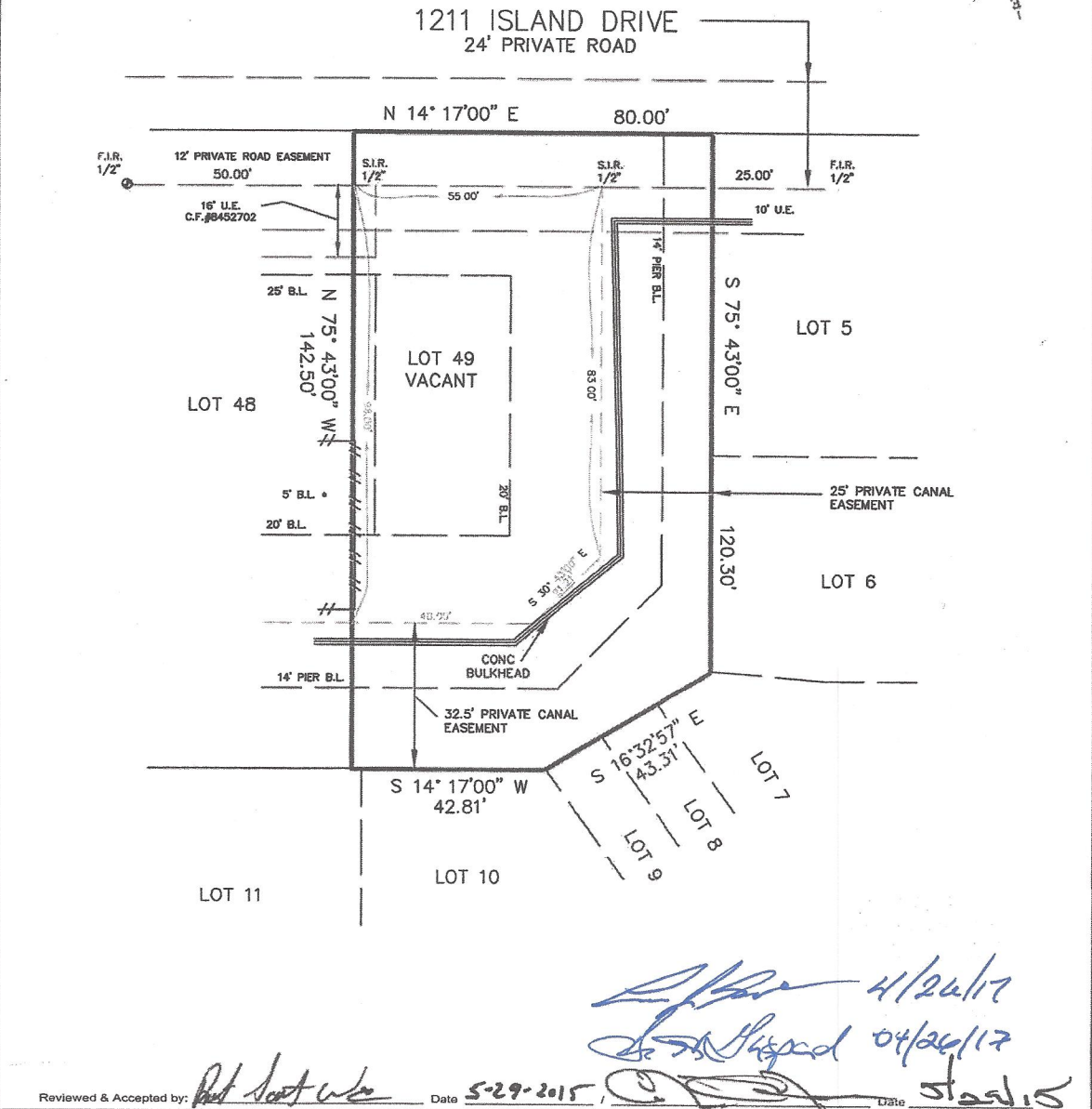
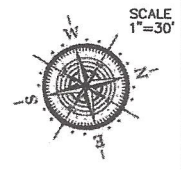


- LEGEND** - ITEMS THAT MAY APPEAR IN DRAWING BELOW
- M.U.E. = MUNICIPAL UTILITY EASEMENT
 - F.I.R. = FOUND IRON ROD
 - P.A.E. = PERMANENT ACCESS EASEMENT
 - #-#-# = WOODEN FENCE
 - U.E. = UTILITY EASEMENT
 - F.I.P. = FOUND IRON PIPE
 - P.U.E. = PUBLIC UTILITY EASEMENT
 - #-#-# = PROPERTY LINE
 - A.E. = AERIAL EASEMENT
 - S.I.R. = SET IRON ROD
 - W.S.E. = WATER & SEWER EASEMENT
 - #-#-# = CHAIN LINK FENCE
 - D.E. = DRAINAGE EASEMENT
 - W.P. = WOODEN POST
 - E.E. = ELECTRIC EASEMENT
 - #-#-# = METAL FENCE
 - S.S.E. = SANITARY SEWER EASEMENT
 - M.P. = METAL POST
 - P.C. = POINT OF CURVATURE
 - #-#-# = WIRE FENCE
 - S.T.S.E. = STORM SEWER EASEMENT
 - C.F.# = CLERK'S FILE NUMBER
 - P.T. = POINT OF TANGENCY
 - #-#-# = BUILDING WALL
 - W.L.E. = WATER LINE EASEMENT
 - P.O.C. = POINT OF COMMENCING
 - P.R.C. = POINT OF REVERSE CURVATURE
 - #-#-# = BUILDING SETBACK LINE
 - P.O.B. = POINT OF BEGINNING
 - P.O.C. = POINT OF COMPOUND CURVATURE
 - P.P. = POWER POLE
 - P.S. = POWER POLE
 - S.F.A.F. = SEARCHED FOR, NOT FOUND
 - U.S. = UNABLE TO SET
 - F.N.D. = FOUND
 - S.F.A.F. = SEARCHED FOR, NOT FOUND
 - U.S. = UNABLE TO SET
 - B.S. = BEARS
 - B.S. = BEARS
 - U.S. = UNABLE TO SET

G.C.C.F.#8409229



Reviewed & Accepted by: *Robert Scott Walker* Date: *5-29-2015* *Christi Michelle Carpenter* Date: *5/29/15*

NOTES:
 - BEARING BASIS: PLAT
 - SUBJECT TO ANY AND ALL RECORDED AND UNRECORDED EASEMENTS
 - SURVEYOR HAS NOT INDEPENDENTLY ABSTRACTED PROPERTY
 - UNDERGROUND UTILITY INSTALLATIONS, UNDERGROUND IMPROVEMENTS, FOUNDATIONS AND/OR OTHER UNDERGROUND STRUCTURES WERE NOT LOCATED BY THIS SURVEY
 - THIS SURVEY IS CERTIFIED FOR THIS TRANSACTION ONLY, IT IS NOT TRANSFERABLE TO ADDITIONAL INSTITUTIONS OR SUBSEQUENT OWNERS
 - SUBJECT TO RESTRICTIVE COVENANTS AS PER TITLE COMMITMENT
 - SUBJECT TO ZONING AND BUILDING ORDINANCES ENFORCED BY LOCAL MUNICIPALITIES

LEGAL DESCRIPTION
 LOT FORTY-NINE (49), OF EDWARDS LANDING, A SUBDIVISION IN GALVESTON COUNTY, TEXAS, ACCORDING TO THE MAP OR PLAT THEREOF RECORDED IN PLAT RECORD 17, MAP NO. 119, OF THE MAP RECORDS OF GALVESTON COUNTY, TEXAS.

OWNER: ROBERT SCOTT WALKER
 CHRISTI MICHELLE CARPENTER
ADDRESS: 1211 ISLAND DRIVE



I DO HEREBY CERTIFY THAT THIS SURVEY WAS THIS DAY MADE ON THE GROUND OF THE PROPERTY LEGALLY DESCRIBED HEREON (OR ON ATTACHED SHEET), AND THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN, AND WAS DONE BY ME OR UNDER MY SUPERVISION, AND CONFORMS TO OR EXCEEDS THE CURRENT STANDARDS AS ADOPTED BY THE TEXAS BOARD OF PROFESSIONAL LAND SURVEYING.

JOB # 1505055
DATE 05/11/2015 REV 5/18/2015
GF# LC1534322

PRO-SURV
 P.O. BOX 1366, FRIENDSWOOD, TX 77549
 PHONE- 281-996-1113 FAX - 281-996-0112
 EMAIL: orders@prosurv.net
 TBPLS FIRM NO.: 10119300
 ONLY SURVEY MAPS WITH THE SURVEYOR'S ORIGINAL SIGNATURE ARE GENUINE TRUE AND CORRECT COPIES OF THE SURVEYOR'S ORIGINAL WORK AND OPINION.
 ©2015 PRO-SURV - ALL RIGHTS RESERVED

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

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION				FOR INSURANCE COMPANY USE		
A1. Building Owner's Name WALKER 1612001				Policy Number:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1211 ISLAND DRIVE				Company NAIC Number:		
City SAN LEON		State TEXAS		Zip Code 77569		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 49 EDWARDS LANDING						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL						
A5. Latitude/Longitude: Lat. 29°28'51.43"N Long. 94°56'26.60"W Horizontal Datum: <input type="radio"/> NAD 1927 <input checked="" type="radio"/> 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>N/A</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>N/A</u> sq ft			a) Square footage of attached garage <u>N/A</u> sq ft			
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>			b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>			
c) Total net area of flood openings in A8.b <u>N/A</u> sq in			c) Total net area of flood openings in A9.b <u>N/A</u> sq in			
d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No			d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No			
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number GALVESTON COUNTY UNINC. 485470			B2. County Name GALVESTON		B3. State TEXAS	
B4. Map/Panel Number 485470 0100	B5. Suffix C	B6. FIRM Index Date 12-6-02	B7. FIRM Panel Effective/ Revised Date 5-2-83	B8. Flood Zone(s) A12	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="radio"/> FIS Profile <input checked="" type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other/Source: _____						
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input type="radio"/> Other/Source: _____						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="radio"/> Yes <input checked="" type="radio"/> No Designation Date: <input type="radio"/> CBRS <input type="radio"/> OPA						
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
C1. Building elevations are based on: <input type="radio"/> Construction Drawings* <input type="radio"/> Building Under Construction* <input type="radio"/> 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>AW 1076</u>			Vertical Datum: <u>NGVD 1929</u>			
Indicate elevation datum used for the elevations in items a) through h) below. <input checked="" type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input type="radio"/> 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>N/A</u>	<u>N/A</u>	<u>N/A</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
b) Top of the next higher floor	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
d) Attached garage (top of slab)	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
f) Lowest adjacent (finished) grade next to building (LAG)	<u>6</u>	<u>4</u>	<u>4</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
g) Highest adjacent (finished) grade next to building (HAG)	<u>7</u>	<u>5</u>	<u>5</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters	

ELEVATION CERTIFICATE, page 2

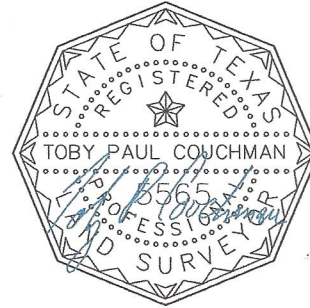
OMB Control Number: 1660-0008
Expiration: 11/30/2018

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. 1211 ISLAND DRIVE		Policy Number:	
City SAN LEON	State TX	Zip Code 77569	Company NAIC Number:

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.

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



Certifier's Name TOBY PAUL COUCHMAN		License Number 5565	
Title R.P.L.S.	Company Name PRO-SURV		
Address P.O. BOX 1366	City FRIENDSWOOD	State TX	Zip Code 77549
Signature <i>Toby P. Couchman</i>	Date 12-2-16	Telephone 281-996-1113	

Copy all pages of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)

TBM - SET MAG NAIL IN STREET CENTERLINE - ELEVATION = 8.3'

Signature *Toby P. Couchman* Date 12-2-16

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 page 8 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 TOBY PAUL COUCHMAN			
Address P.O. BOX 1366	City FRIENDSWOOD	State TEXAS	ZIP Code
Signature	Date 12-2-16	Telephone	

Comments

Check here if attachments.