

SURVEYOR'S NOTE(S):
 THIS SURVEY MEETS THE CURRENT STANDARDS OF THE TEXAS SOCIETY OF PROFESSIONAL SURVEYORS STANDARDS AND SPECIFICATION FOR A CATEGORY 1A, CONDITION II SURVEY.

THE SETBACKS AND EASEMENTS SHOWN ON THIS DRAWING ARE THE BEST INTERPRETATION OF THE SURVEYORS BASED ON THE INFORMATION AVAILABLE TO US AT THE TIME OF THE DRAWING.

THIS SURVEY IS BASED ON A TITLE COMMITMENT REPORT ISSUED BY COMMONWEALTH LAND TITLE INSURANCE COMPANY GF NO. CW-3503-2635032200074 ISSUED ON 02/22/22.

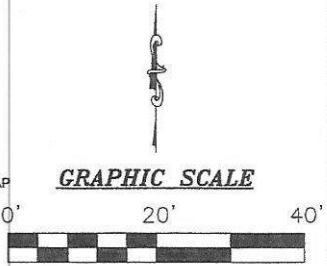
BASIS OF BEARINGS, TEXAS SOUTH CENTRAL NAD 83.

EASEMENT AS RECORDED IN CLERK'S FILE NO. U838965, U869422, T871769, T871770, T871771, HARRIS COUNTY, TEXAS.

LINE	BEARING	DISTANCE
L1	S 89°53'54" E	14.14'
L2	N 87°45'16" E	14.14'
L3	S 44°53'54" E	30.00'
L4	S 47°14'36" E	30.00'

LEGEND

- These standard symbols will be found in the drawing.
- BOUNDARY LINE
 - - - - - EASEMENT LINE
 - - - - - BUILDING SETBACK LINE
 - ||-||-|| WOOD FENCE
 - ⊕ FOUND PK NAIL
 - ⊙ SET 1/2" IRON ROD WITH CAP
 - FOUND IRON ROD
 - CM CONTROL MONUMENT



FLOOD INFORMATION
 FIRM: 48201C PANEL: 0230 L
 REV. DATE: 06/18/2007
 ZONE: "AE"

FLOOD INFORMATION PROVIDED HEREON IS BASED ON SCALING THE LOCATION OF THE SUBJECT TRACT ON THE FLOOD INSURANCE RATE MAPS, THE INFORMATION SHOULD BE USED TO DETERMINE FLOOD INSURANCE RATES ONLY AND IS NOT INTENDED TO IDENTIFY SPECIFIC FLOODING CONDITIONS. WE ARE NOT RESPONSIBLE FOR THE F.I.R.M.'S ACCURACY.

I, **RODRIC R REESE**, a Registered Professional Land Surveyor in the State of Texas, do hereby certify to **COMMONWEALTH TITLE OF HOUSTON**

and that the above map is true and correct according to an actual field survey, made by me or under my supervision, of the property shown hereon or described by field notes accompanying this drawing. I further certify that all easements and rights-of-way of which I have been advised are shown hereon and that, except as shown, there are no apparent visible encroachments, no apparent visible overlapping of improvements and no apparent discrepancies or conflicts in the boundary lines, as of the date of the field survey.

Borrower: _____
 Address: **21511 CHERRY CANYON LN., TOMBALL, TX 77375** GF No. **CW-3503-2635032200074**

Legal Description of the Land: LOT EIGHT-EIGHT (88), BLOCK ONE (1), OF SUGARBERRY PLACE PHASE 2, A SUBDIVISION IN HARRIS COUNTY, TEXAS, ACCORDING TO THE MAP OR PLAT THEREOF RECORDED AT FILM CODE NO. 476139 OF THE MAP RECORDS OF HARRIS COUNTY, TEXAS.

SUBJECT TO RESTRICTIVE COVENANTS AND/OR EASEMENTS RECORDED IN: FILM CODE NO. 476139, MAP RECORDS, HARRIS COUNTY, TEXAS CLERK'S FILE NO(S): 1335704, 201100315710, 201104043024, 201102282336, 201105102659, 20130637571, 20150073054, 19-201-40777, 19-201-00400, 19-201-00491, 19-201-00631, 19-201-00696, 19-201-00981, 19-201-00994, HARRIS COUNTY, TEXAS

PROPERTY PHOTOGRAPH:



LAND TITLE SURVEY

JOB NO.:	2203032396	NO.	REVISION	DATE
DATE:	03/03/22			
DRAWN BY:	IK			
APPROVED BY:	RRR			



FIRM REGISTRATION NO. 10190700
 THIS SURVEY IS CONTRACTED TO RODRIC R REESE, RPLS
 PHONE NUMBER 713-647-1315

RODRIC R REESE, R.P.L.S.
 Registered Professional Land Surveyor
 Registration No. **5883**

Overland Consortium Inc. Surveyors
 Tel: 281-940-8869 Fax: 281-207-6476
 999 E. BASSE ROAD, SUITE 180 BOX 521, SAN ANTONIO, TEXAS 78212

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	
A1. Building Owner's Name C. & G. Investments LP					Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 21511 Cherry Canyon Ln.					Company NAIC Number:	
City Houston		State Texas		ZIP Code 77375		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot Eight-Eight (88), Block One (1), Sugarberry Place Phase 2						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Vacant Land</u>						
A5. Latitude/Longitude: Lat. <u>30° 4'0.65"N</u> Long. <u>95°34'39.35"W</u> 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 _____						
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 <u>N/A</u>						
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 <u>N/A</u>						
c) Total net area of flood openings in A9.b _____ N/A sq in						
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number City of Houston 480296				B2. County Name Harris		B3. State Texas
B4. Map/Panel Number 48201C0230	B5. Suffix L	B6. FIRM Index Date	B7. FIRM Panel Effective/ Revised Date 06-18-2007	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 152.0 (500 years)	
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						

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. 21511 Cherry Canyon Ln.			Policy Number:	
City Houston	State Texas	ZIP Code 77375	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 – 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.

Benchmark Utilized: RM120050 - ELEV. 149.56 Vertical Datum: NAVD 1988, 2001 Adj.

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.


Check the measurement used.

- | | | | |
|---|-------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) _____ | N/A | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor _____ | N/A | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) _____ | N/A | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab) _____ | N/A | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building
(Describe type of equipment and location in Comments) _____ | N/A | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) _____ | 147.0 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) _____ | 146.9 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____ | N/A | <input type="checkbox"/> feet | <input type="checkbox"/> 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 1001.

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

Certifier's Name Rodric R. Reese	License Number 5883		
Title Project Surveyor			
Company Name Overland surveyors			
Address 1528 W. Contour Dr., Suite 204			
City San Antonio	State Texas		ZIP Code 78212
Signature <i>Rodric R. Reese</i>	Date 5.5.22	Telephone (281) 940-8869	Ext.

Copy all pages of this Elevation Certificate and all attachments 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 CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2022

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. 21511 Cherry Canyon Ln.			Policy Number:
City Houston	State Texas	ZIP Code 77375	Company NAIC Number

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 8 and/or 9 (see pages 1–2 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 of machinery and/or equipment servicing 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 G.

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	<input type="checkbox"/> Check here if attachments.
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ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2022

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. 21511 Cherry Canyon Ln.			Policy Number:
City Houston	State Texas	ZIP Code 77375	Company NAIC Number

SECTION G – COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4–G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
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- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters Datum _____
- G10. Community's design flood elevation: _____ feet meters Datum _____

Local Official's Name	Title
Community Name	Telephone
Signature	Date

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

Check here if attachments.

BUILDING PHOTOGRAPHS

OMB No. 1660-0008
Expiration Date: November 30, 2022

ELEVATION CERTIFICATE

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., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 21511 Cherry Canyon Ln.			Policy Number:
City Houston	State Texas	ZIP Code 77375	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.



Photo One

Photo One Caption Front (05/05/2022)

Clear Photo One

Photo Two

Photo Two

Photo Two Caption Rear (xx/xx/20xx)

Clear Photo Two

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008
Expiration Date: November 30, 2022

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. 21511 Cherry Canyon Ln.			Policy Number:
City Houston	State Texas	ZIP Code 77375	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.

Photo Three

Photo Three

Photo Three Caption Right Side (xx/xx/20xx)

Clear Photo Three

Photo Four

Photo Four

Photo Four Caption Left Side (xx/xx/20xx)

Clear Photo Four