#### U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2022

# ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

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

|  | SEC                    | TION A - PROPERT                     | Y INFOR   | MATION                            |  |                                   | RANCE COMPANY USE  |
|--|------------------------|--------------------------------------|-----------|-----------------------------------|--|-----------------------------------|--|
| A1. Building Owne  |                        |                                      |           |                                   |  | Policy Num                        |  |
| OAKLAWN PROPERTIES LLC   |                        |                                      |           |                                   |  |                                   |  |
| A2. Building Street<br>Box No.   | t Address (in          | cluding Apt., Unit, Sui              | te, and/c | or Bldg. No.) o                   | or P.O. Route and  | Company N                         | IAIC Number:   |
| 11403 CARVEL LA  | ANE                    |                                      |           |                                   |  |                                   |  |
| City   |                        |                                      | *         | State                             |  | ZIP Code                          |  |
| HOUSTON  | 1                      |                                      |           | Texas                             |  | 77072                             |  |
| LOT 9, BLOCK 6,  |                        | nd Block Numbers, Ta<br>VEST, SEC. 7 | ax Parce  | l Number, Le                      | gal Description, et  | c.)                               |  |
| A4. Building Use (   | e.g., Resider          | ntial, Non-Residential,              | Addition  | , Accessory,                      | etc.) RESIDENTI  | AL                                |  |
|  |                        | !9°41'47.4"N                         |           | 95°34'46.4"                       |  | I Datum: NAD 1                    | 927 🗷 NAD 1983   |
| A6. Attach at least  | 2 photograp            | hs of the building if th             |           |                                   | The Particular Section Control of the Control of th | -                                 | <u> </u>   |
| A7. Building Diagra  |                        |                                      |           |                                   |  |                                   |  |
| A8. For a building   | with a crawls          | pace or enclosure(s):                |           |                                   |  |                                   |  |
|  |                        | space or enclosure(s)                |           |                                   | N/A sq ft  |                                   |  |
|  |                        | ood openings in the cr               |           | e or enclosur                     | NAME OF TAXABLE PARTY OF TAXABLE PARTY.  | ahove adjacent ora                | nde N/A  |
|  |                        | penings in A8.b                      |           | N/A sqir                          |  | above adjacent gre                | IN/A   |
| d) Engineered  |                        | -                                    | lo.       | 1477 04 11                        | •  |                                   |  |
|  |                        |                                      | NO        |                                   |  |                                   |  |
| A9. For a building w   |                        |                                      |           |                                   |  |                                   |  |
|  |                        | ned garage                           |           |                                   |  |                                   |  |
| b) Number of p   | ermanent flo           | ood openings in the at               | tached g  | arage within                      | 1.0 foot above adja  | acent grade N/A                   | TOTAL Trades considerate and c |
| c) Total net area of flood openings in A9.b N/A sq in  |                        |                                      |           |                                   |  |                                   |  |
| d) Engineered flood openings?  |                        |                                      |           |                                   |  |                                   |  |
|  |                        |                                      |           |                                   |  |                                   |  |
|  | NAME OF TAXABLE PARTY. | ECTION B – FLOOD                     | NSURA     | 1                                 |  | ORMATION                          |  |
| B1. NFIP Communi   |                        | Community Number                     |           | B2. County                        | Name   |                                   | B3. State  |
| CITY OF HOUSTO   | N 480296               |                                      |           | HARRIS                            |  |                                   | Texas  |
| B4. Map/Panel<br>Number  | B5. Suffix             | B6. FIRM Index<br>Date               | Effe      | RM Panel<br>ective/<br>vised Date | B8. Flood<br>Zone(s)   | B9. Base Flood E<br>(Zone AO, use | evation(s)<br>Base Flood Depth)  |
| 48201C0830   | L                      | 11-15-2019                           | 06-18-    | 2007                              | AE   | 72                                |  |
| 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: NAVD 88, 2001 ADJ                 |                        |                                      |           |                                   |  |                                   |  |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes 🛪 No |                        |                                      |           |                                   |  |                                   |  |
| Designation Date: CBRS OPA   |                        |                                      |           |                                   |  |                                   |  |
| -  |                        |                                      |           |                                   |  |                                   |  |
|  |                        |                                      |           |                                   |  |                                   |  |

# **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2022

| IMPORTANT: In these spaces, copy the corresponding information fron   | FOR INSURANCE COMPANY USE  |  |  |  |  |
|---|--|--|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O 11403 CARVEL LANE  | Policy Number:   |  |  |  |  |
| City State HOUSTON Texas  | ZIP Code<br>77072  | Company NAIC Number  |  |  |  |
| SECTION C – BUILDING ELEVATION INFOR  | EMATION (SURVEY RE   | EQUIRED)   |  |  |  |
| 04 5 1111 1 1 1 1   | Building Under Constru   |  |  |  |  |
| *A new Elevation Certificate will be required when construction of the I  |  | i illionod constitucion  |  |  |  |
| C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (w Complete Items C2.a–h below according to the building diagram spec Benchmark Utilized: HC CO RM 040555 (EL=72.49) Vertical Da   | ith BFE), AR, AR/A, AR/<br>ified in Item A7. In Puerto<br>atum: NAVD 88, 2001 AI   | o Rico only, enter meters.   |  |  |  |
| Indicate elevation datum used for the elevations in items a) through h)   |  |  |  |  |  |
| ☐ NGVD 1929 ☐ NAVD 1988 🗷 Other/Source: NAVD 88  Datum used for building elevations must be the same as that used for   | 3, 2001 ADJ  |  |  |  |  |
| a) Top of bottom floor (including basement, crawlspace, or enclosure  | 5  | Check the measurement used.  |  |  |  |
| b) Top of the next higher floor   | noor)  | 72.29  Feet meters   |  |  |  |
|   |  | N/A  feet  meters  |  |  |  |
| <ul><li>c) Bottom of the lowest horizontal structural member (V Zones only)</li><li>d) Attached garage (top of slab)</li></ul>  |  | N/A x feet meters  N/A feet meters   |  |  |  |
| e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)  | 1  | 72.02  feet  meters  |  |  |  |
| f) Lowest adjacent (finished) grade next to building (LAG)  | Management of the second secon | 71.3 🗷 feet 🗌 meters   |  |  |  |
| g) Highest adjacent (finished) grade next to building (HAG)   |  | - Indiana - Indi |  |  |  |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including   |  | 71.6 🗷 feet 🗌 meters   |  |  |  |
| structural support  |  | N/A F feet meters  |  |  |  |
| SECTION D – SURVEYOR, ENGINEER, OR  |  |  |  |  |  |
| 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 survey   | yor? 🗷 Yes 🗌 No  | Check here if attachments.   |  |  |  |
| Certifier's Name License Number DANIEL VILLA, JR., P.E., R.P.L.S. 6751  | -  | JAN  |  |  |  |
| Title   |  | - OF TEN   |  |  |  |
| PRINCIPAL   |  | S. C. STERS. V   |  |  |  |
| Company Name  |  | DANIEL-VIII A ID   |  |  |  |
| DVJ CIVIL ENGINEERING AND LAND SURVEYING LLC  |  | :0. 6751 >:  |  |  |  |
| Address<br>8118 FRY ROAD, SUITE 402   |  | 7.01310.0  |  |  |  |
| City State CYPRESS Texas  | ZIP Code<br>77433  | TBPELS FIRM NO. 10194609   |  |  |  |
| Signature Date 09-26-2021   | Telephone<br>(832) 518-9910  | Ext.   |  |  |  |
| Copy all pages of this Elevation Certificate and all attachments for (1) commun   | ity official, (2) insurance a  | gent/company, and (3) building owner.  |  |  |  |
| Comments (including type of equipment and location, per C2(e), if applicable  | e)   |  |  |  |  |
| 1. C2e IS A/C UNIT  |  |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2022

| IMPORTANT: In these spaces, copy the corresponding information from Section A.  FOR INSURANCE COMPANY USI  |  |   |   |                                    |  |
|--|--|---|---|------------------------------------|--|
| Buildi<br>1140   | ng Street Address (including Apt., Unit, Suite, and<br>3 CARVEL LANE   | /or Bldg. No.) or P.O. R                              | toute and Box No.                             | Policy Number:                     |  |
| City<br>HOU  | CTON   |   | IP Code<br>7072                               | Company NAIC Number                |  |
|  | SECTION E - BUILDING ELI<br>FOR ZONE   | EVATION INFORMAT<br>AO AND ZONE A (W                  | TION (SURVEY NOT<br>VITHOUT BFE)              | REQUIRED)                          |  |
| enter  | ones AO and A (without BFE), complete Items E1-<br>lete Sections A, B,and C. For Items E1–E4, use na<br>meters.                | -E5. If the Certificate is atural grade, if available | intended to support a<br>c. Check the measure | ment used. In Puerto Rico only,    |  |
| <ul> <li>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).</li> <li>a) Top of bottom floor (including basement,</li> </ul> |  |   |   |                                    |  |
| b  | crawlspace, or enclosure) is ) Top of bottom floor (including basement, crawlspace, or enclosure) is                           |   | _   |                                    |  |
| u  | or Building Diagrams 6–9 with permanent flood op<br>ne next higher floor (elevation C2.b in<br>ne diagrams) of the building is | enings provided in Sec                                | ction A Items 8 and/or                        | 9 (see pages 1–2 of Instructions), |  |
|  | ttached garage (top of slab) is  |   | _   |                                    |  |
| E4. T  | op of platform of machinery and/or equipment ervicing the building is  |   | _   |                                    |  |
| E5. Z  | one AO only: If no flood depth number is available bodplain management ordinance?   Yes  | , is the top of the botton                            | m floor elevated in acc                       | cordance with the community's      |  |
|  | SECTION F - PROPERTY OWN   | ER (OR OWNER'S RE                                     | PRESENTATIVE) CE                              | PTIFICATION                        |  |
| The pr   | roperty owner or owner's authorized representative unity-issued BFE) or Zone AO must sign here. The                            | who completes Section                                 | ons A B and E for Zo                          | no A (without a EEMA issued or     |  |
|  | rty Owner or Owner's Authorized Representative's   |   |   |                                    |  |
| Addres   | SS   | City  | Sta   | te ZIP Code                        |  |
| Signat   | ure  | Date  | Tel   | ephone                             |  |
| Comm   | ents   |   |   |                                    |  |
|  |  |   |   |                                    |  |
|  |  |   |   |                                    |  |
|  |  |   |   |                                    |  |
|  |  |   |   |                                    |  |
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|  |  |   |   |                                    |  |
|  |  |   |   |                                    |  |
|  |  |   |   |                                    |  |
|  |  |   |   | Check here if attachments.         |  |

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expiration Date: November 30, 2022

| IMPORTANT: In these spaces, copy the corr  | FOR INSURANCE COMPANY USE            |                   |  |  |  |
|--|--------------------------------------|-------------------|--|--|--|
| Building Street Address (including Apt., Unit, S<br>11403 CARVEL LANE  | Policy Number:                       |                   |  |  |  |
| City<br>HOUSTON  | State ZIP (<br>Texas 770)            |                   | Company NAIC Number                            |  |  |
| SECTION  | ON G - COMMUNITY INFORMATION         | ON (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 Zone AO.  | ion E for a building located in Zone | A (without a FEMA | A-issued or community-issued BFE)              |  |  |
| G3. The following information (Items G4-   | -G10) is provided for community floo | odplain manageme  | ent purposes.                                  |  |  |
| G4. Permit Number  | G5. Date Permit Issued               |                   | Pate Certificate of ompliance/Occupancy Issued |  |  |
| G7. This permit has been issued for:   | New Construction  Substantial        | Improvement       |  |  |  |
| G8. Elevation of as-built lowest floor (including of the building:   | g basement)                          | feet              | meters Datum                                   |  |  |
| G9. BFE or (in Zone AO) depth of flooding at t   | 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 (including type of equipment and loc  | eation, per C2(e), if applicable)    |                   |  |  |  |
|  |                                      |                   |  |  |  |
|  |                                      |                   |  |  |  |
|  |                                      |                   |  |  |  |
|  |                                      |                   |  |  |  |
|  |                                      |                   |  |  |  |
|  |                                      |                   |  |  |  |
|  |                                      |                   |  |  |  |
|  |                                      |                   | Check here if attachments.                     |  |  |

#### **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2022

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. 11403 CARVEL LANE

Policy Number:

City HOUSTON

**ELEVATION CERTIFICATE** 

State Texas

ZIP Code 77072

Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption

FRONT VIEW

Clear Photo One



Photo Two

Photo Two Caption LEFT SIDE VIEW

Clear Photo Two

#### **BUILDING PHOTOGRAPHS**

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2022

| IMPORTANT: In these spaces, copy                        | FOR INSURANCE COMPANY USE |                   |                     |
|---|---------------------------|-------------------|---------------------|
| Building Street Address (including Ap 11403 CARVEL LANE | Policy Number:            |                   |                     |
| City<br>HOUSTON   | State<br>Texas            | ZIP Code<br>77072 | Company NAIC Number |

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

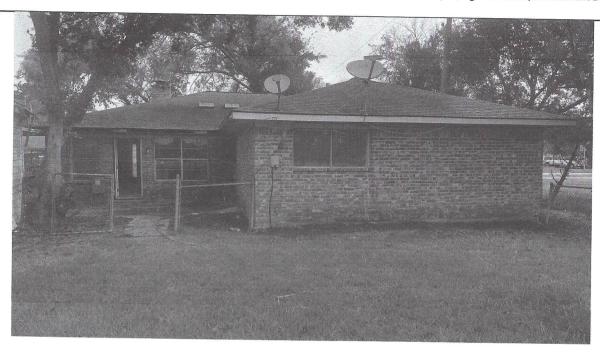


Photo Three

Photo Three Caption

**ELEVATION CERTIFICATE** 

REAR VIEW

Clear Photo Three



Photo Four

Photo Four Caption RIGHT SIDE VIEW

Clear Photo Four



Date:

09/26/21

Invoice #:

K2109-024

TBPELS Firm Number 10194609 8118 Fry Rd, Suite 402 Cypress, TX 77433 832.518.9910

# **PLEASE NOTE ADDRESS CHANGE**

BILL TO

## **SOUTH LAND TITLE, LLC**

1300 Hercules Ave Suite 115 Houston, TX 77058

Job#:

GF#:

Property Address:

K2109-024

CL2186259

11403 Carvel Lane, Houston, TX 77072.

| Description   | Amount         |
|---|----------------|
| ELEVATION CERTIFICATE   | \$<br>400.00 T |
| Subtotal  | \$<br>400.00   |
| Sales Tax (8.25%)   | \$<br>33.00    |
| Please make checks payable to DV I CIVII ENGINEEDING A LAND CURRENT | \$<br>433.00   |

Please make checks payable to DVJ CIVIL ENGINEERING & LAND SURVEYING