

UNIVERSAL

GALICHET BROTHERS INSURANCE
 PO BOX 130827
 HOUSTON, TX 77219

Agency Phone: (713) 518-1416

NFIP Policy Number: 0000031291
 Company Policy Number: UICF480031291-07
 Agent: PAUL GALICHET

Policy Term: 10/16/2020 12:01 AM through 10/16/2021 12:01 AM
 Renewal Billing Payor: FIRST MORTGAGEE

To report a claim visit or call us at: <https://uictx.managemyfloodpolicy.com>
 (888) 598-0457

RENEWAL FLOOD INSURANCE POLICY DECLARATIONS

STANDARD POLICY - DWELLING FORM

DELIVERY ADDRESS

GORDON NOVOTNY / LISA NOVOTNY
 553 MELTON ST
 MAGNOLIA, TX 77354-1760

INSURED NAME(S) AND MAILING ADDRESS

GORDON NOVOTNY / LISA NOVOTNY
 553 MELTON ST
 MAGNOLIA, TX 77354-1760

COMPANY MAILING ADDRESS

UNIVERSAL NORTH AMERICA INSURANCE COMPANY
 PO BOX 912017
 DENVER, CO 80291-2017

PROPERTY LOCATION

553 MELTON ST
 MAGNOLIA, TX 77354-1760

Refer to www.fema.gov/cost-of-flood for more information about flood risk and policy rating.

DESCRIPTION: N/A

RATING INFORMATION

ORIGINAL NEW BUSINESS DATE: 10/01/2014
 REINSTATEMENT DATE: N/A
 BUILDING OCCUPANCY: SINGLE FAMILY
 CONDOMINIUM INDICATOR: NOT A CONDO
 NUMBER OF UNITS: N/A
 PRIMARY RESIDENCE: YES
 ADDITIONS/EXTENSIONS: N - NO ADDITIONS/EXTENSIONS
 BUILDING TYPE: ONE FLOOR
 BASEMENT/ENCLOSURE/CRAWLSPACE TYPE: NO BASEMENT

DATE OF CONSTRUCTION: 01/01/1975
 COMMUNITY NUMBER: 480483 0480 G REGULAR PROGRAM
 COMMUNITY NAME: MONTGOMERY COUNTY
 CURRENT FLOOD ZONE: AE
 GRANDFATHERED: NO
 FLOOD RISK/RATED ZONE: AE
 ELEVATION DIFFERENCE: 1
 ELEVATED BUILDING TYPE: NON-ELEVATED

MORTGAGEE / ADDITIONAL INTEREST INFORMATION

FIRST MORTGAGEE: SELECT PORTFOLIO SERVICING INC ISAOA ATIMA
 PO BOX 7277 SPRINGFIELD, OH 45501

LOAN NO: 0015777113

SECOND MORTGAGEE: NATIONSTAR MORTGAGE LLC ISAOA
 PO BOX 7729 SPRINGFIELD, OH 45501-7729

LOAN NO: 0617828975

ADDITIONAL INTEREST:

LOAN NO: N/A

DISASTER AGENCY:

CASE NO: N/A
 DISASTER AGENCY:

PREMIUM CALCULATION — Pre-FIRM Elevation Rated

	<u>COVERAGE</u>	<u>DEDUCTIBLE</u>	<u>BASIC COVERAGE</u>	<u>BASIC RATE</u>	<u>ADD'L COVERAGE</u>	<u>ADD'L RATE</u>	<u>DED. DISCOUNT/SURCHARGE</u>	<u>PREMIUM</u>
BUILDING	\$250,000	\$2,000	\$60,000	0.940	\$190,000	0.170	(\$58.00)	\$829.00
CONTENTS	\$0	\$0	\$0	0.530	\$0	0.120	\$0.00	\$0.00

Prefirm Elevation Rated

Coverage limitations may apply. See your policy form for details.

ANNUAL SUBTOTAL:	\$829.00
INCREASED COST OF COMPLIANCE:	\$6.00
COMMUNITY RATING DISCOUNT:	0% \$0.00
RESERVE FUND ASSESSMENT:	18.0% \$150.00
PROBATION SURCHARGE:	\$0.00
ANNUAL PREMIUM:	\$985.00
HFIAA SURCHARGE:	\$25.00
FEDERAL POLICY SERVICE FEE:	\$50.00
TOTAL:	\$1,060.00

IN WITNESS WHEREOF, I have signed this policy below and hereby enter into this Insurance Agreement


 Miguel Barrales / President

Zero Balance Due - This Is Not A Bill

This declarations page along with the Standard Flood Insurance Policy Form constitutes your flood insurance policy.

Policy issued by UNIVERSAL NORTH AMERICA INSURANCE COMPANY

Company NAIC: 10759



File: 17000429

Page 1 of 2



DocID: 136497283

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

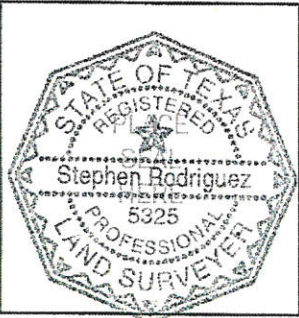
OMB No. 1660-0008
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <u>LISA NOVOTNY</u>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. <u>553 NELSON STREET</u>		Company NAIC Number:
City <u>MAGNOLIA</u>	State <u>TEXAS</u>	ZIP Code <u>77354</u>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>TRACT 3-A SONES BENSON A0540 ID# 00247065</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>		
A5. Latitude/Longitude: Lat. _____ Long. _____		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 <u>1</u>		
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) <u>NA</u> sq ft		a) Square footage of attached garage <u>450</u> sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>NA</u>		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>NA</u>
c) Total net area of flood openings in A8.b <u>NA</u> sq in		c) Total net area of flood openings in A9.b <u>NA</u> sq in
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		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 <u>480483</u>			B2. County Name <u>MONTGOMERY</u>			B3. State <u>TEXAS</u>		
B4. Map/Panel Number <u>4853904804</u>	B5. Suffix <u>G</u>	B6. FIRM Index Date <u>8-18-14</u>	B7. FIRM Panel Effective/ Revised Date <u>8-18-14</u>	B8. Flood Zone(s) <u>'AE'</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>259.5</u>			
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								

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: <u>EN # 105105</u> Vertical Datum: <u>1988, 2001 AD</u> Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> 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>260.3</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>NA</u> <input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>NA</u> <input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>260.3</u> <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)	<u>NA</u> <input type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>259.7</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>259.8</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>259.7</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.					
<input type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<input type="checkbox"/> Check here if attachments.					
Certifier's Name <u>STEPHEN RODRIGUEZ</u>	License Number <u>5325</u>				
Title <u>SURVEYOR</u>	Company Name <u>COPPERFIELD</u>				
Address <u>12436 Fm 1960 #120</u>	City <u>HOUSTON</u>	State	ZIP Code		
Signature <u>[Signature]</u>	Date <u>10-21-15</u>	Telephone <u>8322177903</u>			



ELEVATION CERTIFICATE, page 2

IMPORTANT: In these spaces, copy the corresponding information from Section A.		FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 553 MELTON STREET		Policy Number:
City MAGNOLIA	State TEXAS	ZIP Code 77354
		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

Signature

Date

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.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ . _____ feet meters above or below the LAG.
- E2. For Building Diagrams 6–9 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 _____ . _____ 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 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
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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.