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

Conv	anen lle v	of this	Flevation	Certificate and a	Il attachments fo	r(1)	community	official	(2) insurance	agent/company	and (3) huilding owner
COP	all pages	ບເພນ	LIEVALIUIT	Certificate and a		וווו	COMMUNIC	/ Unicial,	(2) insurance	agent/company	, anu to) building owner.

SECTION	N A – PROPERTY II					RANCE COMPANY USE			
A1. Building Owner's Name					Policy Num				
COLLINGSWORTH JUANITA					,				
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 810 FRAZER LN									
City State ZIP Code									
HOUSTON			Texas		77038				
A3. Property Description (Lot and E LT 293 BLK 2 HIDDEN VALLEY SE		Parcel	Number, Legal De	scription, etc.)					
A4. Building Use (e.g., Residential,	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL								
A5. Latitude/Longitude: Lat. 29°53	3'58.70"N L	ong	95°24'56.45"W	Horizontal Datun	n: 🗌 NAD 1	927 🗙 NAD 1983			
A6. Attach at least 2 photographs c	of the building if the C	Certific	ate is being used to	obtain flood insura	ance.				
A7. Building Diagram Number	1A								
A8. For a building with a crawlspace	e or enclosure(s):								
a) Square footage of crawlspace			sq ft						
b) Number of permanent flood	openings in the cray	vlspace	e or enclosure(s) wi	ithin 1.0 foot above	adiacent ar	ade			
c) Total net area of flood openi		-	q in						
			9						
d) Engineered flood openings?	Yes 🗌 No								
A9. For a building with an attached	garage:								
a) Square footage of attached	a) Square footage of attached garage 360 sq ft								
b) Number of permanent flood	openings in the atta	ched g	arage within 1.0 foo	ot above adjacent	grade	0			
c) Total net area of flood openi	 b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade c) Total net area of flood openings in A9.b 0 sq in 								
d) Engineered flood openings?									
	? ☐ Yes 🖂 No								
SECTI	ION B - FLOOD IN	SURA	NCE RATE MAP	(FIRM) INFORMA	TION				
B1. NFIP Community Name & Com	munity Number		B2. County Name			B3. State			
CITY OF HOUSTON 480296			HARRIS			Texas			
B4. Map/Panel B5. Suffix B Number	6. FIRM Index Date	Ef	IRM Panel fective/ evised Date	B8. Flood Zone(s	(Zo	se Flood Elevation(s) ne AO, use Base od Depth)			
48201C0470 L 00	6/18/2007	06/18		AE	81.0'				
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:									
B11. Indicate elevation datum used	for BFE in Item B9:	□ N	GVD 1929 🗌 NA	VD 1988 🛛 Ot	her/Source:	NAVD 88, 2001 ADJ			
B12. Is the building located in a Co	B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🖂 No								
Designation Date:		BRS			·				
		2.10							

ELEVATION CERTIFICATE				DMB No. 1660-0008 Expiration Date: November 30, 2018
IMPORTANT: In these spaces, copy the	corresponding information	from Section A.		FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Un 810 FRAZER LN				Policy Number:
City	State	ZIP Code		Company NAIC Number
HOUSTON	Texas	77038		
SECTION C -	BUILDING ELEVATION IN	IFORMATION (SU		QUIRED)
C1. Building elevations are based on:	Construction Drawings*			tion* \boxtimes Finished Construction
*A new Elevation Certificate will be r	•	0	•	
C2. Elevations – Zones A1–A30, AE, AF Complete Items C2.a–h below accor	rding to the building diagram	specified in Item A7	'. In Puerto	Rico only, enter meters.
Benchmark Utilized: CAPNET VRS		al Datum: <u>NAVD88</u>	, 2001 ADJ	051
Indicate elevation datum used for the	,			
Datum used for building elevations n	\mathbb{R} Other/Source: CAPN		K, NAVD88	3, 2001 ADJUST
Datam used for building elevations in				Check the measurement used.
a) Top of bottom floor (including bas	sement, crawlspace, or enclo	sure floor)	<u>79</u> . <u>5</u>	X feet meters
b) Top of the next higher floor				x feet meters
c) Bottom of the lowest horizontal st	tructural member (V Zones o	nly)	·	X feet meters
d) Attached garage (top of slab)			78.7	X feet meters
 e) Lowest elevation of machinery or (Describe type of equipment and 	equipment servicing the bui location in Comments)	lding	<u>79</u> . <u>9</u>	X feet meters
f) Lowest adjacent (finished) grade	next to building (LAG)		78. 7	X feet meters
g) Highest adjacent (finished) grade	e next to building (HAG)		<u>78</u> . <u>9</u>	X feet meters
 h) Lowest adjacent grade at lowest structural support 	elevation of deck or stairs, in	cluding	<u>78</u> . <u>7</u>	X feet meters
SECTION D -	- SURVEYOR, ENGINEER	, OR ARCHITECT	CERTIFIC	CATION
This certification is to be signed and seal I certify that the information on this Certif statement may be punishable by fine or i	icate represents my best effo	orts to interpret the a	lata availab	law to certify elevation information. Ile. I understand that any false
Were latitude and longitude in Section A	provided by a licensed land s	surveyor? 🛛 🗙 Yes	🗌 No	Check here if attachments.
Certifier's Name RYAN J FUSELIER, RPLS	License Nu 5989	umber		OF a
Title PRINCIPAL				SALGISTERET
Company Name R.J. FUSELIER & ASSOCIATES, LLC				RYAN FUSELIER
Address 150 BELLE TERRE DR.				Typo 5989
City	State	ZIP Coo	le	SURVE
EUNICE	Louisiana	70535		and a second sec
Signature Ryan Fuselier, P.E., PLS	Date Fuselier, P.E., PLS 04/26/2018	Telepho 3 (337) 65		-
Copy all pages of this Elevation Certificate	and all attachments for (1) co	mmunity official, (2) i	nsurance a	gent/company, and (3) building owner.
Comments (including type of equipment a LOWEST MACHINERY IS A/C UNIT.	and location, per C2(e), if app	blicable)		

OMB No.	1660-0008
Expiratior	Date: November 30, 2018

ELEVATION CERTIFICATE			Expiration Date: November 30, 2018					
IMPORTANT: In these spaces, copy the correspo	onding information	on from Section A.	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, 810 FRAZER LN	and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:					
City HOUSTON	State Texas	ZIP Code 77038	Company NAIC Number					
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 complete Sections A, B,and C. For Items E1–E4, us enter meters.								
E1. Provide elevation information for the following a the highest adjacent grade (HAG) and the lower a) Top of bottom floor (including basement,			ther the elevation is above or below					
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet m	eters above or below the HAG.					
crawlspace, or enclosure) is	· · · ·		eters above or below the LAG.					
E2. For Building Diagrams 6–9 with permanent floo the next higher floor (elevation C2.b in	od openings provid							
the diagrams) of the building is E3. Attached garage (top of slab) is	·		eters above or below the HAG.					
E4. Top of platform of machinery and/or equipment	t							
servicing the building is E5. Zone AO only: If no flood depth number is avai		the bottom floor elevated in						
floodplain management ordinance? Yes			ust certify this information in Section G.					
SECTION F – PROPERTY O The property owner or owner's authorized represen	•							
community-issued BFE) or Zone AO must sign here	e. The statements	in Sections A, B, and E are	correct to the best of my knowledge.					
Property Owner or Owner's Authorized Representation	tive's Name							
Address		City	State ZIP Code					
Signature		Date	Telephone					
Comments								
			Check here if attachments.					

OMB No. 16
Expiration D

ELEVATION CERTIFICATE				MB No. 16 xpiration Da	60-0008 ate: November 30, 2018				
IMPORTANT: In these spaces, copy the corre	sponding information	from Section A.	F	OR INSUR	ANCE COMPANY USE				
Building Street Address (including Apt., Unit, Su 810 FRAZER LN	iite, and/or Bldg. No.) or	P.O. Route and Box N		Policy Numb					
City HOUSTON	State Texas	ZIP Code 77038	0	Company N	AIC Number				
SECTIO	N G – COMMUNITY INF	FORMATION (OPTIO							
The local official who is authorized by law or ord Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, ent	dinance to administer the Certificate. Complete the	e community's floodpla	ain mana						
	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation								
G2. A community official completed Section or Zone AO.	on E for a building locate	d in Zone A (without a	a FEMA-i	ssued or co	ommunity-issued BFE)				
G3. The following information (Items G4–	G10) is provided for com	imunity floodplain mar	nagemen	t purposes.					
G4. Permit Number	G5. Date Permit Issued	d		te Certificat mpliance/O	e of ccupancy Issued				
G7. This permit has been issued for:] New Construction 🗌 S	Substantial Improveme	ent						
G8. Elevation of as-built lowest floor (including of the building:	basement)	[feet	meters	Datum				
G9. BFE or (in Zone AO) depth of flooding at t	he 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	ation, per C2(e), if applic	cable)							
				Che	eck here if attachments.				

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Ap 810 FRAZER LN	Policy Number:		
City	State	ZIP Code	Company NAIC Number
HOUSTON	Texas	77038	

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 Caption FRONT FACING NORTH



Photo Two Caption BACK FACING SOUTH

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Ap 810 FRAZER LN	Policy Number:		
City HOUSTON	State Texas	ZIP Code 77038	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 One Caption LEFT FACING NORTH



Photo Two Caption RIGHT FACING NORTH