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 A – PROPERTY INFORMATION FO					FOR INSURANCE COMPANY USE		
A1. Building Owner's Name Barber, Sandra Dale & Hutchinson, Gloria Nell					Policy Number:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or R0. Route and Box No. 662 Water View Drive					Company NAIC		
City Livingston State TX ZIP Cod						351	
A3. Property Description (Lot and Block Numbers, Tax 6 Crescent Shores, Block 9, Lot 18 and South	east 1/2 of Lo	t 19					
 A4. Building Use (e.g., Residential, Non-Residential, Ad. A5. Latitude/Longitude: Lat. N30d43'13.0" A6. Attach at least 2 photographs of the building if the A7. Building Diagram Number 1B	Long Certificate is be n/a ace or de	W095d06'23.6'	A9. For a a) So b) No wi c) To	surance. building with an att quare footage of at	tached garage at flood openie adjacent gra d openings in	e: n/a sq ft ngs in the attached garage de	
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Community Name & Community Number		32. County Name	-	INTORNALIC	714	B3. State	
Polk County - 480526 B4. Map/Panel Number B5. Suffix B6. FIRM II		Pok B7. FIRM Panel E		B8. Flood Zone(s) RO Race	TX e Flood Elevation(s) (Zone	
	3/2010	Revised Date 09/03/20		A & X unshade	AO, t	use base flood depth) 135.0'	
B10 Indicate the source of the Base Flood Flevation (BFF) data or base flood depth entered in Item B9:							
☐ FIS Profile ☐ FIRM ☑ Community Determined ☐ Other/Source: Community Determined - See letter attached 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							
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)							
C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* *A new Elevation Certificate will be required when construction of the building is complete. 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/A0. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.							
C2.a-h below according to the building diagram sp Benchmark Utilized: Surface elevation - Livings				er meters. GVD 1929			
Indicate elevation datum used for the elevations in Datum used for building elevations must be the sa	items a) through	gh h) below. 🛛		9 NAVD 1988			
a) Top of bottom floor (including basement, crawls)	oace, or enclosi	ure floor)1	43 . 8		leasurement		
b) Top of the next higher floor				feet	meters	5	
c) Bottom of the lowest horizontal structural memi	oer (V Zones on	ly)		feet	meters	3	
d) Attached garage (top of slab)				fee	meters	3	
e) Lowest elevation of machinery or equipment se (Describe type of equipment and location in Cor	nments)	6	42 . 6	X fee			
f) Lowest adjacent (finished) grade next to building			41 . <u>3</u> 43 . 5	X feet			
 g) Highest adjacent (finished) grade next to buildir h) Lowest adjacent grade at lowest elevation of de 		4	41 3	X fee			
structural support	or or stand, me	idding			Пинетен		
SECTION D - SU	IRVEYOR, EN	GINEER, OR A	RCHITE	CT CERTIFICAT	ON		
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.							
 ☒ Check here if comments are provided on back of form. ☒ Check here if attachments. 	. Were latit			on A provided by a	1	OF TO	
Certifier's Name Jeffrey N. Heck			License N 4385	Number	JA.	AAL SO	
Title Registered Professional Land Surveyor	Company Give'm	Name Heck, Inc.			18:3	CTTHEYER HECK	
Address P.O. Box 78	City HIllister		State TX	ZIP Code 77624	IB.	100 FE 2 2 10 10 10 11 1	
Signature	Date 09/13/2		Telephone (409) 33		JA.	SURVE	

	he corresponding information from Sect					COMPANY USE
Building Street Address (including Apt 662 Water View Drive	., Unit, Suite, and/or Bldg. No.) or P.O. Ro	ute and Box No.		Pol	icy Number:	
ity Livingston	State TX	ZIP Code 77351		Coi	mpany NAIC Nun	nber:
	N D - SURVEYOR, ENGINEER, OR	ARCHITECT CER	TIFICAT	ION (CONT	(INUED)	
	tificate for (1) community official, (2) insu		NAME AND ADDRESS OF THE OWNER, TH	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	THE RESIDENCE OF THE PERSON NAMED IN THE PERSO	galagus and albasian enclosed paga provides personal automatels enclosed an anti-
	ude by "Garmin" hand-held gps 2) S					\ nroyidad by tha
Trinity River Authority	of Texas at the Lake Livingston Dan r on pad on right side of house					
Signature , , , , , , , , , , , , , , , , , , ,	/	Date 09/13/20)13			
SECTION E - BUILDING ELL	EVATION INFORMATION (SURVEY	NOT REQUIRED)	FOR ZO	NE AO AN	D ZONE A (WITHOUT BFE)
For Zones AO and A (without BFE), con For Items E1–E4, use natural grade, it	mplete Items E1–E5. If the Certificate is i f available. Check the measurement used	ntended to support . In Puerto Rico onl	a LOMA o y, enter m	or LOMR-F red eters.	quest, complet	te Sections A, B,and
Provide elevation information for t grade (HAG) and the lowest adjace	he following and check the appropriate beent grade (LAG).	oxes to show wheth	er the ele	vation is abo	ove or below th	e highest adjacent
a) Top of bottom floor (including b	asement, crawlspace, or enclosure) is .		toward.	meters	above or	below the HAG.
, , ,	accinionity dramapardy or anarodana, ie			meters		☐ below the LAG.
2. For Building Diagrams 6–9 with pe	ermanent flood openings provided in Sect	ion A Items 8 and/o	or 9 (see p	pages 8-9 of	f Instructions),	
the next higher floor (elevation C2	.b in the diagrams) of the building is		feet	meters	-	below the HAG.
3. Attached garage (top of slab) is			feet	meters	above or	below the HAG.
4. Top of platform of machinery and	or equipment servicing the building is .	* *************************************	feet	☐ meters	above or	below the HAG.
	imber is available, is the top of the botton Unknown. The local official must certify t			e with the co	mmunity's floo	odplain management
SECTIO	N F - PROPERTY OWNER (OR OW	NER'S REPRESE	NTATIV	E) CERTIFI	CATION	
The property owner or owner's author	N F – PROPERTY OWNER (OR OW ized representative who completes Sections In Sections A, B, and E are correct to	ns A, B, and E for Z	one A (wit		THE RESIDENCE OF THE PARTY OF T	mmunity-issued BFE)
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BUILDING PHOTOGRAPHS

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A.		FOR INSURANCE COMPANY USE
Building Street Address (including Apt 662 Water View Drive	, Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number:
City Livingston	State ZIP Code TX 77351	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.



FRONT VIEW 09/13/2013



TEAR VIEW 09/13/2013