

10: CINDY  
From: Tony Silvers

U.S. DEPARTMENT OF HOMELAND SECURITY  
FEDERAL EMERGENCY MANAGEMENT AGENCY  
National Flood Insurance Program

# ELEVATION CERTIFICATE

(IMPORTANT: Follow the instructions on pages 1-9.)

OMB No. 1560-0008  
Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION			FOR INSURANCE COMPANY USE	
A1. Building Owner's Name	AUDISH	1502083	Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or R.O. Route and Box No.	3408 MEADOWVILLE DRIVE		Company NAIC Number:	
City	PEARLAND	State	TEXAS	ZIP Code 77581
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TWIN CREEK WOODS (PEARLAND), BLOCK 4, LOT 22				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL				
A5. Latitude/Longitude: Lat. 29°35'35.53"N		Long. 95°16'27.17"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 1A				
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)	N/A sq ft		a) Square footage of attached garage	552 sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	N/A		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade	0
c) Total net area of flood openings in A8.b	N/A sq in		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			d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number CITY OF PEARLAND 480077		B2. County Name BRAZORIA		B3. State TEXAS	
B4. Map/Panel Number 48039C 0035	B5. Suffix I	B6. FIRM Index Date 9-22-99	B7. FIRM Panel Effective/Revised Date 9-22-99	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone A0, use base flood depth) 44.7
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input checked="" type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source:					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: NAVD 1988, 2001 ADJ.					
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					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)			
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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: CITY OF PEARLAND GPS #7 Vertical Datum: NGVD 1929			
Indicate elevation datum used for the elevations in items a) through h) below. <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: NAVD 1988 (2001 ADJ.) 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)	43.4	Check the measurement used: <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters	
b) Top of the next higher floor	N/A	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters	
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters	
d) Attached garage (top of slab)	42.8	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters	
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	42.3	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters	
f) Lowest adjacent (finished) grade next to building (LAG)	42.2	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters	
g) Highest adjacent (finished) grade next to building (HAG)	43.0	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters	
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	N/A	<input checked="" type="checkbox"/> feet <input type="checkbox"/> 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.

Check here if comments are provided on back of form.  Check here if attachments.

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

Cartiller's Name TOBY P COUCHMAN	License Number 5565
Title RPLS	Company Name PRO-SURV
Address P.O. BOX 1386	City FRIENDSWOOD
State TX	ZIP Code 77049
Signature <i>Toby P. Couchman</i>	Date 02/13/2015
Telephone (281) 996-1113	



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or R.O. Route and Box No. 3405 MEADOWVILLE DRIVE			Policy Number:	
City PEARLAND	State TEXAS	ZIP Code 77581	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

THE ELEVATION IN SECTION C2b REFERS TO AN AIR CONDITIONING UNIT (CONDENSER)

Signature *Toby P. Couchman* Date 02/13/2015

**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 G. 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 N/A / N/A  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is N/A / N/A  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 8-9 with permanent flood openings provided in Section A items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is N/A / N/A  feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is N/A / N/A  feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is N/A / N/A  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 P COUCHMAN

Address P.O. BOX 1985 City FRIENDSWOOD State TX ZIP Code 77541

Signature *Toby P. Couchman* Date 02/13/2015 Telephone (281) 998-1113

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. 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-G9) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
-------------------	------------------------	---

- G7. This permit has been issued for:  New Construction  Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_  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

Check here if attachments.

**ELEVATION CERTIFICATE, page 3**

**BUILDING PHOTOGRAPHS**  
See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or RD. Route and Box No. 3405 MEADOWVILLE DRIVE			Policy Number:
City PEARLAND	State TEXAS	77581	



DATE: 02/13/2015

FRONT VIEW



DATE: 02/13/2015

REAR VIEW