



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

MAILING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.  
527 Sunset Circle

STATE  
Tx

ZIP CODE  
7554

F-1 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

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO and ZONE A (WITHOUT BFE)**  Check here if attachments information for a LOMA or LOMR-F, complete items E1 through E3. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number \_\_\_\_\_ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is \_\_\_\_\_ ft.(m) \_\_\_\_\_ in.(cm) \_\_\_\_\_ above or \_\_\_\_\_ below (check one) the highest adjacent grade.

E3. For 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.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

SIGNATURE \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

DATE \_\_\_\_\_ TELEPHONE \_\_\_\_\_

COMMENTS \_\_\_\_\_

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**  Check here if attachments

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.

G1.  The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local 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.

DATE PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
This permit has been issued for: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement		
Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m) Datum: _____		
BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____		
LOCAL OFFICIAL'S NAME	TITLE	
COMMUNITY NAME	TELEPHONE	
SIGNATURE	DATE	
COMMENTS _____		

FEMA Form 81-31, AUG 89  Check here if attachments

REPLACES ALL PREVIOUS EDITIONS



**Allstate**  
You're in good hands.

06/05/2002 10:30 4073301196  
AUG-05-02 10:01 AM DERRICK\_ENGINEERING

CALL CITY REALTOR  
409 526 7221

PHONE 02  
P. 01

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM  
**ELEVATION CERTIFICATE**

OID No. 8067-007  
Expires July 31, 2002

Important: Read the instructions on pages 1 - 7.  
SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNERS NAME \_\_\_\_\_

BUILDING STREET ADDRESS (including Apt., Unit, Suite, trailer tag, etc.) ON P.O., ROUTE AND BOX NO. \_\_\_\_\_

CITY STATE ZIP \_\_\_\_\_

PROPERTY IDENTIFICATION (see instructions, the parcel number, lot and block numbers, etc.) \_\_\_\_\_

APPLICABLE FLOOD ZONE (see instructions, the Flood Hazard Insurance Manual, etc.) \_\_\_\_\_

COMMUNITY IDENTIFICATION (see instructions, the Flood Hazard Insurance Manual, etc.) \_\_\_\_\_

DATE OF CONSTRUCTION (OPTIONAL) (see instructions) \_\_\_\_\_

HORIZONTAL DATUM \_\_\_\_\_

SOURCE:  DFS Type:  USGS Quad Map  Other: \_\_\_\_\_

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

FIRM NUMBER: 44152L

COMMUNITY NAME: \_\_\_\_\_

DATE: 11/1/95

EFFECTIVE/REVISED DATE: 11/1/95

FLOOD ZONE: U-2-B

STATE: CALIF.

ZIP CODE: 92564

COMMUNITY IDENTIFICATION: \_\_\_\_\_

DATE OF CONSTRUCTION: 11/1/95

OTHER (Describe): \_\_\_\_\_

Is this building located in a Coastal Barrier Resources System (CBRS) area or otherwise Protected Area (OPA)?  YES  NO

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

Building elevations are based on:  Construction Drawings  Building Under Construction  Features Completion

A new Elevation Certificate will be required when construction of the building is complete.

Building Diagram Number: 10 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 2 and 7. If a diagram accurately represents the building, provide a sketch or photograph.)

Elevation - Zones A1, A0, AE, AH, A (with BFE), VE, V1-V00, V (with BFE), AR, AR/A, AR/AE, AR/A1, A0, AR/AH, AR/A0

Complete items C-1 through C-4 below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Elevations measurements and datum conversions should be indicated in a separate section of the Certificate or in the comments.

Conversion/Comments: \_\_\_\_\_

Does this elevation reference mark need appear on the print?  Yes  No

1) Top of finished floor (including basement or enclosure)

2) Top of next higher floor

3) Bottom of lowest horizontal structural member (V zones only)

4) Lowest elevation of machinery and/or equipment servicing the building

5) Lowest adjacent grade (LAC)

6) Highest adjacent grade (HAC)

7) Top of permanent openings (food waste) within 1 ft. above adjacent grade (M zone only)

8) Top of area of 1/4" permanent openings (flood waste) in C-10

9) Top of area of 1/4" permanent openings (flood waste) in C-10

10) Top of area of 1/4" permanent openings (flood waste) in C-10

11) Top of area of 1/4" permanent openings (flood waste) in C-10

12) Top of area of 1/4" permanent openings (flood waste) in C-10

13) Top of area of 1/4" permanent openings (flood waste) in C-10

14) Top of area of 1/4" permanent openings (flood waste) in C-10

15) Top of area of 1/4" permanent openings (flood waste) in C-10

16) Top of area of 1/4" permanent openings (flood waste) in C-10

17) Top of area of 1/4" permanent openings (flood waste) in C-10

18) Top of area of 1/4" permanent openings (flood waste) in C-10

19) Top of area of 1/4" permanent openings (flood waste) in C-10

20) Top of area of 1/4" permanent openings (flood waste) in C-10

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certificate is to be signed and sworn by a land surveyor, architect, or architect authorized by law to certify elevation information. I certify that the information in Sections A, B, and C on this certificate represents my best efforts to ascertain the data available.

DATE: 06/05/02

NAME: ROBERT L. DERRICK, R.P.S.

ADDRESS: 1500 S. WILSON DRIVE, SUITE 102, SAN ANTONIO, TEXAS 78202

CITY: SAN ANTONIO, STATE: TEXAS, ZIP CODE: 78202

SEE REVERSE SIDE FOR CONTINUATION

REPLACES ALL PREVIOUS EDITIONS

Att Received by Regvest from E12 6-24-13

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM  
**ELEVATION CERTIFICATE**

O.M.D. No. 3067-0077  
Expires July 31, 2002

Important: Read the instructions on pages 1 - 7.

**SECTION A - PROPERTY OWNER INFORMATION**

BUILDING OWNER'S NAME: SUNSET CIRCLE

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.: 527 SUNSET CIRCLE

CITY: Village of Tiki Island STATE: TX.

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): LOT 31 TIKI ISLAND - SECTION 10

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.): RESIDENTIAL

LATITUDE/LONGITUDE (OPTIONAL) (#.# - ##.## or ##.###): \_\_\_\_\_

HORIZONTAL DATUM:  NAD 1927  NAD 1983 SOURCE:  GPS (Type)  USGS Quad Map  Other.

For Insurance Company Use:  
Policy Number: \_\_\_\_\_  
Company NAIC Number: \_\_\_\_\_

ZIP CODE: 77554

**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER: TIKI ISLAND- 481585 B2. COUNTY NAME: \_\_\_\_\_ B3. STATE: \_\_\_\_\_

B4. MAP AND PANEL NUMBER: <u>481585001</u>	B5. SUFFIX: <u>D</u>	B6. FIRM INDEX DATE: <u>11/1/85</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE: <u>11/1/85</u>	B8. FLOOD ZONE(S): <u>V-20</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding): <u>15'</u>
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F1C. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9:  
 FIS Profile  FIRM  Community Determined  Other (Describe): \_\_\_\_\_

F11. Indicate the elevation datum used for the BFE in B9:  NGVD 1929  NAVD 1988  Other (Describe): \_\_\_\_\_

F12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Yes  No  
Designation Date: \_\_\_\_\_

**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. Building Diagram Number 6. (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. 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 C3a-i below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.  
Datum USGS Conversion/Comments \_\_\_\_\_

Elevation reference mark used \_\_\_\_\_ Does the elevation reference mark used appear on the FIRM?  Yes  No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>6.9</u> ft. (m)
<input type="checkbox"/> b) Top of next higher floor	<u>18.6</u> ft. (m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>16.8</u> ft. (m)
<input type="checkbox"/> d) Attached garage (top of slab)	_____ ft. (m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	_____ ft. (m)
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>18.6</u> ft. (m)
<input type="checkbox"/> g) Highest adjacent grade (HAG)	<u>4.9</u> ft. (m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>4</u>
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	<u>4.9</u> sq. in. (sq. cm)



**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 in Sections A, B, and C 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.

CERTIFIER'S NAME: ROBERT L. DERRICK, R.P.S. LICENSE NUMBER: 2753

TITLE: OWNER

COMPANY NAME: DERRICK ENGINEERING

ADDRESS: 13016 ELIZABETH DRIVE

CITY: SANTA FE STATE: TEXAS ZIP CODE: 77510

COUNTY: SANTA FE TELEPHONE: 409-925-7221

SEE REVERSE SIDE FOR CONTINUATION REPLACES ALL PREVIOUS EDITIONS

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.  
527 Sunset Circle

F-27 Insurance Company Use  
Policy Number

Village of Tikis Island

STATE  
HI

ZIP CODE  
73554

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

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO and ZONE A (WITHOUT BFE)**  Check here if attachments information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number \_\_\_\_\_ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)  
E2. The top of the bottom floor (including basement or enclosure) of the building is \_\_\_\_\_ ft. (m) \_\_\_\_\_ in. (cm) \_\_\_\_\_ above or \_\_\_\_\_ below (check one) the highest adjacent grade.

E3. For 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.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS

SIGNATURE

CITY

STATE

ZIP CODE

COMMENTS

DATE

TELEPHONE

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**  Check here if attachments

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.

G1.  The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local 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 is: \_\_\_\_\_ ft. (m) Datum: \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site is: \_\_\_\_\_ ft. (m) Datum: \_\_\_\_\_

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY NAME

TELEPHONE

SIGNATURE

DATE

COMMENTS

FEMA Form 81-31, AUG 99

Check here if attachments

REPLACES ALL PREVIOUS EDITIONS