

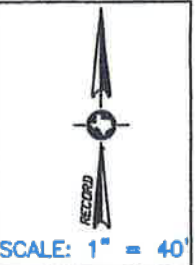


Per Plat (GCMR)
 20' Front B.L.
 15' Front U.E. & D.E.
 50' Rear D.E.
 20' Rear Maintenance & Access Esmt.
 10' Rear B.L.
 5' Side B.L.

Per 2014034769 (OPRGCTx)
 15' Rear B.L.
 5' Side B.L.
 B.L. = Building Line
 U.E. = Utility Esmt.
 D.E. = Drainage Esmt.

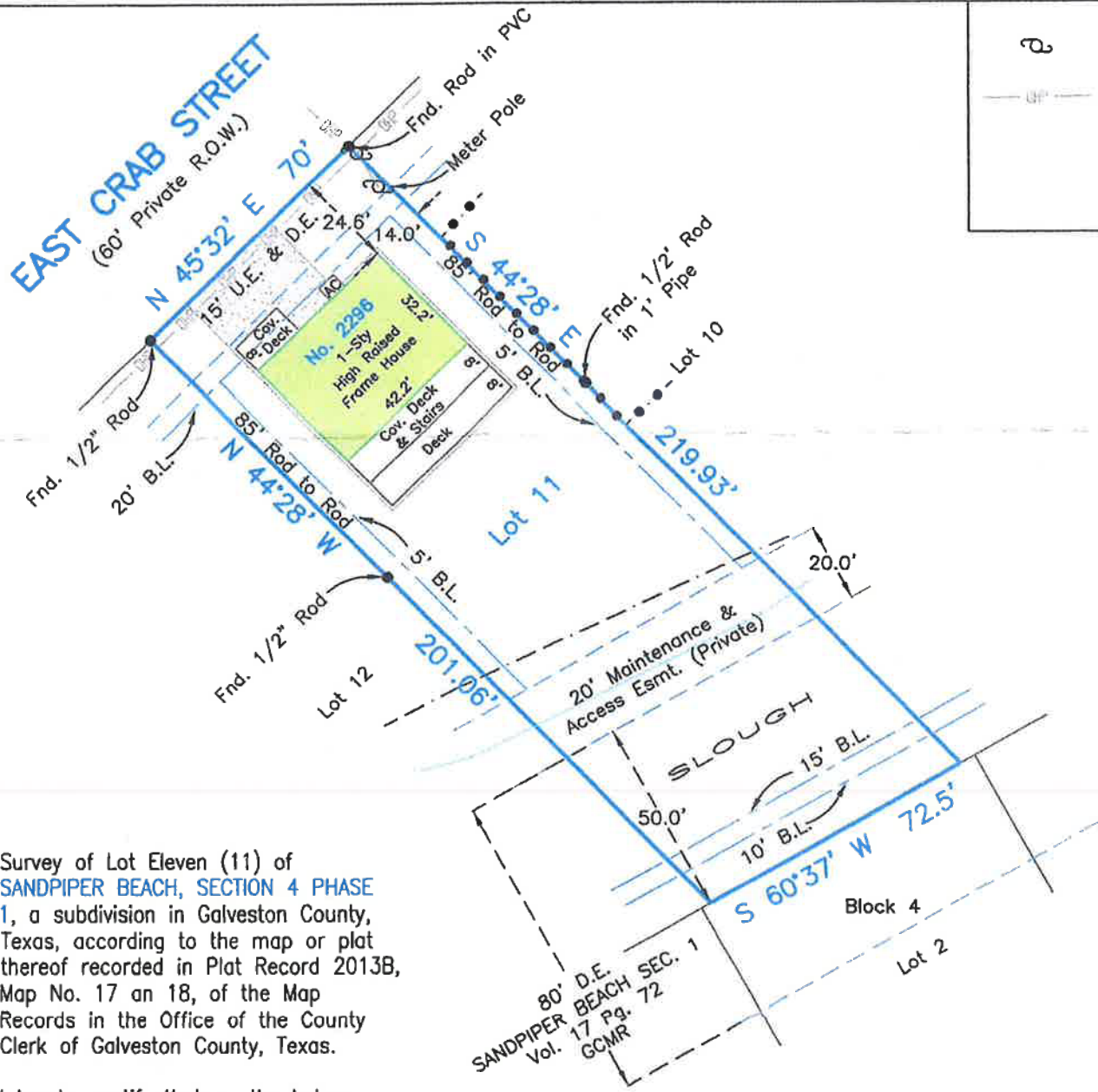
LEGEND

	Boundary Line
	Building Line
	Building Line (Esmt)
	High Bank
	Water's Edge
	Chain Link Fence
	Concrete



2296 East Crab Street, Crystal Beach, TX 77650

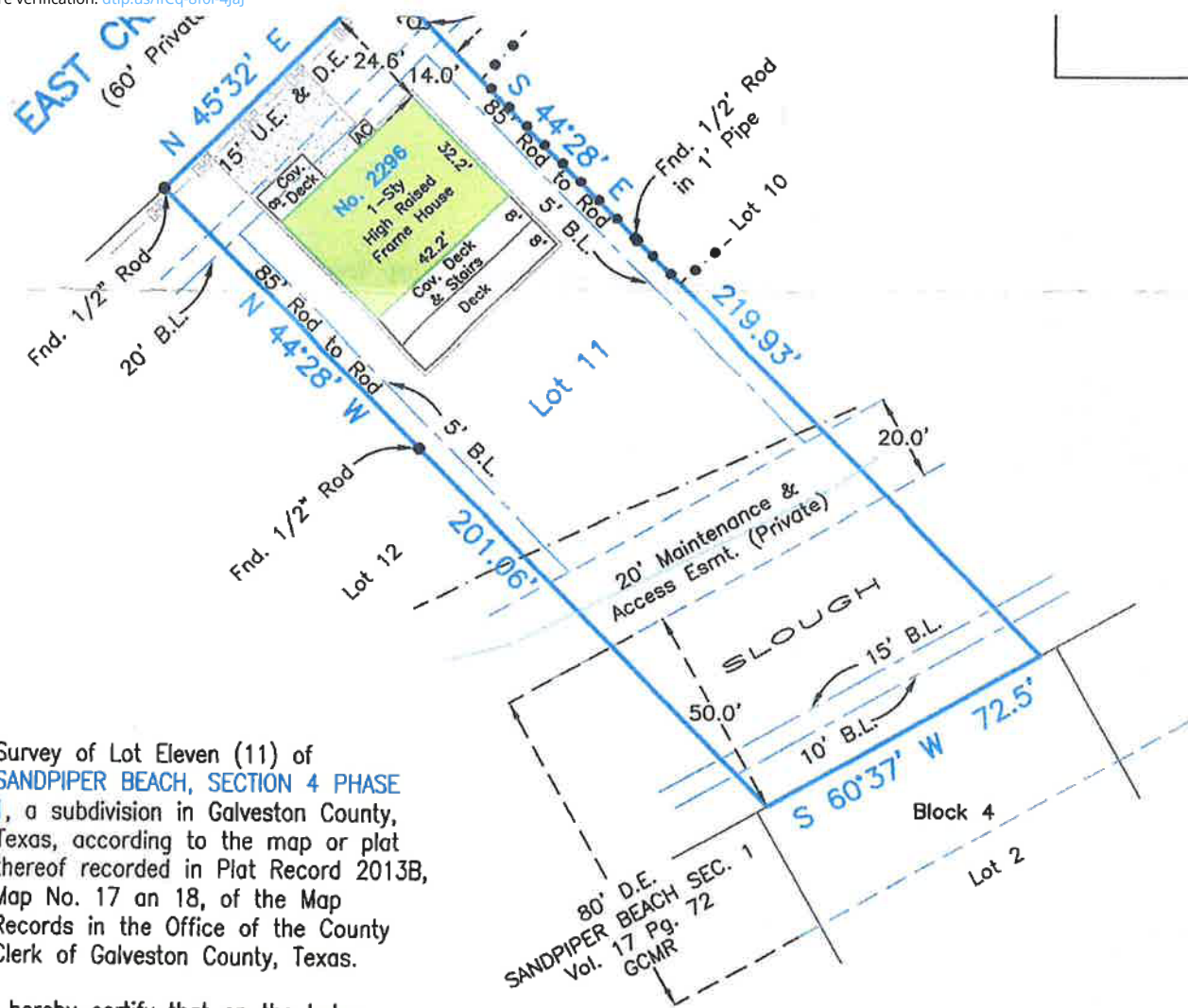
	Power Pole
	Overhead Power



Survey of Lot Eleven (11) of SANDPIPER BEACH, SECTION 4 PHASE 1, a subdivision in Galveston County, Texas, according to the map or plat thereof recorded in Plat Record 2013B, Map No. 17 and 18, of the Map Records in the Office of the County Clerk of Galveston County, Texas.

I hereby certify that on the below date, the herein described property, together with improvements located thereon, was surveyed on the ground and under my direction, and that this map, together with dimensions as shown hereon, accurately represents the facts as found on the ground this date.

Brene Addison
 Brene Addison



Survey of Lot Eleven (11) of SANDPIPER BEACH, SECTION 4 PHASE 1, a subdivision in Galveston County, Texas, according to the map or plat thereof recorded in Plat Record 2013B, Map No. 17 and 18, of the Map Records in the Office of the County Clerk of Galveston County, Texas.

I hereby certify that on the below date, the herein described property, together with improvements located thereon, was surveyed on the ground and under my direction, and that this map, together with dimensions as shown hereon, accurately represents the facts as found on the ground this date.

Dustin Mahorney
 dotloop verified
 10/08/21 11:15 AM CDT
 OSRD-UJUG-XLON-HZPW

Brenee Addison
 Brenee Addison
 Registered Professional
 Land Surveyor No. 6598



COASTAL SURVEYING OF TEXAS, INC.
 P.O. BOX 2742 (mailing) ph (409) 684-6400
 CRYSTAL BEACH, TX 77650 fx (409) 684-6112
 975 LAZY LANE WEST, CRYSTAL BEACH
 Firm Registration Certificate No. 10026601
 SURVEYGALVESTON.COM



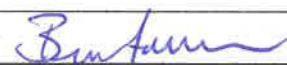
- NOTES:**
- 1) Bearings based on Monumentation of South R.O.W. line of East Crab Street.
 - 2) This property does lie within the 100 Year Flood Plain as established by the Federal Emergency Management Agency.
 - 3) This property is subject to any restrictions of record and may be subject to setbacks from power lines as established by OSHA (call your power company).

SURVEY DATE	September 29, 2016
FILE No.	6278-1000-0011-000
DRAFTING	ms
JOB No.	16-0867

Surveyed without the benefit of a Title Report.

ELEVATION CERTIFICATE, page 2

OMB Control Number: 1660-0008
Expiration: 11/30/2018

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. 2296 East Crab Street			Policy Number:	
City Crystal Beach	State TX	Zip Code 77650	Company NAIC Number:	
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.				
<input type="checkbox"/> Check here if attachments.			Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Certifier's Name Brene Addison brene@surveygalveston.com		License Number 6598		
Title Registered Professional Land Surveyor		Company Name Coastal Surveying of Texas, Inc.		
Address 975 Lazy Lane West - PO Box 2742		City Crystal Beach	State TX	Zip Code 77650
Signature 		Date Sep 28, 2016	Telephone (409) 684-6400	
				
Copy all pages 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) A5: Lat. and Long. derived from Coastal Surveying of Texas, Inc. GIS database and is centroid of parcel. C2e: REFERS TO THE TOP OF AN AIR CONDITIONER DECK.				
Signature 		CST Job# 16-0867 Date Sep 28, 2016		
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 _____ . _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ . _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the LAG.				
E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ . _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
E3. Attached garage (top of slab) is _____ . _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
E4. Top of platform of machinery and /or equipment servicing the building is _____ . _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> 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? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> 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.				

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. 2296 East Crab Street			Policy Number:
City Crystal Beach	State TX	Zip Code 77650	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.

Picture Taken: 09-28-2016



Picture Taken: 09-28-2016



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. 2296 East Crab Street			Policy Number:
City Crystal Beach	State TX	Zip Code 77650	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.

Picture Taken: 09-28-2016



Picture Taken: 09-28-2016

