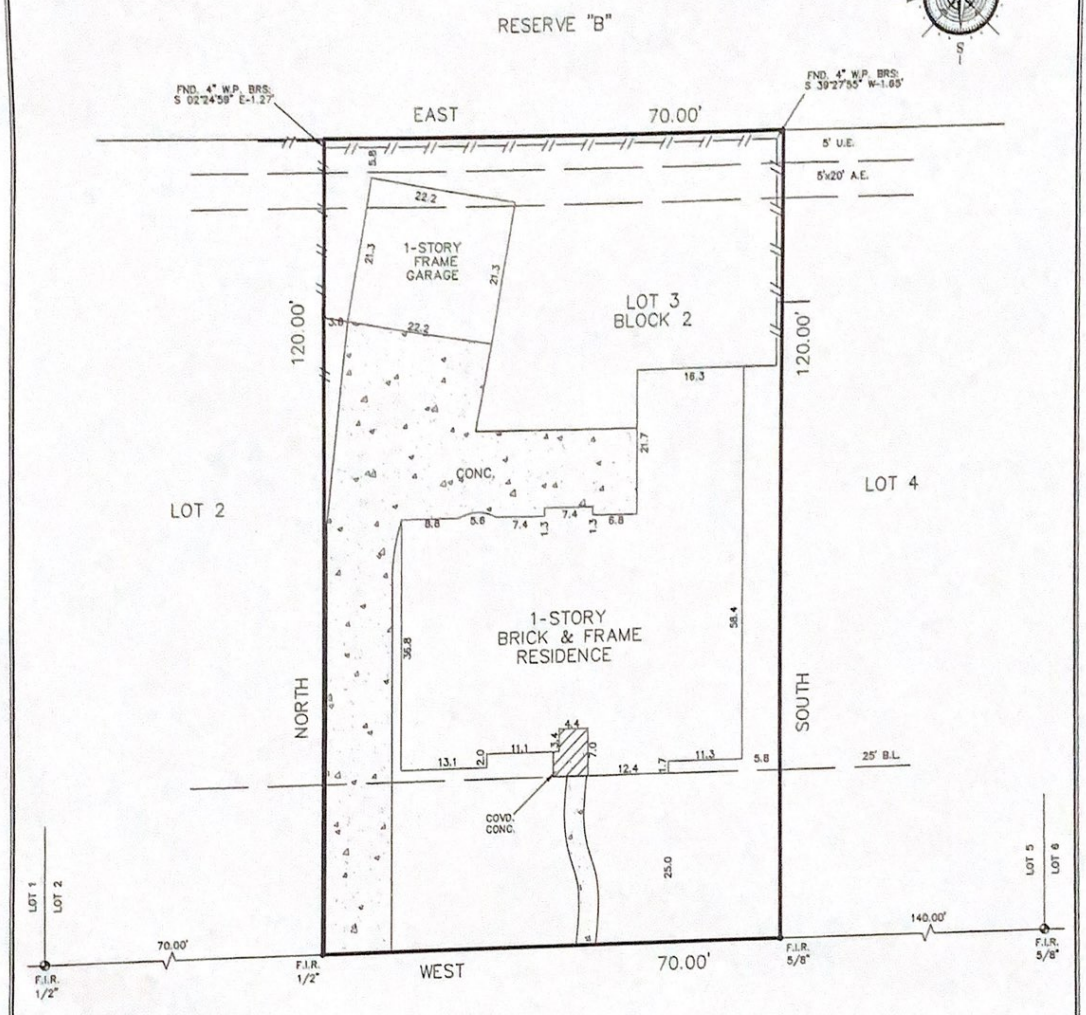
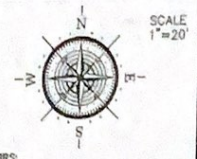


LEGEND - ITEMS THAT MAY APPEAR IN DRAWING BELOW	F.I.R. - FOUND IRON ROD	P.A.E. - PERMANENT ADDRESS EASEMENT	⊙ - CONTROL MONUMENT	— — — - WOODEN FENCE
	F.I.P. - FOUND IRON PIPE	P.U.E. - PUBLIC UTILITY EASEMENT	— — — - PROPERTY LINE	— — — - CHAIN LINK FENCE
M.U.E. - MUNICIPAL UTILITY EASEMENT	S.I.R. -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



7626 BRAESGLEN DRIVE
60' R.O.W.

Reviewed & Accepted by: Jose Guzman Pulido Date 6/27/16

- 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
 - NO AERIAL EASEMENT ENCROACHMENTS

LEGAL DESCRIPTION
LOT THREE (3), IN BLOCK TWO (2), OF THE REPLAT MAPLEWOOD WEST, A SUBDIVISION IN HARRIS COUNTY, TEXAS, ACCORDING TO THE MAP OR PLAT THEREOF, RECORDED IN VOLUME 157, PAGE 79 OF THE MAP RECORDS OF HARRIS COUNTY, TEXAS.

JOSE PULIDO
ELLYN PULIDO

ADDRESS 7626 BRAESGLEN 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 # 1606169
DATE 06/16/2016
CF# CTH-IL-CTT16667242NP

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.
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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 PULIDO 1606169				Policy Number:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7626 BRAESGLEN DRIVE				Company NAIC Number:		
City HOUSTON		State TEXAS		Zip Code 77071		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 3/2 MAPLEWOOD WEST						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)				RESIDENTIAL		
A5. Latitude/Longitude: Lat. 29°40'24.61"N Long. 95°30'42.38"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>1A</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		b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>		a) Square footage of attached garage <u>N/A</u> sq ft		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		d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No		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
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number CITY OF HOUSTON 480296				B2. County Name HARRIS		B3. State TEXAS
B4. Map/Panel Number 48201C 0845	B5. Suffix L	B6. FIRM Index Date 5-4-15	B7. FIRM Panel Effective/ Revised Date 6-8-07	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 61.9	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input checked="" type="radio"/> FIS Profile <input type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other/Source: _____						
B11. Indicate elevation datum used for BFE in Item B9: <input type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input checked="" type="radio"/> Other/Source: <u>NAVD 1988, 2001 ADJ.</u>						
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 checked="" 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>TSARP RM NO. 040185</u>				Vertical Datum: <u>NAVD 1988, 2001 ADJ.</u>		
Indicate elevation datum used for the elevations in items a) through h) below. <input type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input checked="" type="radio"/> Other/Source: <u>NAVD 1988, 2001 ADJ.</u>						
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>59</u>	<u>5</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>	<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>	<input checked="" type="radio"/> feet <input type="radio"/> meters			
d) Attached garage (top of slab)	<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>59</u>	<u>2</u>	<input checked="" type="radio"/> feet <input type="radio"/> meters			
f) Lowest adjacent (finished) grade next to building (LAG)	<u>58</u>	<u>6</u>	<input checked="" type="radio"/> feet <input type="radio"/> meters			
g) Highest adjacent (finished) grade next to building (HAG)	<u>59</u>	<u>2</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>	<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. 7626 BRAESGLEN DRIVE		Policy Number:	
City HOUSTON	State TX	Zip Code 77071	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.			
<input type="checkbox"/> Check here if attachments.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="radio"/> Yes <input type="radio"/> No	
Certifier's Name TOBY P. 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 6-16-16	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) THE ELEVATION IN SECTION C2e REFERS TO AN AIR CONDITIONING UNIT (CONDENSER).			
Signature <i>Toby P. Couchman</i>		Date 6-16-16	
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 _____ . _____		<input checked="" type="radio"/> feet <input type="radio"/> meters <input checked="" type="checkbox"/> above or <input type="checkbox"/> below the HAG.	
b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ . _____		<input checked="" type="radio"/> feet <input type="radio"/> meters <input checked="" type="checkbox"/> above or <input type="checkbox"/> 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 _____ . _____		<input checked="" type="radio"/> feet <input type="radio"/> meters <input checked="" type="checkbox"/> above or <input type="checkbox"/> below the HAG.	
E3. Attached garage (top of slab) is _____ . _____		<input checked="" type="radio"/> feet <input type="radio"/> meters <input checked="" type="checkbox"/> above or <input type="checkbox"/> below the HAG.	
E4. Top of platform of machinery and /or equipment servicing the building is _____ . _____		<input checked="" type="radio"/> feet <input type="radio"/> meters <input checked="" type="checkbox"/> above or <input type="checkbox"/> 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? <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> 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 P. COUCHMAN		ZIP Code	
Address P.O. BOX 1366	City FRIENDSWOOD	State TEXAS	ZIP Code
Signature	Date 6-16-16	Telephone	
Comments			
<input type="checkbox"/> Check here if attachments.			

ELEVATION CERTIFICATE, page 4

BUILDING PHOTOGRAPHS
See instructions for Item A6.

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. 7626 BRAESGLEN DRIVE		Policy Number:	
City HOUSTON	State TEXAS	Zip Code 77071	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.



FRONT VIEW

DATE: 6-16-16



REAR VIEW

DATE: 6-16-16