

**Federal Emergency Management Agency
ELEVATION CERTIFICATE
IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16**

OMB Control Number 1660-0006
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		FORM INSURANCE COMPANY USE	
A1 Building Owner's Name Edward & Eve Monteith			Policy Number
A2 Building Street Address (including Apt. Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2319 Avenue M			Company NAIC Number
City Galveston	State TX	Zip Code 77550	
A3 Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) part NE Outlot 17 City of Galveston			
A4 Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential			
A5 Latitude/longitude: Lat. 29°17'49.3" N Long 94°47'30.3" 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 6			
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) 2319 sq. ft.	a) Square footage of attached garage N/A sq. ft.		
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 10 feet above adjacent grade 0	b) Number of permanent flood openings in the attached garage within 10 feet above adjacent grade N/A		
c) Total net area of flood openings in A8 a) 0 sq. ft.	c) Total net area of flood openings in A9 b) N/A sq. ft.		
d) Engineered flood openings? <input checked="" type="radio"/> Yes <input type="radio"/> No	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 Galveston		B2 County Name Galveston	B3 State TX
B4 Map/Panel Number 485469 0026	B5 Suffix E	B6 FIRM Index Date 12/6/02	B7 FIRM Panel Effective / Revised Date 12/6/02
		B8 Flood Zone(s) AE	B9 Base Flood Elevation(s) (Zone AE, 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="radio"/> FIS Profile <input checked="" type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other Source			
B11 Indicate elevation datum used for BFF in Item B9: <input type="radio"/> NGVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> Other Source			
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			
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. * A new Elevation Certificate will be required when construction of the building is complete.			
Benchmark Utilized COG BM(s)	Vertical Datum NAVD 88		
Indicate elevation datum used for the elevations in Items a) through h): <input type="radio"/> NGVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> Other Source			
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)	8	7	<input checked="" type="radio"/> feet <input type="radio"/> meters
b) Top of the next higher floor	17	5	<input checked="" type="radio"/> feet <input type="radio"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	N	A	<input checked="" type="radio"/> feet <input type="radio"/> meters
d) Attached garage (top of slab)	N	A	<input checked="" type="radio"/> feet <input type="radio"/> meters
e) Lowest elevation of machinery or equipment serving the building (Describe type of equipment and location in Comments)	9	2	<input checked="" type="radio"/> feet <input type="radio"/> meters
f) Lowest adjacent finished grade next to building (LAG)	8	5	<input checked="" type="radio"/> feet <input type="radio"/> meters
g) Highest adjacent finished grade next to building (HAG)	8	7	<input checked="" type="radio"/> feet <input type="radio"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs (including structural support)	8	5	<input checked="" type="radio"/> feet <input type="radio"/> meters

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 1007.

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

Certifier's Name: **Laurence C. Wall** License Number: **4812**

Title: **RPLS** Company Name: **TLTS, Inc**

Address: **1801 Moody Avenue** City: **Galveston** State: **TX** Zip Code: **77550**

Signature: *Laurence C. Wall* Date: **4/8/16** Telephone: **409.765.8883**



Copy both sides 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):
Elevation for 2319 Avenue M only

Signature: *Laurence C. Wall* Date: **4/8/16**

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 _____ feet / _____ meters above or below the HAG

b) Top of bottom floor (including basement, crawlspace or enclosure) is _____ feet / _____ meters above or below the LAG

E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A items 5 and/or 6 (see pages 8-9 of Instructions), the next higher floor (elevation C2 b) in the diagrams) of the building is: _____ feet / _____ meters above or below the HAG

E3. Attached garage (top of slab) is: _____ feet / _____ meters above or below the HAG

E4. Top of platform or machinery and/or equipment serving the building is: _____ feet / _____ meters above or 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? Yes No Unknown. The local official must certify this information in Section C.

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: _____

Address: _____ City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____ Telephone: _____

Comments: _____

Check here if attachments

BUILDING PHOTOGRAPHS

(See instructions for Item A6)

FEMA Control Number: 1660-0038
Expiration: 1/31/2018

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.)		Policy Number	
2319 Avenue M			
City	State	Zip Code	Company NAIC Number
Galveston	TX	77550	

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 foot openings or vents, as indicated in Section A6. If submitting more photographs than will fit on this page, use the Continuation Page.

April 8, 2016



<<< front



C2: e) = AC >>>