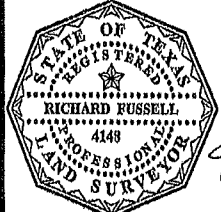
LEGEND

B.L.	= BUILDING LINE
U.E.	= UTILITY EASEMENT
A.E.	= AERIAL EASEMENT
	STEPS
	CONCRETE
	DIRT DRIVE
	COVERED AREA
	WOOD DECK

NOTES:

- ALL BEARINGS SHOWN HEREON ARE REFERENCED TO THE SUBDIVISION PLAT NAMED BELOW. POINTS (A) AND (B) WERE HELD FOR HORIZONTAL CONTROL.
- ABSTRACT INFORMATION FOR THE SUBJECT TRACT WAS PROVIDED BY THE TITLE INSURANCE COMPANY LISTED ABOVE.
- THIS SURVEY IS CERTIFIED TO THE TITLE INSURANCE COMPANY LISTED ABOVE. IF THIS TRANSACTION ONLY, IT IS NOT TRANSFERABLE TO ADDITIONAL INSTITUTIONS OR SUBSEQUENT OWNERS.
- ALL EASEMENTS AND BUILDING LINES SHOWN ARE PER THE RECORDED PLAT UNLESS OTHERWISE NOTED.
- THERE ARE NO NATURAL DRAINAGE COURSES ON SUBJECT PROPERTY.
- SUBJECT TO THE RESTRICTIVE COVENANTS AS LISTED IN SCHEDULE B OF THE TITLE COMMITMENT ISSUED ON JUNE 25, 2015, UNDER O.F. NO. 0V1538127.

LEGAL DESCRIPTION: LOT 16, OF BERMUDA BEACH, SECTION 1, A SUBDIVISION IN GALVESTON COUNTY, TEXAS, ACCORDING TO THE MAP OR PLAT THEREOF RECORDED IN VOLUME 252-A, PAGE 89 OF THE MAP RECORDS OF GALVESTON COUNTY, TEXAS.



SURVEYOR'S CERTIFICATE
 IN MY PROFESSIONAL OPINION, THIS PLAT REPRESENTS THE FACTS FOUND ON THE GROUND DURING THE COURSE OF A BOUNDARY SURVEY CONDUCTED UNDER MY SUPERVISION ON JUNE 25, 2015 AND THAT THIS PLAT SUBSTANTIALLY COMPLIES WITH THE CURRENT STANDARDS AS ADOPTED BY THE TEXAS BOARD OF PROFESSIONAL LAND SURVEYING, AND THAT THERE ARE NO ENCUMBRANCES OR PROTRUSIONS EXCEPT AS SHOWN.

Richard Fussell
 RICHARD FUSSELL
 No. 4148

CLIENT: JOSHUA STEVEN BROWN
 ADDRESS: 12916 BERMUDA BEACH
 www.survey1inc.com
 survey1@survey1inc.com

FIELD CREW: AF	TECH: AR
DRAFTER: AR	FINAL CHECK: SB
DATE: 06-26-15	
JOB# 6-37522-15	

Survey 1, Inc.
 Young and Survey Company
 Firm Registration No. 100768-0D
 P.O. Box 2543 | Alvin, TX 77812 | (281)393-1392

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

Date: August 16, 2020

GF No. _____

Name of Affiant(s): JOSHUA S. BROWN,

Address of Affiant: 12916 BERMUDA BEACH DRIVE, GALVESTON, TX, 77554

Description of Property: LOT 16 BERMUDA BEACH SECTION 1

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 June 26, 2015 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:) NONE

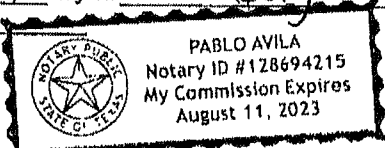
5. We understand that Title Company is relying on the truthfulness of the statements made in this affidavit to provide the area and boundary coverage and upon the evidence of the existing real property survey of the Property. This Affidavit is not made for the benefit of any other parties and this Affidavit 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.

Joshua Brown

SWORN AND SUBSCRIBED this 24 day of Aug, 2020

Notary Public



(TXR-1907) 02-01-2010



FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

OMB 8067-0077
Expires Feb, 2007

ELEVATION CERTIFICATE

This form is to be used for: 1) New/Emergency Program construction in Special Flood Hazard Areas; 2) Pre-FIRM construction after September 30, 1982; 3) Post-FIRM construction; and, 4) Other buildings rated as Post-FIRM rules.

BUILDING OWNER'S NAME William A. Harrison. **ADDRESS** 2409 Ella Lee Lane, Houston, Texas 77019

PROPERTY LOCATION (Lot and block numbers and address if available) 12916 Bermuda Beach Dr, Galveston, Texas 77534
Lot 16, Section 1, Bermuda Beach Subdivision

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.

SECTION I ELIGIBILITY CERTIFICATION (Completed by Local Community Permit Official or a Registered Professional Engineer, Architect, or Surveyor)

COMMUNITY NO.	PANEL NO.	SUFFIX	DATE OF FIRM	FIRM ZONE	DATE OF CONSTR.	BASE FLOOD ELEV. (or AD Zone, use depth)	BUILDING IS
485469	0044	D	Aug. 15, 1983	V-19	Late 1950's	13.0'	<input type="checkbox"/> New/Emergency <input checked="" type="checkbox"/> Pre-FIRM Reg. <input type="checkbox"/> Post-FIRM Reg.

YES **NO** It is intended that the building described above will be constructed in compliance with the community's flood plain ordinance. The certifier may rely on community records. The lowest floor (including basement) will be at an elevation of _____ ft, NGVD. Failure to construct the building at this elevation may place the building in violation of the community's flood plain management ordinance.

YES **NO** The building described above has been constructed in compliance with the community's flood plain management ordinance based on elevation data and visual inspection or other reasonable means. If NO is checked, attach copy of variance issued by the community.

YES **NO** The mobile home located at the address described above has been tied down (anchored) in compliance with the community's flood plain management ordinance, or in compliance with the NFIP Specifications.

MOBILE HOME MAKE	MODEL	YR. OF MANUFACTURE	SERIAL NO.	DIMENSIONS X

(Community Permit Official or Registered Professional Engineer, Architect, or Surveyor)

NAME _____ **ADDRESS** _____
TITLE _____ **CITY** _____ **STATE** _____ **ZIP** _____

SIGNATURE _____ **DATE** _____ **PHONE** _____

SECTION II ELEVATION CERTIFICATION (Certified by a Local Community Permit Official or a Registered Professional Engineer, Architect, or Surveyor)

FIRM ZONE A1-A30: I certify that the building at the property location described above has the lowest floor (including basement) at an elevation of _____ feet, NGVD (mean sea level) and the average grade at the building site is at an elevation of _____ feet, NGVD.

FIRM ZONES V, VI-V80: I certify that the building at the property location described above has the bottom of the lowest floor beam at an elevation of 13.2 feet, NGVD (mean sea level), and the average grade at the building site is at an elevation of 7.0 feet, NGVD.

FIRM ZONES A, AE, AH and EMERGENCY PROGRAM: I certify that the building at the property location described above has the lowest floor elevation of _____ feet, NGVD. The elevation of the highest adjacent grade next to the building is _____ feet, NGVD.

FIRM ZONE AO: I certify that the building at the property location described above has the lowest floor elevation of _____ feet, NGVD. The elevation of the highest adjacent grade next to the building is _____ feet, NGVD.

SECTION III FLOODPROOFING CERTIFICATION (Certification by a Registered Professional Engineer or Architect)

I certify to the best of my knowledge, information, and belief, that the building is designed so that the building is watertight, with walls substantially impervious to the passage of water and structural components having the capability of resisting hydrostatic and hydrodynamic loads and effects of buoyancy that would be caused by the flood depths, pressures, velocities, impact and uplift forces associated with the base flood.

SECTION I ELEVATION CERTIFICATION (Completed by Local Community Permit Official or a Registered Professional Engineer, Architect, or Surveyor)

COMMUNITY NO. 485469	PANEL NO. 0044	SUFFIX D	DATE OF FIRM Aug 15 1988	FIRM ZONE V-19	DATE OF CONSTR. Late 1950's	BASE FLOOD ELEV. (In AO Zone, use depth) 15.0'	BUILDING IS <input type="checkbox"/> New/Emergency <input type="checkbox"/> Pre-FIRM Reg. <input type="checkbox"/> Post-FIRM Reg.
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YES NO It is intended that the building described above will be constructed in compliance with the community's flood plain ordinance. The certifier may rely on community records. The lowest floor (including basement) will be at an elevation of _____ ft. NGVD. Failure to construct the building at this elevation may place the building in violation of the community's flood plain management ordinance.

YES NO The building described above has been constructed in compliance with the community's flood plain management ordinance based on elevation data and visual inspection or other reasonable means.
If NO is checked, attach copy of variance issued by the community.

YES NO The mobile home located at the address described above has been tied down (anchored) in compliance with the community's flood plain management ordinance, or in compliance with the NFIP Specifications.

MOBILE HOME MAKE	MODEL	YR. OF MANUFACTURE	SERIAL NO.	DIMENSIONS K
------------------	-------	--------------------	------------	-----------------

(Community Permit Official or Registered Professional Engineer, Architect, or Surveyor)

NAME _____ ADDRESS _____

TITLE _____ CITY _____ STATE _____ ZIP _____

SIGNATURE _____ DATE _____ PHONE _____

SECTION II ELEVATION CERTIFICATION (Certified by a Local Community Permit Official or a Registered Professional Engineer, Architect, or Surveyor)

FIRM ZONE A1-A30: I certify that the building at the property location described above has the lowest floor (including basement) at an elevation of _____ feet, NGVD (mean sea level) and the average grade at the building site is at an elevation of _____ feet, NGVD.

FIRM ZONES V, VI-300: I certify that the building at the property location described above has the bottom of the lowest floor beam at an elevation of 15.4 feet, NGVD (mean sea level), and the average grade at the building site is at an elevation of 7.8 feet, NGVD.

FIRM ZONES A, A99, A11 and EMERGENCY PROGRAM: I certify that the building at the property location described above has the lowest floor elevation of _____ feet, NGVD. The elevation of the highest adjacent grade next to the building is _____ feet, NGVD.

FIRM ZONE AO: I certify that the building at the property location described above has the lowest floor elevation of _____ feet, NGVD. The elevation of the highest adjacent grade next to the building is _____ feet, NGVD.

SECTION III FLOODPROOFING CERTIFICATION (Certification by a Registered Professional Engineer or Architect)

I certify to the best of my knowledge, information, and belief, that the building is designed so that the building is watertight, with walls substantially impermeable to the passage of water and structural components having the capability of resisting hydrostatic and hydrodynamic loads and effects of buoyancy that would be caused by the flood depths, pressures velocities, impact and uplift forces associated with the base flood.

YES NO In the event of flooding, will this degree of floodproofing be achieved with human intervention?
(Human intervention means that water will enter the building when floods up to the base flood level occur unless measures are taken prior to the flood to prevent entry of water (e.g., bolting metal shields over doors and windows).

YES NO Will the building be occupied as a residence?


If the answer to both questions is YES, the floodproofing cannot be credited for rating purposes and the actual lowest floor must be completed and certified instead. Complete both the elevation and floodproofing certificates.

FIRM ZONES A, A1-A30, VI-V80, AO and A11 Certified Floodproofed Elevation is _____ feet, (NGVD).

THIS CERTIFICATION IS FOR SECTION II BOTH SECTIONS II AND III (Check One)

CERTIFIER'S NAME J. M. Guerrero, P.E. COMPANY NAME _____ LICENSE NO. (for Affix Seal) 27072

TITLE Civil Engineer ADDRESS 7754 Chantilly Circle ZIP Galveston, Texas 77551

SIGNATURE  DATE 12 Feb 1988 CITY Galveston, Texas STATE Texas PHONE (409) 744-1281

The insurance agent should attach the original copy of the completed form to the flood insurance policy application, the second copy should be supplied to the policyholder and the third copy retained by the agent.

INSURANCE AGENTS MAY ORDER THIS FORM

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 John Parker				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 12916 Bermuda Beach Drive (platted Gordon Pean Drive)				Company NAIC Number:	
City Galveston		State TX		ZIP Code 77554	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 16 Bermuda Beach, Section 1					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>					
A5. Latitude/Longitude: Lat. <u>29°12'55.9"</u> Long. <u>-94°54'56.0"</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 <u>6</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>551</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u>					
c) Total net area of flood openings in A8.b <u>0</u> 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 <u>N/A</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>					
c) Total net area of flood openings in A9.b <u>N/A</u> 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 City of Galveston 485469			B2. County Name Galveston		B3. State TX
B4. Map/Panel Number 48167C0508	B5. Suffix G	B6. FIRM Index Date 6/19/70	B7. FIRM Panel Effective/ Revised Date 8/15/19	B8. Flood Zone(s) VE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 17 & 18
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
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					

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2022

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. 12916 Bermuda Beach Drive			Policy Number:
City Galveston	State TX	ZIP Code 77554	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, 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: AW5708 Vertical Datum: NAVD 88

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)	<u>7.3</u>	feet
b) Top of the next higher floor	<u>14.9</u>	feet
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>13.5</u>	feet
d) Attached garage (top of slab)	<u>N/A</u>	feet
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>15.0</u>	feet
f) Lowest adjacent (finished) grade next to building (LAG)	<u>6.9</u>	feet
g) Highest adjacent (finished) grade next to building (HAG)	<u>7.1</u>	feet
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>6.9</u>	feet

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 licensed land surveyor? Yes No Check here if attachments.

Certifier's Name Laurence C. Wall	License Number 4814		
Title RPLS			
Company Name TLTS, Inc.			
Address 1801 Moody Avenue			
City Galveston	State TX		ZIP Code 77550
Signature <i>Laurence C. Wall</i>	Date 8/27/20		Telephone 409.765.8883
			Ext.

Comments (including type of equipment and location, per C2(e), if applicable)

C2. e) = exterior AC compressor

Residence reported as pre-FIRM by Gal CAD. Historic date:
Community #485470 Series A 7/1/74 FIRM Map I-12 Zone A11 EI 13

ELEVATION CERTIFICATE

OMB No. 1660-0008
 Expiration Date: November 30, 2022

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. 12916 Bermuda Beach Drive			Policy Number:
City Galveston	State TX	ZIP Code 77554	Company NAIC Number

**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 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 (elevation C2.b in the diagrams) of the building is _____ feet _____ 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.

Address	City	State	ZIP Code
Signature	Date	Telephone	

Comments

Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008
Expiration Date: November 30, 2022

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. 12916 Bermuda Beach Drive			Policy Number:
City Galveston	State TX	ZIP Code 77554	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

Front and left



Photo Two

Rear & right: C2. e) AC compressor

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008
Expiration Date: November 30, 2022

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. 12916 Bermuda Beach Drive			Policy Number:
City Galveston	State TX	ZIP Code 77554	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 Three

NO PHOTO

Photo Four

NO PHOTO