OMB No. 1660-0008

Expiration Date: November 30, 2022

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

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 FOR INSURANCE COMPANY USE						
SECTION A – PROPERTY INFORMATION  A1. Building Owner's Name			Policy Numb			
SCS Job# 22-0688			Folicy Numic	JEI.		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 976 Albatross Lane				Company N	AIC Number:	
City	State					
Crystal Beach		TX		77650		
A3. Property Description (Lot and Bloc		_	· ·	)		
GCAD: 4050-0000-0122-001 L	EGAL: Tract 122-A, HO	LIDAY BEAC	:H 			
A4. Building Use (e.g., Residential, No	on-Residential, Addition,	Accessory, e	tc.) RESIDENTIA	L.		
A5. Latitude/Longitude: Lat. 29°	'28'01.4" Long.	94°36'15.6	' Horizontal	Datum: 🔲 NAD 1	927 🛭 NAD 1983	
A6. Attach at least 2 photographs of the	ne building if the Certifica	ate is being u	sed to obtain flood	insurance.		
A7. Building Diagram Number 5 (FIV	<u>(E)</u>					
A8. For a building with a crawlspace o	or enclosure(s):					
a) Square footage of crawlspace	or enclosure(s)	NA	sq ft			
b) Number of permanent flood ope	enings in the crawlspace	or enclosure	 (s) within 1.0 foot a	above adjacent gra	de NA	
c) Total net area of flood openings	s in A8.b NA	sq in				
d) Engineered flood openings?	☐ Yes ☑ No					
, , , , , , , , , , , , , , , , , , , ,						
A9. For a building with an attached garage:						
a) Square footage of attached gar	-	sq ft				
b) Number of permanent flood ope	enings in the attached ga	arage within 1	.0 foot above adja	cent grade	NA	
c) Total net area of flood openings	s in A9.b NA	sq	in			
d) Engineered flood openings?	☐ Yes 🕢 No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Commu	B2. County Name			B3. State		
Galveston County, (Unincorp.) - 4854	Galveston			TX - TEXAS		
	Date Effe	M Panel ective/ rised Date	Zone(s) (Zone AO, use Base Flood Dep		evation(s) e Base Flood Depth)	
48167C 0328 G Au	ug 15, 2019 Aug	15, 2019	VE		15'	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:  [ FIS Profile  FIRM  Community Determined  Other/Source:						
B11. Indicate elevation datum used for BFE in Item B9:   NGVD 1929  NAVD 1988  Other/Source:						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🔽 No						
Designation Date: CBRS OPA						

## **ELEVATION CERTIFICATE**

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MPORTANT: In these spaces, copy the corresponding information from Section A.			_	FOR INSURANCE COMPANY UP Policy Number:	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 976 Albatross Lane					
		e lin 1990 and	Company NAIC Number		
ty Crystal Beach	Texas	77650	TOTAL OF		
	DING ELEVATION IN	FORMATION (S	URVEY RE	QUIRED)	in Building Own
C1. Building elevations are based on:	onstruction Drawings*	Building Un	der Construc	ction*  Finis	hed Construction
*A new Elevation Certificate will be require	d when construction of	the building is co	mplete.	pulsar) ersibt A	
C2. Elevations – Zones A1–A30, AE, AH, A (w Complete Items C2.a–h below according t Benchmark Utilized: HGCSD 64	o the building diagram s	V (with BFE), AR specified in Item A A Datum: NAVD	A7. In Puerto	Rico only, enter	AR/AH, AR/AO. meters.
Indicate elevation datum used for the elevation	ations in items a) through	jh h) below.			
☐ NGVD 1929 📝 NAVD 1988 [					
Datum used for building elevations must b			T BOOK		
JAITINE	cersory etc.) RESID	A modes A Jedni	21.3		easurement used
a) Top of bottom floor (including basemer	nt, crawlspace, or enclos	sure floor)	NA NA	feet	meters
b) Top of the next higher floor		attending Tools in		feet	meters
c) Bottom of the lowest horizontal structure	al member (V Zones or	nly)	19.4	✓ feet	meters
d) Attached garage (top of slab)			NA	✓ feet	meters
<ul> <li>e) Lowest elevation of machinery or equip (Describe type of equipment and location</li> </ul>	oment servicing the build on in Comments)	ding	21.2	✓ feet	meters
f) Lowest adjacent (finished) grade next t	o building (LAG)		5.9	✓ feet	meters
g) Highest adjacent (finished) grade next	to building (HAG)	in esequivers and	6.4	√ feet	meters
h) Lowest adjacent grade at lowest elevat structural support	FH DC	cluding	6.4	✓ feet	meters
	RVEYOR, ENGINEER,	OR ARCHITEC	T CERTIEI		
This certification is to be signed and sealed by certify that the information on this Certificate retatement may be punishable by fine or imprison.  Were latitude and longitude in Section A provid	epresents my best effor onment under 18 U.S. C	ts to interpret the Code, Section 100	data availat	ole. I understand	vation information that any false re if attachments.
Certifier's Name	License Nu	mber	distribute	Tree-	
1ichael Hoover				Dalming /	TAN
itle				FIE	OF TEN
egistered Professional Land Surveyor (RPLS)		WARUSHI GOO	.P - 8 HOL	10. 2E	A PO TO
Company Name	Branch Registration Number		A A CUA	EL HOOVED	
past Surveyors, LLC 10194703		MICHA	EL HOUVER		
ddress				Ty. Por	5423
75 Lazy Lane West	DOMESTIC STATES	MINER SEE SEE	DELL MARIE	10	SURVE
City Crystal Beach	State	ZIP Co	ode	1	YA
**	TX	77650		11 5 1	Tera_ ordin
signature MAVOVII	Date Jun 8, 2022	Teleph (409)	one 684-6400	Ext.	
opy all pages of this Elevation Certificate and all	attachments for (1) com	munity official. (2)	insurance ad	gent/company an	d (3) building owr
	ation, per C2(e), if applual to NAVD 1988. (NGVD			ones multiply models	eda aiseibel 17

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**ELEVATION CERTIFICATE** 

## **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

		Expiration Date. November 60, 2022		
IMPORTANT: In these spaces, copy the corresponding information from Section A.				
t., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:		
State	ZIP Code	Company NAIC Number		
Texas	77650	A STATE OF THE STA		
	t., Unit, Suite, and/or Bldg. No.) State	t., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  State ZIP Code		

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



Photo Two

SCS Job# 22-0688

## **BUILDING PHOTOGRAPHS**

Continuation Page

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**ELEVATION CERTIFICATE** 

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
Building Street Address (including A 976 Albatross Lane	pt., Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.	Policy Number:	
City	State	ZIP Code	Company NAIC Number	
Crystal Beach	Texas	77650	Roneld Ippay(1)	

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 Three

Photo Three Caption Side



Photo Four

Photo Four Caption Rear