

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:
BUILDING OWNER'S NAME Robert J and Gabriella M McAmis			Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 2019 West Indies Court			Company NAIC Number
CITY Nassau Bay	STATE TX	ZIP CODE 77058	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 18, Block 31, Nassau Bay Section 8			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential			
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-##.###" or ###.####")		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____

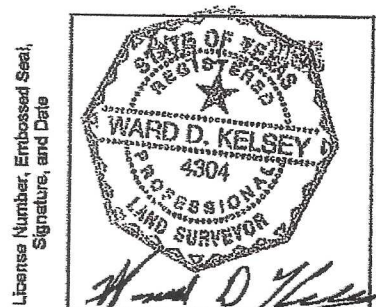
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER City of Nassau Bay 485491		B2. COUNTY NAME Harris		B3. STATE Texas	
B4. MAP AND PANEL NUMBER 48201C 1090	B5. SUFFIX L	B6. FIRM INDEX DATE 30Sep2004	B7. FIRM PANEL EFFECTIVE/REVISED DATE 30Sep2004	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 12

- B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe): _____
- B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe): 2001 Adjustment
- B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date _____

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. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- C3. 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 C3-a-i below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
 Datum 1988 Conversion/Comments 2001 Adjustment
 Elevation reference mark used 010040 Does the elevation reference mark used appear on the FIRM? Yes No
- a) Top of bottom floor (including basement or enclosure) 11. 8 ft.(m)
 - b) Top of next higher floor _____ ft.(m)
 - c) Bottom of lowest horizontal structural member (V zones only) _____ ft.(m)
 - d) Attached garage (top of slab) 11. 4 ft.(m)
 - e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 10. 9 ft.(m)
 - f) Lowest adjacent (finished) grade (LAG) 10. 3 ft.(m)
 - g) Highest adjacent (finished) grade (HAG) 11. 1 ft.(m)
 - h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 0
 - i) Total area of all permanent openings (flood vents) in C3.h _____ sq. in. (sq. cm)



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 in Sections A, B, and C 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.

CERTIFIER'S NAME Ward D. Kelsey LICENSE NUMBER 4304

TITLE Registered Professional Land Surveyor		COMPANY NAME Arrow Surveying	
ADDRESS P. O. Box 410	CITY Pearland	STATE TX	ZIP CODE 77588
SIGNATURE <i>Ward D. Kelsey</i>	DATE AUG 11 2009	TELEPHONE 281.412.2294	