## FEDERAL EMERGENCY MANAGEMENT AGENCY . NATIONAL FLOOD INSURANCE PROGRAM

**ELEVATION CERTIFICATE** 

O.M.B. No. 3067-0077 Expires July 31, 2002

	Importa	ant: Read the	instructions on pag	es 1 - 7.			
			TY OWNER INFORMA		For Insurance Company Use:		
UILDING OWNER'S NAME					Policy Number		
TOMMY COLER UILDING STREET ADDRESS	(Including Apt., Unit, Su	uite, and/or Bldg. N	o.) OR P.O. ROUTE AND	BOX NO.	Company NAIC Number		
2329 CANAL DRI	VE				ZIP CODE		
ITY			STATE		77414		
SARGENT ROPERTY DESCRIPTION (Lo	t and Block Numbers 1	Tax Parcel Number	Legal Description, etc.)	4.5	//		
LOT 20 BLOCK	23 CARCENT	BEACH ADI	NOITIC				
UILDING USE (e.g., Residentia RESIDENTIAL	al, Non-residential, Add	ition, Accessory, e	tc. Use Comments section	if necessary.)			
ATITUDE/LONGITUDE (OPTIC	ONAL) HO	RIZONTAL DATU	M: SOURCE: L	_  GPS (Type):			
##° - ##' - ##.##" or ##.####	#°)  _  NA[	1927    NAC	1983	_  USGS Quad Ma	Other:		
/	0.000.000.000		NOT DATE MAD /EIDS	A) INFORMATIO	d		
			NCE RATE MAP (FIRM	A) INFORMATIO			
1. NFIP COMMUNITY NAME	12				B3.STATE		
SARGENT 48548	39	MA`	TAGORDA COUNT		TX		
D-1. 100 tr , 7 tr to 1 1 tr to 1 = 1		M INDEX	B7. FIRM PANEL ECTIVE/REVISED DATE	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)		
NUMBER OUEO	D 05/0		05/04/92	v-13	11		
0450 10. Indicate the source of th							
		ommunity Deterr					
11. Indicate the elevation da				88    Other (D	escribe):		
12. Is the building located in	a Coastal Barrier Re	esources System	(CBRS) area or Othen	wise Protected Ar	ea (OPA)?  _  Yes  X  No		
Designation Date:							
	SECTION C - BU	ILDING ELEVAT	ION INFORMATION (S	SURVEY REQUIP	RED)		
1. Building elevations are ba					X  Finished Construction		
*A new Elevation Certific	ate will be required w	hen construction			1		
2 Building Diagram Numbe	r 5 (Select the b	uilding diagram	most similar to the build	ling for which this	certificate is being completed - see		
pages 6 and 7. If no diag	ram accurately repr	esents the building	ng, provide a sketch or	photograph.)			
3. Elevations – Zones A1-A	30, AE, AH, A (with E	BFE), VE, V1-V3	O, V (with BFE), AR, AR	R/A, AR/AE, AR/A	1-A30, AR/AH, AR/AO		
Complete Items C3a-i be	low according to the	building diagram	specified in Item C2. S	State the datum u	sed. If the datum is different from		
the datum used for the B	FE in Section B, con	vert the datum to	that used for the BFE.	Show field meas	urements and datum conversion		
calculation. Use the spa	ce provided or the Co	omments area of	Section D or Section G	3, as appropriate,	to document the datum conversion.		
	Conversion/Comment	ts			V		
Elevation reference mark			the elevation reference		ar on the FIRM?    Yes  _X  No		
<ul><li>a) Top of bottom floor</li></ul>		or enclosure)			THE PARTY OF THE P		
□ b) Top of next higher			1/1	IL.(III) 📆	APATE OF APA		
□ c) Bottom of lowest horizontal structural member (V zones only)							
□ d) Attached garage (top of slab) ft.(m)							
☐ e) Lowest elevation o		quipment		ne e	K HAGAN		
servicing the build				ft.(m) ft.(m) .50 ft.(m)	937		
f) Lowest adjacent gra				ft.(m) 2 5	SUDVE		
g) Highest adjacent g		V within 1 ft abo		· 1L.(111) - 5			
<ul><li>□ h) No. of permanent o</li><li>□ i) Total area of all per</li></ul>				in. (sq. cm)			
1) Total area of all per							
			SINEER, OR ARCHITE				
This certification is to be sig	ned and sealed by a	land surveyor, e	engineer, or architect au	ithorized by law to	certify elevation information.		
I certify that the information	in Sections A, B, and	u C ON TAIS CERTITI	or impresents my bes	ARIIS CADAS	ection 1001		
I understand that any false CERTIFIER'S NAME	statement may be pu	inisnable by tine	or imprisonment under	CENSE NUMBER	3C0011 1001.		
MAX L. HAGAN				NO. 93/			
TITLE	ONAL LAND S	IIDNEAUD	COMPANY NAME MAX HAGAN	SURVEYING	& ENGINEERING		
ADDDESS	ONAL LAND S	ORVETUR			ZIP CODE 77566		
P.O. BOX 46∠			LAKE JACKSO	N TEXAS			
SIGNATURE			09/15/99	<u>'₹</u> ₽	9) <sup>E</sup> 297-3051		

IMPORTANT: In these spaces	, copy the corresponding information from Section A.		For Insurance Company Use:			
BUILDING STREET ADDRESS (Inc	Policy Number					
2329 CANAL DRIVE	07477					
SARGENT	STATE TEXAS	77414E	Company NAIC Number			
SECTIO	ON D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICA	TION (CON	ITINUED)			
	Certificate for (1) community official, (2) insurance agent/comp					
COMMENTS		arry, arru (c	b) building owner.			
, , , , , , , , , , , , , , , , , , , ,						
			Check here if attachments			
SECTION E - BUILDING EL	EVATION INFORMATION (SURVEY NOT REQUIRED) FOR 2	ZONE AO a	nd ZONE A (WITHOUT BFE)			
information for a LOMA or LOMR-	t BFE), complete Items E1 through E3. If the Elevation Certifica	ate is intend	led for use as supporting			
E1. Building Diagram Number	(Select the building diagram most similar to the building for	which this				
see pages o and r. II no diag	fram accurately represents the building, provide a sketch or pho	wnich tris-c	certificate is being completed –			
E2. The top of the bottom floor (in	cluding basement or enclosure) of the building is 1 1 1 ft (		.(cm)    above or    below			
(check one) the highest adjac	ent grade.					
floodplain management ordina	depth number is available, is the top of the bottom floor elevate	ed in accord	lance with the community's			
	ance? Yes No Unknown. The local official must F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE)	st certify this	s information in Section G.			
The property owner or owner's a	uthorized representative who completes Sections A, B, and E fo	E) CERTIF	ICATION			
community-issued BFE) or Zone	AO must sign here.	or Zone A (v	vitnout a FEMA-Issued or			
PROPERTY OWNER'S OR OWNER	go <sub>ch</sub>					
	S AUTHORIZED REPRESENTATIVE'S NAME					
ADDRESS	CITY	STATE	ZIP CODE			
SIGNATURE	DATE	TELEPH	ONE			
COMMENTS						
		ı	Check here if attachments			
	SECTION G - COMMUNITY INFORMATION (OPTION	AL)				
The local official who is authorized	by law or ordinance to administer the community's floodoloin m	Onogomon	t ordinance can complete			
occions A, D, C (or E), and G of the	IS Elevation Centicate. Complete the applicable item(s) and si	ian holow				
engineer, or architect who	C was taken from other documentation that has been signed a	nd emboss	ed by a licensed surveyor,			
elevation data in the Com	is authorized by state or local law to certify elevation information ments area below.)	on. (Indicat	e the source and date of the			
32.    A community official comp	leted Section E for a building located in Zone A (without a FEM	A-issued or	community-issued RFF) or			
Zone Ao.						
33.     I he following information (	(Items G4-G9) is provided for community floodplain managemen	nt purposes				
G4. PERMIT NUMBER	ISSUED	FICATE OF	COMPLIANCE/OCCUPANCY			
37. This permit has been issued fo	r:   New Construction   Substantial Improvement					
38. Elevation of as-built lowest floo	or (including basement) of the building is:		_ ft.(m) Datum:			
39. BFE or (in Zone AO) depth of f	looding at the building site is:	·_	_ ft.(m) Datum:			
LOCAL OFFICIAL'S NAME	TITLE					
COMMUNITY NAME	TELEPHONE					
SIGNATURE	DATE					
COMMENTS						
			T. T			
		1	Check here if attachments			
			attachments			

MPORTANT: In these spaces,	For Insurance Company Use:		
2329 CANAL DRIVE	uding Apt., Unit, Suite, and/or Bldg. No		Policy Number
CITY SARGENT	STATE TEXAS	7741	DDE Company NAIC Number
SECTION	ND - SURVEYOR, ENGINEER, O	R ARCHITECT CERTIFICATION (	CONTINUED)
	The second secon	al, (2) insurance agent/company, a	
COMMENTS		ai, (2) insurance agenicompany, a	id (3) building owner.
		On the state of th	Check here if attachment
SECTION E - BUILDING ELE	VATION INFORMATION (SURVI	Y NOT REQUIRED) FOR ZONE	AO and ZONE A (WITHOUT BFE)
For Zone AO and Zone A (without information for a LOMA or LOMR-I	BFE), complete Items E1 through	E3. If the Elevation Certificate is in	tended for use as supporting
E1. Building Diagram Number	(Select the building diagram mo	ost similar to the building for which	this certificate is being completed -
see pages 6 and 7. If no diagr	ram accurately represents the build	ling, provide a sketch or photograp	h.)
E2. The top of the bottom floor (inc		the building is ft.(m)	lin.(cm)  l above or  l below
(check one) the highest adjace E3. For Zone AO only: If no flood		on of the bottom floor elevated in a	cordance with the community's
floodplain management ordina		nown. The local official must certif	
		WNER'S REPRESENTATIVE) CEI	
The property owner or owner's au	thorized representative who comp	letes Sections A, B, and E for Zone	A (without a FEMA-issued or
community-issued BFE) or Zone	O must sign here.		
PROPERTY OWNER'S OR OWNER'S	S AUTHORIZED REPRESENTATIVE	S NAME	
ADDRESS	9	CITY STA	TE ZIP CODE
SIGNATURE			EPHONE
COMMENTS		DATE TEL	
			Check here if attachments
		Y INFORMATION (OPTIONAL)	
The local official who is authorized I	by law or ordinance to administer to	he community's floodplain manage	ment ordinance can complete
Sections A, B, C (or E), and G of the G1. L The information in Section	C was taken from other document	the applicable item(s) and sign believed and and	OW.
engineer, or architect who	is authorized by state or local law	ation that has been signed and emit to certify elevation information. (In	dicate the source and date of the
elevation data in the Comr	nents area below.)		
32.   A community official compl	eted Section E for a building locate	ed in Zone A (without a FEMA-issue	ed or community-issued BFE) or
Zone AO.  33.   The following information ()	tame GA GO) is provided for access		
G4. PERMIT NUMBER		nunity floodplain management purp	
C4. F ERWIT NOWIDER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE	E OF COMPLIANCE/OCCUPANCY
37. This permit has been issued for		Substantial Improvement	
G8. Elevation of as-built lowest floor	(including basement) of the buildi	ng is:	ft.(m) Datum:
39. BFE or (in Zone AO) depth of flo	boding at the building site is:		ft.(m) Datum:
LOCAL OFFICIAL'S NAME		TITLE	
COMMUNITY NAME		TELEPHONE	
SIGNATURE		DATE	
COMMENTS			
			Check here if attachments