

LEGEND * ITEMS THAT MAY APPEAR IN *
DRAWING BELOW

M.U.E. = MUNICIPAL UTILITY EASEMENT
 U.E. = UTILITY EASEMENT
 A.E. = AERIAL EASEMENT
 D.E. = DRAINAGE EASEMENT
 S.S.E. = SANITARY SEWER EASEMENT
 S.T.M.S.E. = STORM SEWER EASEMENT
 W.L.E. = WATER LINE EASEMENT

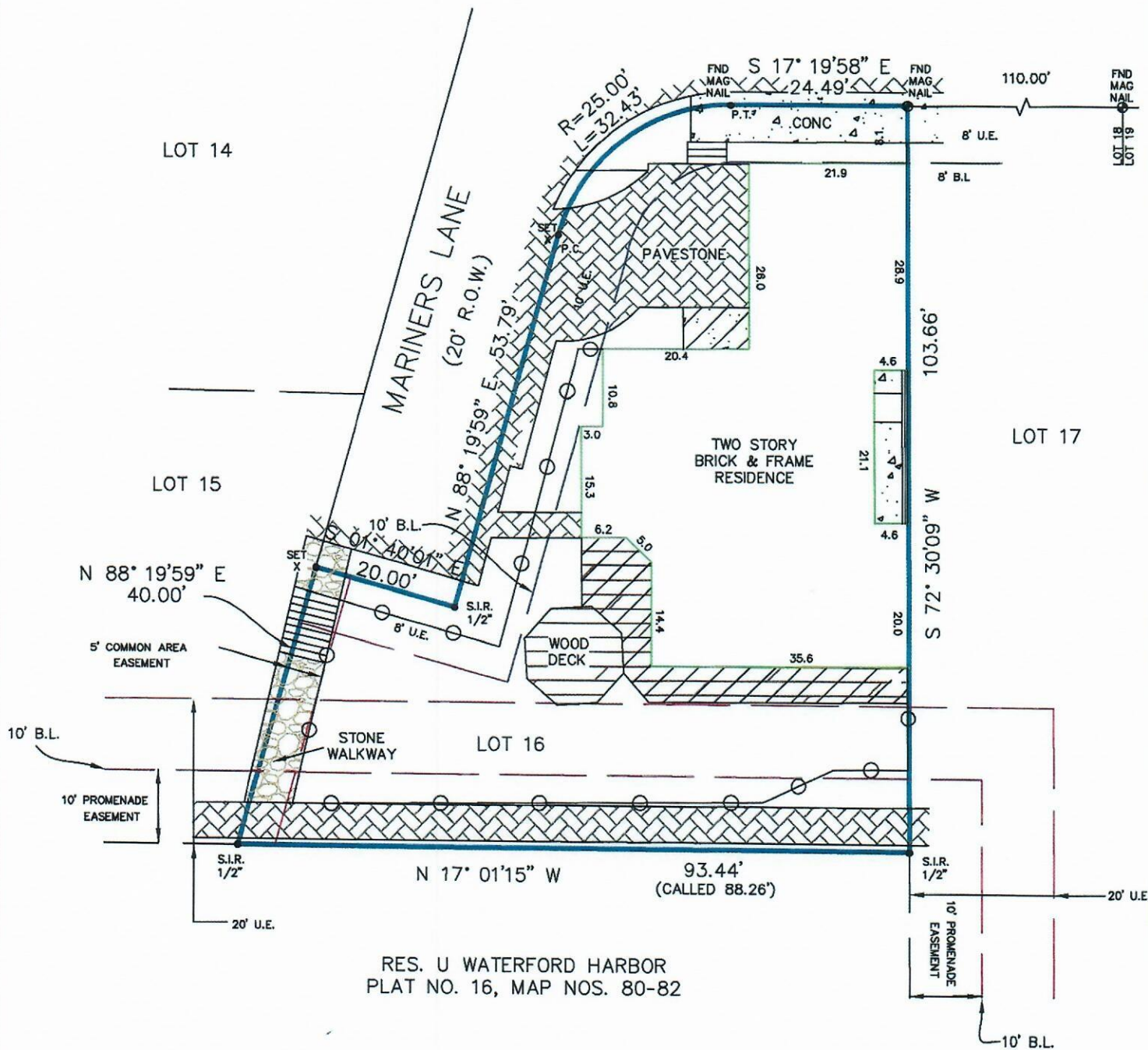
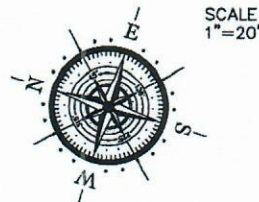
F.I.R. = FOUND IRON ROD
 F.I.P. = FOUND IRON PIPE
 S.I.R. = SET IRON ROD
 W.P. = WOODEN POST
 M.P. = METAL POST
 C.F.# = CLERK'S FILE NUMBER
 P.O.C. = POINT OF COMMENCING
 P.O.B. = POINT OF BEGINNING
 B.L. = BUILDING LINE
 FND. = FOUND
 BRS = BEARS

P.A.E. = PERMANENT ACCESS EASEMENT
 P.U.E. = PUBLIC UTILITY EASEMENT
 W.S.E. = WATER & SEWER EASEMENT
 E.E. = ELECTRIC EASEMENT
 P.C. = POINT OF CURVATURE
 P.T. = POINT OF TANGENCY
 P.R.C. = POINT OF REVERSE CURVATURE
 P.C.C. = POINT OF COMPOUND CURVATURE
 P.P. = POWER POLE
 S.F.M.F. = SEARCHED FOR, NOT FOUND
 U.T.S. = UNABLE TO SET

⊙ CONTROL MONUMENT
 ——— PROPERTY LINE
 - - - EASEMENT LINE
 - - - BUILDING SETBACK LINE
 ——— BUILDING WALL

—//— WOODEN FENCE
 -x- CHAIN LINK FENCE
 ⊙ METAL FENCE
 -|- WIRE FENCE
 -v- VINYL FENCE

16 MARINERS LANE
 (20' R.O.W.)

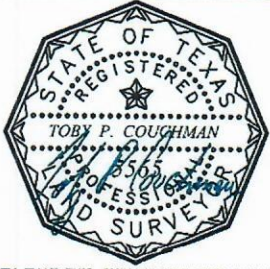


Reviewed & Accepted by: _____ Date _____ / _____ / _____ Date _____

NOTES:
 - BEARING BASIS: PLAT
 - SUBJECT TO ANY AND ALL RECORDED AND UNRECORDED EASEMENTS
 - SURVEYOR HAS NOT INDEPENDENTLY ABSTRACTED PROPERTY
 - UNDERGROUND UTILITY INSTALLATIONS, UNDERGROUND IMPROVEMENTS, FOUNDATIONS AND/OR OTHER UNDERGROUND STRUCTURES WERE NOT LOCATED BY THIS SURVEY
 - THIS SURVEY IS CERTIFIED FOR THIS TRANSACTION ONLY, IT IS NOT TRANSFERABLE TO ADDITIONAL INSTITUTIONS OR SUBSEQUENT OWNERS
 - SUBJECT TO RESTRICTIVE COVENANTS AS PER TITLE COMMITMENT
 - SUBJECT TO ZONING AND BUILDING ORDINANCES ENFORCED BY LOCAL MUNICIPALITIES
 - UNDERGROUND/OVERHEAD ELECTRICAL SERVICE AGREEMENT WITH H.L.&P., C.F. #9106086, O.P.R.R.P.G.C.
 - EASEMENT FOR ENCROACHMENTS CREATED BY CONSTRUCTION SETTLING AND OVERHANG OF IMPROVEMENTS, C.F. #9121032, O.P.R.R.P.G.C.
 - RESTRICTED OPEN SPACE EASEMENT, C.F. #9121033, O.P.R.R.P.G.C.
 - SWALE DRAINAGE EASEMENT AND RIGHT-OF-WAY, C.F. #9121034, O.P.R.R.P.G.C.
 - SURVEY WAS REVISED ON 12-20-16 HOWEVER NO TRIP TO THE FIELD WAS MADE. REVISION WAS TO UPDATE BUYERS NAME

LEGAL DESCRIPTION
 LOT SIXTEEN (16), OF WATERFORD POINT, A SUBDIVISION IN GALVESTON COUNTY, TEXAS, ACCORDING TO THE MAP OR PLAT THEREOF RECORDED IN VOLUME 18, PAGES 267 AND 268, IN THE OFFICE OF THE COUNTY CLERK OF GALVESTON COUNTY, TEXAS.

PURE 16 MARINERS, LLC ADDRESS 16 MARINERS LANE



I DO HEREBY CERTIFY THAT THIS SURVEY WAS THIS DAY MADE ON THE GROUND OF THE PROPERTY LEGALLY DESCRIBED HEREON (OR ON ATTACHED SHEET), AND THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN, AND WAS DONE BY ME OR UNDER MY SUPERVISION, AND CONFORMS TO OR EXCEEDS THE CURRENT STANDARDS AS ADOPTED BY THE TEXAS BOARD OF PROFESSIONAL LAND SURVEYING.

JOB # 1510072
 DATE 10-8-15 REV 12-20-16
 GF# 1516748572

PRO-SURV
 P.O. BOX 1366, FRIENDSWOOD, TX 77549
 PHONE: 281-996-1113 FAX: 281-996-0012
 EMAIL: orders@prosurv.net
 T.B.P.L.S. FIRM #10119300
 ONLY SURVEY MAPS WITH THE SURVEYOR'S ORIGINAL SIGNATURE ARE GENUINE TRUE AND CORRECT COPIES OF THE SURVEYOR'S ORIGINAL WORK AND OPINION
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U.S. DEPARTMENT OF HOMELAND SECURITY
 FEDERAL EMERGENCY MANAGEMENT AGENCY
 National Flood Insurance Program

ELEVATION CERTIFICATE

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 8-15

OMB Control Number: 1660-0008
 Expiration: 11/30/2018

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 PURE 16 MARINERS, LLC				Policy Number:	
1510072					
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 16 MARINERS LANE				Company NAIC Number:	
City LEAGUE CITY		State TEXAS		Zip Code 77565	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) ABST 18 PAGE 9 LOT 16 WATERFORD POINT					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL					
A5. Latitude/Longitude: Lat. 29°32'55.76"N Long. 95°02'33.76"W Horizontal Datum: <input type="radio"/> NAD 1927 <input checked="" type="radio"/> 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>1A</u>					
A8. For a building with a crawlspace or enclosure(s):			A9. For a building with an attached garage:		
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft			a) Square footage of attached garage <u>783</u> sq ft		
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>			b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>		
c) Total net area of flood openings in A8.b <u>N/A</u> sq in			c) Total net area of flood openings in A9.b <u>N/A</u> sq in		
d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No			d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No		

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number CITY OF LEAGUE CITY 485488			B2. County Name GALVESTON		B3. State TEXAS
B4. Map/Panel Number 485488 0011	B5. Suffix D	B6. FIRM Index Date 9-22-99	B7. FIRM Panel Effective/Revised Date 9-22-99	B8. Flood Zone(s) AE/VE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 14
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="radio"/> FIS Profile <input checked="" type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input type="radio"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="radio"/> Yes <input checked="" type="radio"/> No Designation Date: <input type="radio"/> CBRS <input type="radio"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					
C1. Building elevations are based on: <input type="radio"/> Construction Drawings* <input type="radio"/> Building Under Construction* <input checked="" type="radio"/> 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: <u>LC-134</u>			Vertical Datum: <u>NGVD 1929</u>		
Indicate elevation datum used for the elevations in items a) through h) below. <input checked="" type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input type="radio"/> Other/Source: _____					
Datum used for building elevations must be the same as that used for the BFE. Check the measurement used.					
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>18</u>	.	<u>0</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters
b) Top of the next higher floor	<u>N/A</u>	.	<u>N/A</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	.	<u>N/A</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters
d) Attached garage (top of slab)	<u>17</u>	.	<u>4</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>17</u>	.	<u>6</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>16</u>	.	<u>5</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>17</u>	.	<u>1</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>N/A</u>	.	<u>N/A</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters

ELEVATION CERTIFICATE, page 2

OMB Control Number: 1660-0008
Expiration: 11/30/2018

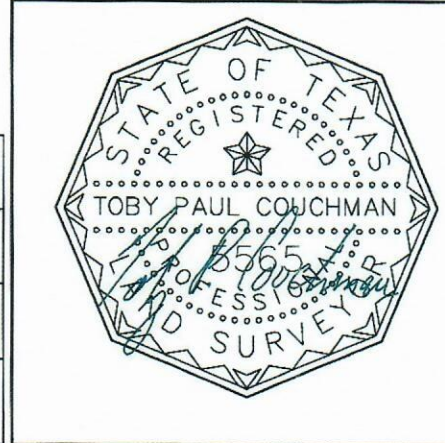
IMPORTANT: In these spaces, copy the corresponding information from Section A.		FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 16 MARINERS LANE		Policy Number:
City LEAGUE CITY	State TX Zip Code 77565	Company NAIC Number:

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 attachments.

Were latitude and longitude in Section A provided by a licensed land surveyor?
 Yes No



Certifier's Name TOBY PAUL COUCHMAN		License Number 5565	
Title R.P.L.S.	Company Name PRO-SURV		
Address P.O. BOX 1366	City FRIENDSWOOD	State TX	Zip Code 77549
Signature <i>Toby P. Couchman</i>	Date 12-20-16	Telephone 281-996-1113	

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

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

MACHINERY IN SECTION C2E IS THE AIR CONDITIONER

Signature *Toby P. Couchman* Date 12-20-16

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 page 8 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 or Owner's Authorized Representative's Name TOBY PAUL COUCHMAN			
Address P.O. BOX 1366	City FRIENDSWOOD	State TEXAS	ZIP Code
Signature	Date 12-20-16	Telephone	

Comments

Check here if attachments.

BUILDING PHOTOGRAPHS

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. 16 MARINERS LANE			Policy Number:	
City LEAGUE CITY	State TEXAS	Zip Code 77565	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

DATE: 12-20-16



REAR VIEW

DATE: 12-20-16