

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	
A1. Building Owner's Name Calvin Hart job#6-85450-20	FOR INSURANCE COMPANY USE Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 12309 Pine Oak Drive	Company NAIC Number:
City Dickinson	State Texas
	ZIP Code 77539
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 13, Pine Oak Estates	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential	
A5. Latitude/Longitude: Lat. 29° 26' 16.1"N Long. 95° 05' 16.3"W 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 1B	
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s) N/A sq ft	
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A	
c) Total net area of flood openings in A8.b N/A 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 N/A 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? <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 Dickinson 481569	B2. County Name Galveston
	B3. State Texas
B4. Map/Panel Number 48167C 0229	B5. Suffix G
B6. FIRM Index Date 8-15-19	B7. FIRM Panel Effective/ Revised Date 8-15-19
	B8. Flood Zone(s) AE
	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 14.0'
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
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City Dickinson	State Texas	Company NAIC Number
	ZIP Code 77539	

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, ARIA, ARI/AE, ARI/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: **AW 5499** Vertical Datum: **NAVD 1988/2001 ADJ**

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.



Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) **14.09** feet meters
- b) Top of the next higher floor **N/A** feet meters
- c) Bottom of the lowest horizontal structural member (V Zones only) **N/A** feet meters
- d) Attached garage (top of slab) **N/A** feet meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) **14.98** feet meters
- f) Lowest adjacent (finished) grade next to building (LAG) **13.6** feet meters
- g) Highest adjacent (finished) grade next to building (HAG) **13.9** feet meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support **N/A** feet 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.

Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments.

Certifier's Name Richard Fussell	License Number 4148	
Title R.P.L.S		
Company Name Survey 1, Inc., Firm Number #100758-00		
Address 2408 Mustang Road		
City Alvin	State Texas	ZIP Code 77511
Signature 	Date 7-1-2020	Telephone Ext. 281-393-1382

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

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

- 1). Centerline of Street Elevation - 15.05'
- 2). TBM Elevation - 15.05'
- 3). TBM Location - Mag nail in centerline of Pine Oak Drive in front of driveway
- 4). C2e used for A/C

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City Dickinson	State Texas	Company NAIC Number
ZIP Code 77539		
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 _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.		
b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> 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 _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.		
E3. Attached garage (top of slab) is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 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 _____		
Address _____	City _____ State _____	ZIP Code _____
Signature _____	Date 7-1-2020	Telephone _____
Comments _____		

Check here if attachments.

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IMPORTANT: In these spaces, copy the corresponding information from Section A.	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 12309 Pine Oak Drive	
City Dickinson	State Texas
	ZIP Code 77539
	Company NAIC Number

FOR INSURANCE COMPANY USE
Policy Number:

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 C 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) _____ 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
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Community Name	Telephone
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Signature	Date
	7-1-2020

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

Check here if attachments.

BUILDING PHOTOGRAPHS

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See Instructions for Item A6.

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City Dickinson	Company NAIC Number
State Texas	ZIP Code 77539

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

Photo One Caption **Front of Home 7-1-2020**

Clear Photo One



Photo Two

Photo Two Caption **Back of Home 7-1-2020**

Clear Photo Two