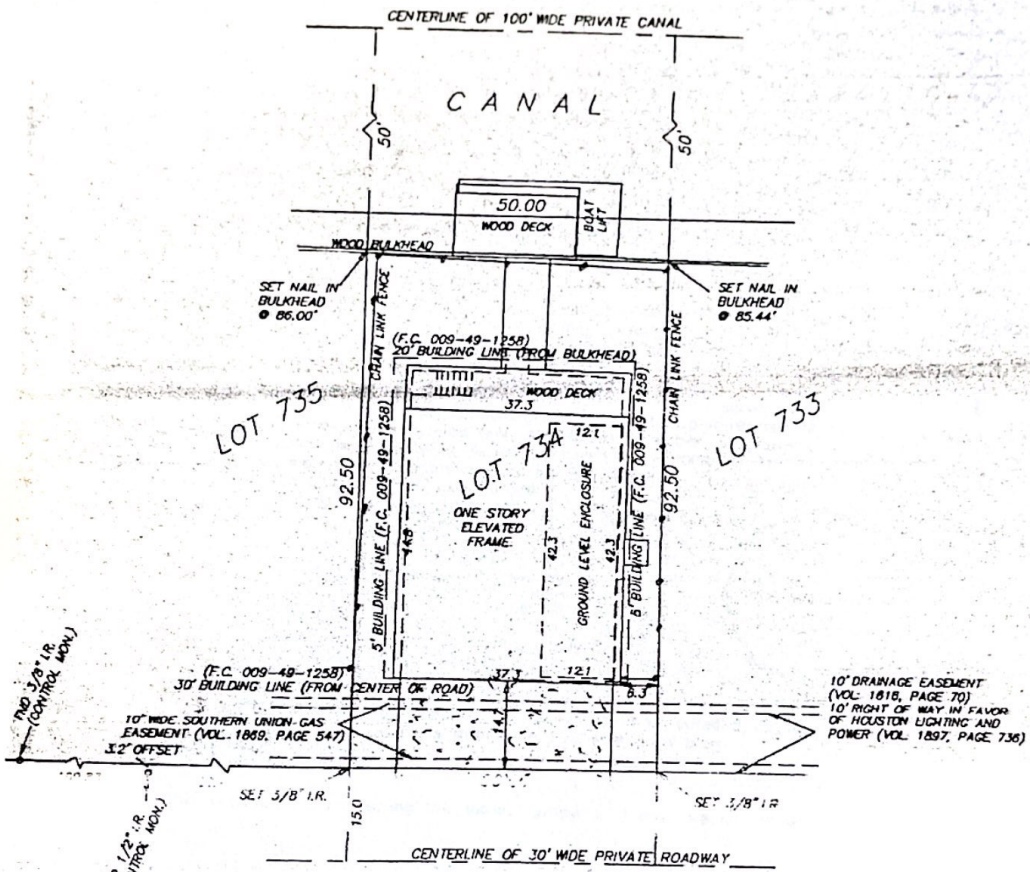


Exhibit A

LEGAL DESCRIPTION

The following described property:

Lot 734, of NEW BAYOU VISTA ADDITION NO. FIVE (5), a Subdivision in Galveston County, Texas, according to the Map or Plat thereof recorded in Volume 1616, Page 70 and transferred to Plat Record 2, Map No. 53 of the Plat Records in the County Clerk's Office of Galveston County, Texas.



734 MARLIN DR.



A SURVEY OF LOT SEVEN HUNDRED THIRTY-FOUR (734) OF NEW BAYOU VISTA
ADDITION NO. FIVE (5), A SUBDIVISION IN GALVESTON COUNTY, TEXAS.

According to the map or plat thereof recorded in Volume 1616, Page 70, in the
Office of the County Clerk of Galveston County, Texas.

Scale: 1" = 20'

I, Christopher Trusky, Registered Professional Land Surveyor
in the State of Texas, hereby certify that this plat represents
a survey made on the ground under my direction and super-
vision on ~~May 20, 2014~~. ~~At the time of this survey there~~
~~were no encroachments, conflicts or protrusions apparent on~~
~~the ground, EXCEPT AS SHOWN.~~

THIS SURVEY IS CERTIFIED FOR THIS TRANSACTION ONLY

Christopher Trusky
RPLS No. 5247
The Land Survey Co.
409-938-1041



Note:

According to FIRM Community Panel No. 485470 0210 C, dated 5/02/83, this property
lies in Flood Zone A14, which is within the 100 year flood plain.

Back of this plat is the plat of the survey, as provided and monumented.

Other encumbrances affecting the subject property, if any, are not shown.

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008 Expiration Date: July 31, 2015
FOR INSURANCE COMPANY USE
Policy Number
Company NAIC Number

SECTION A - PROPERTY INFORMATION	
A1 Building Owner's Name: IRENDA KNIGHT	
A2 Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No: 734 MARLIN	
City: RAYOU VISTA	State TX ZIP Code 77563
A3 Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 734, NEW BAYOU VISTA ADDITION NO 5	
A4 Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL	
A5 Latitude/Longitude: Lat 29 19 35.6 N Long 94 56 11.0 W	
A6 Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983	
A7 Building Diagram Number 6	
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s) 507 sq ft	A9. For a building with an attached garage:
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 4	a) Square footage of attached garage N/A sq ft
c) Total net area of flood openings in A8 b 520 sq in	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____ sq in
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	c) Total net area of flood openings in A9 b _____ sq in
	d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number GALVESTON COUNTY, 485470		B2. County Name GALVESTON	B3. State TX
B4. Map/Panel Number 4854700205	B5. Suffix C	B6. FIRM Index Date 12/06/02	B7. FIRM Panel Effective/Revised Date 5/02/83
		B8. Flood Zone(s) A14	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 12
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 checked="" type="checkbox"/> NGVD 1929 <input 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)? Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

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, ARA, ARAE, AR/A1-A30, ARAH, 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: USCGS BM V1219 Vertical Datum: NGVD29

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.

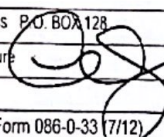
		Check the measurement used.
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>6.6</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>16.3</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>N/A</u>	<input 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)	<u>16.3</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>5.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>6.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>6.4</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters

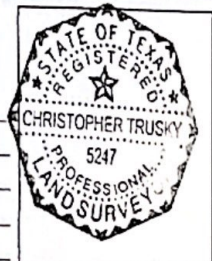
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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

Check here if attachments.

Certifier's Name: CHRISTOPHER TRUSKY	License Number: 5247
Title: RPLS	Company Name: LAND SURVEY CO LLC
Address: P.O. BOX 128	City: KEMAH State: TX ZIP Code: 77565
Signature: 	Date: 5/20/14 Telephone: 281-338-4008



IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Elevation Address (Including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
734 MAJILIN

City BAYDU VISTA

State TX

ZIP Code 77563

FOR INSURANCE COMPANY USE

Policy Number

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: C2e) represents height of air conditioner platform.

Signature  CHRISTOPHER TRUSKY

Date 5/20/14

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
_____ feet meters above or below the LAG
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below the HAG
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 6–9 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's or Owner's Authorized Representative's Name

Address

City

State

ZIP Code

Signature

Date

Telephone

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–G10) 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.