

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1E9.

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

SECTION A <input type="checkbox"/> PROPERTY INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name Kerry Dapaoli				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4803 Avenue O-1/2				Company NAIC Number:	
City Galveston		State TX		ZIP Code 77550	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 10 & pt Lot 9 Block 105 Denver Resurvey					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential					
A5. Latitude/Longitude: Lat. 29°17'06.9" N Long. 94°49'06.6" W Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 5					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) N/A sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A					
c) Total net area of flood openings in A8.b N/A sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage N/A sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A					
c) Total net area of flood openings in A9.b N/A sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No					
SECTION B <input type="checkbox"/> FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number City of Galveston 485469			B2. County Name Galveston		B3. State TX
B4. Map/Panel Number 485469 0022	B5. Suffix E	B6. FIRM Index Date 5/26/70	B7. FIRM Panel Effective/Revised Date 12/6/02	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 11
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

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OMB 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., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4803 Avenue O-1/2			Policy Number:
City Galveston	State TX	ZIP Code 77551	Company NAIC Number

SECTION C ■ BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations D Zones A1EA30, AE, AH, A (with BFE), VE, V1EV30, V (with BFE), AR, AR/A, AR/AE, AR/A1EA30, 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: COG BM(s) Vertical Datum: NAVD 88

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929 NAVD 1988 Other/Source: _____

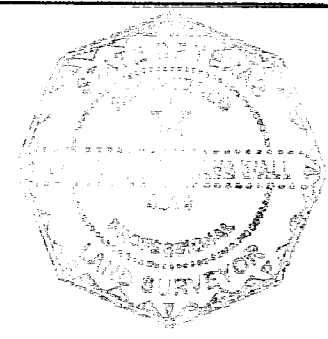

Datum used for building elevations must be the same as that used for the BFE.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>12.5</u>	feet
b) Top of the next higher floor	<u>N/A</u>	feet
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	feet
d) Attached garage (top of slab)	<u>N/A</u>	feet
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>12.5</u>	feet
f) Lowest adjacent (finished) grade next to building (LAG)	<u>9.1</u>	feet
g) Highest adjacent (finished) grade next to building (HAG)	<u>9.4</u>	feet
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>9.1</u>	feet

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.

Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments.

Certifier's Name Laurence C. Wall	License Number 4814		
Title RPLS			
Company Name TLTS, Inc.			
Address 1801 Moody Ave			
City Galveston	State TX		ZIP Code 77550
Signature 	Date 3/11/19	Telephone 409.765.8883	Ext.

Comments (including type of equipment and location, per C2(e), if applicable)

C2. e) = outside AC compressor = C2. a)