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

As Building Owner's Name Seth MerVin A2. Building Street Address (including Apt., Unit, Suite, and/or Bidg, No.) or P.O. Route and Box No. 1020 Pony Lane City Simonton A2. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 14 Block 21 Brazzes Valley Section 2 A6. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Lot 14 Block 21 Brazzes Valley Section 2 A6. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A7. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A8. Lathtide Longitude. Lat 2pt412130* Long sprays 3.47** Horizontal Datum: "NAD 1927" (*NAD 1983) A8. For a building with a crawfapeae or enclosure(s): A9. For a building with a drawfapeae or enclosure(s): B) Square Rodge of crawfapeae or enclosure(s): B) Number of permanent flood openings in the crawfapeae or enclosure(s): B) Number of permanent flood openings in the crawfapeae or enclosure(s): B) Number of permanent flood openings in the crawfapeae or enclosure(s): B) Number of permanent flood openings in the crawfapeae or enclosure(s): B) Number of permanent flood openings in the crawfapeae or enclosure(s): B) Number of permanent flood openings in the crawfapeae or enclosure(s): B) Number of permanent flood openings in the crawfapeae or enclosure(s): B) Number of permanent flood openings in the crawfapeae or enclosure(s): B) Number of permanent flood openings in the crawfapeae or enclosure(s): B) Number of permanent flood openings in the crawfapeae or enclosure(s): B) Number of permanent flood openings in the crawfapeae or enclosure(s): B) Number of permanent flood openings in the crawfapeae or enclosure(s): B) Number of permanent flood openings in the crawfapeae or enclosure(s): B) Number of permanent flood openings in the crawfapeae or enclosure(s): B) Number of permanent flood openings in the crawfapeae or enclosure(s): B) Number of permanent flood openings in the crawfapeae or enclosure(s): B) Number	Copy all pages of this Ele			for (1)	community offi			ce agent/compa	any, and (3) bu		er.
Seth Markin 22 Suliding Street Address (Including Apt., Unit, Suite, and/or Bidg, No.) or P.O. Route and Row Number:	SECTION A - PROPERTY INFORMATION A1 Ruilding Owner's Name					FOR INS	FOR INSURANCE COMPANY USE				
Box No.	Delieu Neu					Policy Number	•				
AS. Property Description (Lot and Block Numbers. Tax Parcel Number, Legal Description, etc.) Lot 14 Block 21 Brazos Valley Section 2 AB. Building Use (c.g., Residential Non-Residential) AS. Latitude/Longitude: Let 29*41*21.30" N. Long. 95*99*8,34" W. Horizontal Datum: NAD 1927 NAD 1983 AS. Attach at lesset 2 photographs of the building if the Certificate is being used to obtain flood insurance. AF. Building Diagram Number 5 AS. For a building Diagram Number 5 AS. For a building With a crawlespace or enclosure(s): a) Square footage of crawlespace or enclosure(s): b) Number of permanent flood openings in the crawlespace or enclosure(s) which in 10 foot above adjacent grade c) Total net area of flood openings in AS. D. g. sq in) Total net area of flood openings? Yes No SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION BI. NETP Community Name & Community Number City of Simonton 481594 B4. Mapi/Panel Number B5. Suffix B6. FIRM index Date PT. FIRM Panel Effective/ B8. Flood Zone(s) B8. Base Flood Elevation (SEF) data or base flood depth entered in Item B9: CFIS Profile © FIRM C community Determined C Other/Source: B11. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: CFIS Profile © FIRM C community Determined C Other/Source: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date: C CBRS C OPA SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevation serve based on: C Carriy Source: C2. Elevations: Zones A1-A30. AE, IA, A (with BFE), Very I-Vs/30, V (with BFE), AR, AR/A, AR/AE, Center Size of Firet C meters Datum used for building beavarions are saviding the building dagram specified in Item A7, in Puerro Rico only, enter meters. Datab	Box No.										
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Revised Date 48157C 0080 L 4/2/2014 4/2/2014 AE 114.0' B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: FIS Profile FIRM Community Determined Other/Source: B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date: CBRS OPA 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/A0. Complete Items C2.a-h bellow according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: NGS AW5487 Vertical Datum: 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) 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) Datum used for building elevations must be the same as that used for the BFE. Check the measurement used. b) Top of the next higher floor NIA .			DO SIDMA D						··········		
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B11. Indicate elevation datum used for BFE in Item B9:	B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:										
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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 ltems C2.a-h below according to the building diagram specified in Item A7. In Puerto Ricc only, enter meters. Benchmark Utilized: NGS AW5487		SECT	TON C - BUILDING ELE	EVATI	ON INFORMA	TION (SU	JRVE	r REQUIRED)			, , , , , , , , , , , , , , , , , , ,
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g) Highest adjacent (finished) grade next to building (HAG) 111 . 30 feet C meters 11 . 30	e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)			9			73	***************************************			
g) Highest adjacent (finished) grade next to building (HAG) 111 . 30 feet © meters 1 Lowest adjacent grade at lowest elevation of deck or stairs, including	f) Lowest adjacent (finished) grade next to building (LAG)				_	109		71	(feet	€ mete	rs
n) Lowest adjacent grade at lowest elevation of deck or stairs, including	g) Highest adjacent (finished) grade next to building (HAG)										
		at lowest el	evation of deck or stairs	s, inclu	ding						
						-					

ELEVATION CERTIFICATE, page 2

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

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, So							
1020 Pony Lane			Policy Number:				
City Simonton	State TX	Zip Code 77485	Company NAIC Number:				
		R, OR ARCHITECT CERTIF					
This certification is to be signed and sealed by a that the information on this Certificate represents punishable by fine or imprisonment under 18 U.S.	s my best efforts to inte						
Check here if attachments.	APTE OF APP						
Certifier's Name FRED F. LAWTON							
Title LAND SURVEYOR	Company Name SOUTH TEXAS SURV	ZEYING ASSOC., INC.	5530 FESSION R.				
Address 11281 RICHMOND AVE J-101	City HOUSTON	State Zip Code 77082	SURVE				
Signature	Date 16/7/2016	Telephone 281-556-6918					
Copy all pages of this Elevation Certificate for (1) community official, (2)) insurance agent/company, a	and (3) building owner.				
Comments (including type of equipment and loc	ation, per C2(e), if appl	icable)					
C2e is for A/C							
Signature Date 16 7 / 2016							
SECTION E BUILDING ELEVATION INFO							
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							
b) Top of bottom floor (including basement, crawlspace, or enclosure) is feet			ers				
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 ne higher floor (elevation C2.b in the diagrams) of the building is							
E3. Attached garage (top of slab) is feet							
E4. Top of platform of machinery and /or equipm servicing the building is	ers 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 - PROPER	RTY OWNER (OR OWN	NER'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 Represe	entative's Name						
Address	City	State	ZIP Code				
Signature	Date	Telephone					
Comments							
			Check here if attachments.				

ELEVATION CERTIFICATE, page 3

OMB Control Number: 1660-0008 Expiration: 11/30/2018 FOR INSURANCE COMPANY USE

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Su						
1020 Pony Lane	Policy Number:					
City Simonton	State TX	Zip Code 77485		Company NAIC 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-G1	0) is provided for con	nmunity floodplain	managemer	nt purposes.		
G4. Permit Number	G5. Date Permit Iss	ued G6. [ate Certifica	ate of Compliance/Occupancy Issued		
G7. This permit has been issued for: New Co	onstruction (Subst	antial Improvemer	nt			
G8. Elevation of as-built lowest floor (including both of the building:	asement)		et © meters	s Datum		
G9. BFE or (in Zone AO) depth of flooding at the building site:	·	(fee	et (C meters	s Datum		
G10. Community's design flood elevation:		© fee	et @meters	s Datum		
Local Official's Name		Title				
Community Name		Telephone		MATERIA (1984)		
Signature		Date	***************************************			
Oignature	W. W. W.	Date				
				Check here if attachments.		