U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1–9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

		SECTION	ON A - P	ROPERTY IN	FORMAT	TION	FC	R INSURA	NCE COMPANY USE
A1. Building Owner's Name CST Job No. 15-0032 File No. 4107-0000-0022-000						0 Po	Policy Number:		
A2. Building Street Addr 963 James	ess (including Apt.		or Bldg. No			No.		mpany NAIC	
City Gilchrist				State	TX		ZIP	Code 776	617
A3. Property Description Lot 22, FRANK A	. HUGHES SUE	BDIVISION						F497°	ALCOHOLD BUTTONES
A4. Building Use (e.g., R A5. Latitude/Longitude: A6. Attach at least 2 ph A7. Building Diagram Nu A8. For a building with a	Lat. <u>29°29'34"</u> otographs of the b Imber <u>FIVE (5)</u>	ouilding if the Certifi	Long	094°32'18"	ain flood i	nsurance	Horizontal Date.		artic (Tee
a) Square footage ofb) No. of permanent	of crawlspace or ent flood openings in	nclosure(s) n the crawlspace or	NA NA	sq ft	a) S b) N	Square fo lumber o	otage of attac f permanent f	hed garage lood openir	e NA sq ft ngs in the attached garage
enclosure(s) with c) Total net area of	nin 1.0 foot above		NA	sq in) foot above ac area of flood o	, .	
d) Engineered floor	March 19 Property Control of the			Sq III			ed flood openi		A9.b NA sq in
DAF OF WORK []		TION D FLOOR	INCLIDA	NCE DATE N					- 1000 - 1000
B1. NFIP Community Nar		TION B - FLOOD		2. County Name		(IVI) IIVI	ORIVIATION		B3. State
GALVE	STON COUNTY	485470	7 7 7 113	(SALVES			T DO D	TX
B4. Map/Panel Number 485470 0131	B5. Suffix	04/08/197		7. FIRM Panel E Revised Date 08/18/19		B8. F	lood Zone(s) V19		e Flood Elevation(s) (Zone use base flood depth)
B10. Indicate the source						em B9:	V 10		10
		unity Determined		/Source:				la (UCH)	
B11. Indicate elevation da	atum used for BFE	in Item B9:	NGVD 19	29 NAV	1988	☐ Ot	her/Source: _		
B12. Is the building locat	ed in a Coastal Ba	rrier Resources Sy	stem (CBR	S) area or Othe	rwise Pro	tected Ar	rea (OPA)? [Yes	⊠ No
Designation Date: _	//	′ □ CBRS		OPA					
	SECTIO	N C - BUILDING	G ELEVA	TION INFORM	ATION (SURVE	Y REQUIRE	D)	
C1. Building elevations a *A new Elevation CeC2. Elevations – Zones a C2.a–h below according to the control of the control o	ertificate will be red A1–A30, AE, AH, A ding to the building	· (with BFE), VE, V1– g diagram specified	uction of t -V30, V (w	th BFE), AR, AR 7. In Puerto Ric	omplete. /A, AR/AE o only, en	E, AR/A1- ter meter	–A30, AR/AH, rs.	AR/AO. Co	
Benchmark Utilized:	HGCSD 64 (NA	4VD 88)		Vertical D	atum:	NGVD 1	1929 (Adjust	ment-0.00	NGS Vertcon 2.1)
Indicate elevation dans Datum used for buil				for the BFE.			AVD 1988 Check the mea		
a) Top of bottom flo	or (including base	ment, crawlspace, o	or enclosu		22 . 8	_	X feet	meters	3
b) Top of the next h	0				<u>NA</u>	W 5 W	X feet	meters	
c) Bottom of the lov		uctural member (V	Zones only		20 . 9		⊠ feet	meters	
d) Attached garage		and the same and			<u>NA</u> 22 _ 6	No. of the last	X feet	meters	
200.00	equipment and lo	ocation in Comment	ts)	ng	22 . <u>6</u> 8 . 1	Production of the last of the	⊠ feet	meters	
f) Lowest adjacent		a turn provide de la cultura	La Contract	establis (control	8.5	1 0	★ feet ★	☐ meters	
		ext to building (HAC			8.9			☐ meters	
 h) Lowest adjacent structural support 	_	evation of deck or s	stairs, inci	uuing	<u> </u>		⊠ leet	□ meters	
	SECT	ION D - SURVE	YOR, ENG	GINEER, OR A	RCHITE	CT CEI	RTIFICATION	V	
This certification is to be s				we have been a second					1 2 1 203
nformation. I certify that to understand that any false	he information on t	this Certificate repre	esents my	best efforts to in	iterpret th	ne data a	vailable.		A
☑ Check here if comment☐ Check here if attachme				ude and longitude and surveyor?	le in Sect X Yes	tion A pro	-		5. 4 5 TE STEEL + 70 TO
Certifier's Name SIDNEY BOUSE		sid@surveygal	veston.co	om	License 5287	Number	4		SIDNEY_BOUSE
Title R.P.L.S.	-		Company		NG OF T	EXAS.	INC.		5287 F. 6
Address P.O. BOX 2742 - 975	 LAZY LANE WE	ST	City	AL BEACH	State TX	,	ZIP Code 77650		SURVEY

Signature

Date

Jan 14, 2015

Telephone (409) 684-6400

IMPORTANT: In these spaces, copy the c	corresponding information from Sec	ction A.	A CONTRACT	FO	R INSURANCE	COMPANY USE
Building Street Address (including Apt., Ur 963 James Street	nit, Suite, and/or Bldg. No.) or P.O. F	Route and Box No.		Pol	icy Number:	
City Gilchrist	State TX	ZIP Code 77617	Situa	Cor	mpany NAIC Num	ber:
SECTION D	- SURVEYOR, ENGINEER, OR	ARCHITECT CE	RTIFICATIO	ON (CONT	(INUED)	
Copy both sides of this Elevation Certifica	te for (1) community official, (2) ins	urance agent/comp	any, and (3) b	building ow	ner.	Southern Vill
Comments C2e is top of AC deck.	y suppre	en lage, and l	# #	- 14 dd. 15 dd.	Me base as ass Consequence	Posed Descript BANE 22, 50.0
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
Signature J. A.	N. Ch. (She and Shift area of Sh.).	Date Jan 14,	2015		Med antauk	matosid politica
SECTION E - BUILDING ELEVA	TION INFORMATION (SURVEY	NOT REQUIRED) FOR ZON	NE AO AN	D ZONE A (\	WITHOUT BFE)
or Zones AO and A (without BFE), comple or Items E1–E4, use natural grade, if ava	ilable. Check the measurement use	ed. In Puerto Rico or	ıly, enter met	ters.		A TOTAL PROPERTY.
Provide elevation information for the for grade (HAG) and the lowest adjacent g		boxes to snow whet	ner the eleva	ation is abo	ive or below the	e highest adjacent
a) Top of bottom floor (including basen	nent, crawlspace, or enclosure) is		feet [below the HAG.
b) Top of bottom floor (including basen			☐ feet ☐			below the LAG.
2. For Building Diagrams 6–9 with perma		ction A Items 8 and/		_		7340
the next higher floor (elevation C2.b in	the diagrams) of the building is		feet [_	below the HAG.
3. Attached garage (top of slab) is		·	feet [below the HAG.
4. Top of platform of machinery and/or e			☐ feet ☐			☐ below the HAG.
5. Zone AO only: If no flood depth numbe ordinance? Yes No Unkr	nown. The local official must certify			with the co	mmunity's 11000	apiain management
SECTION F	- PROPERTY OWNER (OR OV	VNER'S REPRES	ENTATIVE)	CERTIFI	CATION	te latte edden _e ja
SECTION F The property owner or owner's authorized one AO must sign here. The statements	representative who completes Sect	ions A, B, and E for	Zone A (with			munity-issued BFE) o
he property owner or owner's authorized one AO must sign here. The statements	representative who completes Sect in Sections A, B, and E are correct	ions A, B, and E for	Zone A (with			munity-issued BFE) o
he property owner or owner's authorized one AO must sign here. The statements roperty Owner or Owner's Authorized Rep	representative who completes Sect in Sections A, B, and E are correct	ions A, B, and E for	Zone A (with			ic favel - Article - A
he property owner or owner's authorized one AO must sign here. The statements roperty Owner or Owner's Authorized Rep ddress	representative who completes Sect in Sections A, B, and E are correct	ions A, B, and E for to the best of my kn	Zone A (with	out a FEMA	A-issued or com	ic favel - Article - A
he property owner or owner's authorized	representative who completes Sect in Sections A, B, and E are correct	ions A, B, and E for to the best of my kn City	Zone A (with	out a FEMA	A-issued or com	in Suitable Care
he property owner or owner's authorized one AO must sign here. The statements roperty Owner or Owner's Authorized Rep ddress ignature	representative who completes Sect in Sections A, B, and E are correct	ions A, B, and E for to the best of my kn City	Zone A (with	out a FEMA	Lissued or com ZIP Co	de
he property owner or owner's authorized one AO must sign here. The statements roperty Owner or Owner's Authorized Rep ddress ignature	representative who completes Sect in Sections A, B, and E are correct resentative's Name	ions A, B, and E for to the best of my kn City Date	Zone A (witho	State Teleph	Lissued or com ZIP Co	de
he property owner or owner's authorized one AO must sign here. The statements roperty Owner or Owner's Authorized Rep ddress ignature omments	representative who completes Section Sections A, B, and E are correct resentative's Name SECTION G – COMMUNIT	ions A, B, and E for to the best of my kn City Date	Zone A (withous) description of the control of the	State Teleph	ZIP Co	de here if attachments.
he property owner or owner's authorized one AO must sign here. The statements roperty Owner or Owner's Authorized Rep ddress ignature comments	representative who completes Sect in Sections A, B, and E are correct resentative's Name SECTION G — COMMUNIT r ordinance to administer the communication of the communication o	cions A, B, and E for to the best of my kn City Date Y INFORMATION unity's floodplain mar	Zone A (withous) wheelers are a constant of the constant of th	State Teleph	ZIP Co	here if attachments.
he property owner or owner's authorized one AO must sign here. The statements roperty Owner or Owner's Authorized Rep ddress ddress ignature comments The local official who is authorized by law of of this Elevation Certificate. Complete the state of the information in Section C was who is authorized by law to certificate.	representative who completes Sect in Sections A, B, and E are correct resentative's Name SECTION G — COMMUNIT or ordinance to administer the comme applicable item(s) and sign below. It is taken from other documentation by elevation information. (Indicate the section of the s	City Date Y INFORMATION unity's floodplain mar Check the measuren that has been signe the source and date	COPTIONA (OPTIONA nagement ord nent used in I d and sealed of the eleva	State Telepholinance can litems G8–G d by a licertion data in	ZIP Co one Check complete Section of the Comment	here if attachments. ions A, B, C (or E), and Rico only, enter meters engineer, or architects area below.)
he property owner or owner's authorized one AO must sign here. The statements roperty Owner or Owner's Authorized Repoddress ignature omments he local official who is authorized by law or of this Elevation Certificate. Complete the who is authorized by law to certificate. Improved the complete Section 1. A community official completed Section 2. A community official completed Section 2.	representative who completes Sect in Sections A, B, and E are correct in Section B, and E are correct in Sections A, and E are corr	City Date Y INFORMATION Unity's floodplain mar Check the measuren that has been signe the source and date one A (without a FEM)	COPTIONA (OPTIONA nagement ord nent used in I d and sealed of the eleva A-issued or o	State Telepholinance can litems G8–G d by a licertion data is community-	ZIP Co one Check complete Section on Puerto Finsed surveyor, in the Comment	here if attachments. ions A, B, C (or E), and Rico only, enter meters engineer, or architects area below.)
he property owner or owner's authorized one AO must sign here. The statements roperty Owner or Owner's Authorized Rep ddress signature comments The local official who is authorized by law of of this Elevation Certificate. Complete the who is authorized by law to certificate. I have a community official completed States and the following information (Items	representative who completes Sect in Sections A, B, and E are correct in Section B, and E are correct in Sections A, and E are corr	cions A, B, and E for to the best of my kn City Date Y INFORMATION Unity's floodplain mar Check the measuren that has been signed the source and date one A (without a FEM) of floodplain manager	Cone A (withoutledge. (OPTIONA) The properties of the eleval of the eleval of the eleval of the eleval of the purpos	State Telephe Iinance can ltems G8–G d by a licer tion data incommunityes.	ZIP Co one Check complete Section on Puerto Finsed surveyor, in the Comment	here if attachments. ions A, B, C (or E), and lico only, enter meters engineer, or architects area below.) Zone AO.
he property owner or owner's authorized one AO must sign here. The statements roperty Owner or Owner's Authorized Rep ddress ignature comments he local official who is authorized by law or of this Elevation Certificate. Complete the who is authorized by law to certificate. Improved the comments of the information in Section C was who is authorized by law to certificate. The following information (Items 14. Permit Number	SECTION G — COMMUNIT r ordinance to administer the comme e applicable item(s) and sign below. Is taken from other documentation (y elevation information. (Indicate the ection E for a building located in ZGG4—G9) is provided for community G5. Date Permit Issued	cions A, B, and E for to the best of my kn City Date Y INFORMATION Unity's floodplain mar Check the measuren that has been signed the source and date one A (without a FEM) of floodplain manager	Cone A (withoutledge. (OPTIONA) The properties of the eleval of the eleval of the eleval of the eleval of the purpos	State Telephe Iinance can ltems G8–G d by a licer tion data incommunityes.	ZIP Co one Check complete Section. In Puerto Finsed surveyor, in the Commeningssued BFE) or	here if attachments. ions A, B, C (or E), and lico only, enter meters engineer, or architects area below.) Zone AO.
he property owner or owner's authorized one AO must sign here. The statements roperty Owner or Owner's Authorized Rep ddress ignature comments he local official who is authorized by law of of this Elevation Certificate. Complete the who is authorized by law to certificate. In the information in Section C was who is authorized by law to certificate. In the following information (Items 14. Permit Number 15. This permit has been issued for:	SECTION G — COMMUNIT r ordinance to administer the comme e applicable item(s) and sign below. It staken from other documentation for elevation information. (Indicate the ection E for a building located in ZCG4—G9) is provided for community G5. Date Permit Issued New Construction Sections Sections Substate Section E for a building located in ZCG4—G9) is provided for community G5. Date Permit Issued	City Date Y INFORMATION Unity's floodplain mar Check the measuren that has been signed the source and date one A (without a FEM) floodplain manager G6.	Cone A (withoutle owledge. (OPTIONA) Inagement ordinent used in I did and sealed of the eleval A-issued or coment purpose Date Certific	State Telephe Iinance can ltems G8–G d by a licer tion data incommunityes.	ZIP Co one Check complete Section. In Puerto Finsed surveyor, in the Commeningssued BFE) or	here if attachments. ions A, B, C (or E), an Rico only, enter meters engineer, or architects area below.) Zone AO.
the property owner or owner's authorized one AO must sign here. The statements roperty Owner or Owner's Authorized Repoddress ignature omments the local official who is authorized by law or of this Elevation Certificate. Complete the statements who is authorized by law to certificate. Improved the statements of the information in Section C was who is authorized by law to certificate. Improved the statements of the following information (Items 14. Permit Number 15. This permit has been issued for: 16. Elevation of as-built lowest floor (incl.)	SECTION G — COMMUNIT resentative's Name SECTION G — COMMUNIT r ordinance to administer the comme e applicable item(s) and sign below. Is taken from other documentation (y elevation information. (Indicate tection E for a building located in ZC G4—G9) is provided for community G5. Date Permit Issued New Construction Substauding basement) of the building:	City Date Y INFORMATION Unity's floodplain mar Check the measuren that has been signed the source and date one A (without a FEM) floodplain manager G6.	(OPTIONA nagement ord nent used in I d and sealed of the eleva A-issued or coment purpos Date Certific	State State Telepholinance can litems G8–G d by a licertion data in community-es. ate Of Community-es. meters meters	ZIP Co one Check complete Sectification. In Puerto Finsed surveyor, in the Commentation of the Commentati	here if attachments. ions A, B, C (or E), and ico only, enter meters engineer, or architects area below.) Zone AO. ionancy Issued
he property owner or owner's authorized one AO must sign here. The statements roperty Owner or Owner's Authorized Repoddress ignature for this Elevation Certificate. Complete the who is authorized by law of this Elevation Certificate. Complete the who is authorized by law to certificate. If the information in Section C was who is authorized by law to certificate. If the following information (Items 12. A community official completed Section 13. The following information (Items 14. Permit Number 15. This permit has been issued for: 15. Elevation of as-built lowest floor (incl. 15. BFE or (in Zone AO) depth of flooding	SECTION G — COMMUNIT resentative's Name SECTION G — COMMUNIT r ordinance to administer the comme e applicable item(s) and sign below. Is taken from other documentation (y elevation information. (Indicate tection E for a building located in ZC G4—G9) is provided for community G5. Date Permit Issued New Construction Substauding basement) of the building:	City Date Y INFORMATION Unity's floodplain mar Check the measuren that has been signed the source and date one A (without a FEM) floodplain manager G6.	(OPTIONA nagement ord nent used in I d and sealed of the eleva A-issued or coment purpos Date Certific	State State Telepholinance can litems G8–G d by a licertion data in community-les. Tate Of Community-les.	ZIP Co one Check complete Sectification. In Puerto Finsed surveyor, in the Commentation of the Commentati	here if attachments. ions A, B, C (or E), and ico only, enter meters engineer, or architects area below.) Zone AO.
he property owner or owner's authorized one AO must sign here. The statements roperty Owner or Owner's Authorized Rep ddress ignature comments he local official who is authorized by law or of this Elevation Certificate. Complete the who is authorized by law to certificate. Improved the comments of the comment of the complete of the comment of the c	SECTION G — COMMUNIT resentative's Name SECTION G — COMMUNIT r ordinance to administer the comme e applicable item(s) and sign below. Is taken from other documentation (y elevation information. (Indicate tection E for a building located in ZC G4—G9) is provided for community G5. Date Permit Issued New Construction Substauding basement) of the building:	City Date Y INFORMATION Unity's floodplain mar Check the measuren that has been signed the source and date one A (without a FEM) floodplain manager G6.	(OPTIONA nagement ord nent used in I d and sealed of the eleva A-issued or coment purpos Date Certific	State State Telepholinance can litems G8–G d by a licertion data in community-es. ate Of Community-es. meters meters	ZIP Co one Check complete Sectification. In Puerto Finsed surveyor, in the Comment issued BFE) or inpliance/Occup Datum Datum	here if attachments. ions A, B, C (or E), and ico only, enter meters engineer, or architects area below.) Zone AO.
the property owner or owner's authorized one AO must sign here. The statements roperty Owner or Owner's Authorized Repuddress dignature comments the local official who is authorized by law or of of this Elevation Certificate. Complete the who is authorized by law to certificate. In the information in Section C was who is authorized by law to certificate. In the following information (Items 13. The following information (Items 14. Permit Number 15. This permit has been issued for: 15. Elevation of as-built lowest floor (incl. 16. BFE or (in Zone AO) depth of flooding 15. Community's design flood elevation: ocal Official's Name	SECTION G — COMMUNIT resentative's Name SECTION G — COMMUNIT r ordinance to administer the comme e applicable item(s) and sign below. Is taken from other documentation (y elevation information. (Indicate tection E for a building located in ZC G4—G9) is provided for community G5. Date Permit Issued New Construction Substauding basement) of the building:	City Date Y INFORMATION Unity's floodplain mar Check the measuren that has been signe the source and date one A (without a FEM of floodplain manager G6. Intial Improvement	(OPTIONA nagement ord nent used in I d and sealed of the eleva A-issued or coment purpos Date Certific	State State Telepholinance can litems G8–G d by a licertion data in community-es. ate Of Community-es. meters meters	ZIP Co one Check complete Sectification. In Puerto Finsed surveyor, in the Comment issued BFE) or inpliance/Occup Datum Datum	here if attachments. ions A, B, C (or E), and ico only, enter meters engineer, or architects area below.) Zone AO.
the property owner or owner's authorized one AO must sign here. The statements property Owner or Owner's Authorized Repuddress signature Comments The local official who is authorized by law of of this Elevation Certificate. Complete the who is authorized by law to certificate. Improved the comments of the information in Section C was who is authorized by law to certificate. The following information (Items 64. Permit Number	SECTION G — COMMUNIT resentative's Name SECTION G — COMMUNIT r ordinance to administer the comme e applicable item(s) and sign below. Is taken from other documentation (y elevation information. (Indicate tection E for a building located in ZC G4—G9) is provided for community G5. Date Permit Issued New Construction Substauding basement) of the building:	City Date Y INFORMATION Unity's floodplain mar Check the measuren that has been signethe source and date one A (without a FEM of floodplain manager floodplain man	(OPTIONA nagement ord nent used in I d and sealed of the eleva A-issued or coment purpos Date Certific	State State Telepholinance can litems G8–G d by a licertion data in community-es. ate Of Community-es. meters meters	ZIP Co one Check complete Sectification. In Puerto Finsed surveyor, in the Comment issued BFE) or inpliance/Occup Datum Datum	here if attachments. ions A, B, C (or E), and ico only, enter meters engineer, or architects area below.) Zone AO.

FEMA Form 086-0-33 (7/12) Replaces all previous editions.

☐ Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including A 963 James Street	ot., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number:	
City Gilchrist	State ZIP Code TX 77617	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.

Picture Taken: Jan 14, 2015



Picture Taken: Jan 14, 2015



BUILDING PHOTOGRAPHS

Continuation Page

IMPORTANT: In these spaces, copy t	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt 963 James Street	., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number:
City Gilchrist	State ZIP Code TX 77617	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.

Picture Taken: Jan 14, 2015



Picture Taken: Jan 14, 2015

