### 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.

1676EC

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 INSUF	RANCE COMPANY USE	
A1.	Building Owner	s Name					Policy Num	ber:
	DOYLE GUY							
A2.	2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.					Route and	Company N	AIC Number:
	735 MAGIC OAKS	S DRIVE						
	City				State		ZIP Code	
A 2	SPRING TEXAS 77388							
A3.	3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  LOT 1, BLOCK 19 ENCHANTED OAKS SECTION TWO ACCORDING TO THE PLAT THEREOF, AS RECORDED IN PLAT BOOK 154, PAGE 98 OF THE PUBLIC RECORDS OF HARRIS COUNTY, TEXAS.							
A4.	Building Use (e	.g., Resident	ial, Non-Residential, A	ddition,	Accessory, etc.)	RESIDENTIAL		
A5.	Latitude/Longitu	ıde: Lat. <u>30.</u>	04063416 L	.ong. <sub>-9:</sub>	5.44374847	Horizontal Datur	n: NAD 1	927 🗓 NAD 1983
A6.	Attach at least 2	2 photograph	s of the building if the	Certific	ate is being used to	obtain flood insur	ance.	
A7.	Building Diagrai	m Number 1	Α					
A8.	For a building w	rith a crawlsp	pace or enclosure(s):					
	a) Square foota	age of crawls	pace or enclosure(s)	N/A	sq ft			
	b) Number of p	ermanent flo	od openings in the crav	wlspace	e or enclosure(s) wi	thin 1.0 foot above	adjacent gra	ade <sub>N/A</sub>
	c) Total net are	a of flood op	enings in A8.b <sub>N/A</sub>	s	q in			
	d) Engineered flood openings?  \[ Yes \[ \infty \] No							
A9.	A9. For a building with an attached garage:							
	a) Square footage of attached garage 286 sq ft							
	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A							
	c) Total net area of flood openings in A9.b N/A sq in							
	d) Engineered flood openings?							
, <b>o</b> i o i with								
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1.	NFIP Communit	y Name & Co	ommunity Number		B2. County Name		B3. State	
HARRIS COUNTY UNINCORPORATED AREAS 480287						HARRIS		TEXAS
	Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Ef	IRM Panel fective/ evised Date	B8. Flood Zone(s	(Zoi	se Flood Elevation(s) ne AO, use Base od Depth)
4820	1C0265M - 265	М	1/6/2017		10/16/2013	X-SHADED, AE	96.3	1
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:     X FIS Profile   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	B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Yes X No							
	Designation Date: CBRS OPA							

## **ELEVATION CERTIFICATE**

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IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  Policy Number:						
735 MAGIC OAKS DRIVE						
City State ZIP Code			Company NAIC Number			
SPRING TEXA	S 7738	8				
SECTION C – BUILDING ELE	VATION INFORMAT	ION (SURVEY RE	:QUIRED)			
C1. Building elevations are based on: Construction	n Drawings* 🔲 Build	ding Under Constru	ction* X Finished Construction			
*A new Elevation Certificate will be required when co	nstruction of the building	ng is complete.				
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), Complete Items C2.a–h below according to the build						
Benchmark Utilized: RM110440; ELEV=96.76';;	Vertical Datum:	NAVD 88, 2001 ADJ.				
Indicate elevation datum used for the elevations in ite	ems a) through h) below	V.				
	ource: NAVD 88, 2001 ADJ.					
Datum used for building elevations must be the same	e as that used for the B	FE.	Check the measurement used.			
a) Top of bottom floor (including basement, crawlspa	ace, or enclosure floor)	99.4				
b) Top of the next higher floor	,	N/A.				
c) Bottom of the lowest horizontal structural member	r (V Zones onlv)	N/A.				
d) Attached garage (top of slab)	, , , , , , , , , , , , , , , , , , , ,	98.7				
e) Lowest elevation of machinery or equipment serv     (Describe type of equipment and location in Comi	icing the building ments)	99. 2	x feet meters			
f) Lowest adjacent (finished) grade next to building	(LAG)	<u>99</u> . <u>1</u>	X feet  meters			
g) Highest adjacent (finished) grade next to building	(HAG)	99.0	X feet  meters			
h) Lowest adjacent grade at lowest elevation of decl structural support	,	N/A.				
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			Check here if attachments.			
Certifier's Name	License Number					
LISA DOBROWSKI	6544		OF THE			
Title Title						
RPLS - SURVEYOR			1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1			
Company Name						
ARTHUR LAND SURVEYING - HOUSTON  Address  Address						
			ESSION OF			
9901 REGAL ROW, SUITE 200 City	State	ZIP Code	SURV			
		77040				
HOUSTON Signature	TEXAS Date	Telephone	6/25/2018			
	6/25/2018	P: (281)937-2731				
Copy all pages of this Elevation Certificate and all attachme	nts for (1) community of		CENTERLINE ROAD ELEVATION: agent/company, and (3) building owner.			
Comments (including type of equipment and location, per C2(e), if applicable)  NOTE: C2.E = AC UNIT PAD. NOTE: THIS ELEVATION CERTIFICATE IS ONLY VALID FOR THE PERSON OR PERSONS NAMED ON THIS  CERTIFICATE. THIS CERTIFICATE IS FOR FLOOD INSURANCE PURPOSES ONLY. THE INFORMATION ON THIS CERTIFICATE SHOULD NOT BE USED FOR CONSTRUCTION OR PLANNING.						

## **ELEVATION CERTIFICATE**

1676EC

IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and	Policy Number:					
735 MAGIC OAKS DRIVE						
City	State	ZIP Code	Company NAIC Number			
	TEXAS	77388				
SECTION E – BUILDING EL FOR ZON	E AO AND ZONE A		REQUIRED)			
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		X feet meter	rs 🗌 above or 🗌 below the HAG.			
<ul> <li>b) Top of bottom floor (including basement, crawlspace, or enclosure) is</li> </ul>		X feet	rs 🗌 above or 🗌 below the LAG.			
E2. For Building Diagrams 6–9 with permanent flood of	ppenings 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		X feet  meter	rs 🔲 above or 🔲 below the HAG.			
E3. Attached garage (top of slab) is	·	X feet meter	rs 🔲 above or 🔲 below the HAG.			
E4. Top of platform of machinery and/or equipment servicing the building is		X feet	rs 🔲 above or 🔲 below the HAG.			
E5. Zone AO only: If no flood depth number is availab floodplain management ordinance? Yes			cordance with the community's certify this information in Section G.			
SECTION F - PROPERTY OW	NER (OR OWNER'S	REPRESENTATIVE) CI	ERTIFICATION			
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					
Address	City	St	ate ZIP Code			
Signature	Date	e Te	lephone			
Comments						
			☐ Check here if attachments.			

## **ELEVATION CERTIFICATE**

1676EC

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE							
Building Street Address (including Apt., Unit, St	Policy Number:							
735 MAGIC OAKS DRIVE								
City	State	ZIP Code		Company NAIC Number				
SPRING	TEXAS	77388						
SECTIO	ON G - COMMUNI	TY INFORMATION (OPTI	ONAL)					
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.								
	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation							
G2. A community official completed Section or Zone AO.	on E for a building	located in Zone A (withou	t a FEMA	A-issued or community-issued BFE)				
G3. The following information (Items G4-	·G10) is provided f	or community floodplain m	anageme	ent purposes.				
G4. Permit Number	G5. Date Permit	t Issued		Date Certificate of Compliance/Occupancy Issued				
G7. This permit has been issued for:	New Constructio	on   Substantial Improver	ment					
G8. Elevation of as-built lowest floor (including of the building:	g basement)		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 (including type of equipment and location, per C2(e), if applicable)								
				☐ Check here if attachments.				

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

See Instructions for Item A6. 1676FC

OMB No. 1660-0008

Expiration Date: November 30, 2018

		101020	•
IMPORTANT: In these spaces, copy t	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt.,	Policy Number:		
735 MAGIC OAKS DRIVE			
City	State	ZIP Code	Company NAIC Number
SPRING	TEXAS	77388	

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 Rear View

Front View Date: 6/25/2018 Rear View Date: 6/25/2018

A picture of the property is unavailable.

A picture of the property is unavailable.

Right Side View Left Side View

Right Side View: Left Side View:

# **BUILDING PHOTOGRAPHS**

### **ELEVATION CERTIFICATE**

Continuation Page

		1676EC	Expiration Bate: November 66; 2616		
IMPORTANT: In these spaces, copy the corresponding	informatio	n 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.	Policy Number:		
735 MAGIC OAKS DRIVE	- /				
City Star	te	ZIP Code	Company NAIC Number		
		77388			
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			Photo Two		
Photo Three			Photo Four		
Pnoto Inree			PIIVIO FOUF		