

U.S. DEPARTMENT OF HOMELAND SECURITY  
Federal Emergency Management Agency  
National Flood Insurance Program

OMB Control No. 1650-0008  
Expiration Date: 06/30/2026

**ELEVATION CERTIFICATE**

**IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11**

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: <u>David Leon 4T 28,088A.eI</u>	Policy Number: _____
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>471 Buffalo Trail</u>	Company NAIC Number: _____
City: <u>Angleton</u> State: <u>TX</u> ZIP Code: <u>77515</u>	
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: <u>Lot 37, Block 3, Bar X Ranch, Section 5, Brazoria County, Texas</u>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): <u>Proposed</u>	
A5. Latitude/Longitude: Lat. <u>29.115722N</u> Long. <u>95.540355W</u> Horiz. Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983 <input type="checkbox"/> WGS 84	
A6. Attach at least two and when possible four clear color photographs (one for each side) of the building (see Form pages 7 and 8).	
A7. Building Diagram Number: _____	
A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s): <u>na</u> sq. ft. b) Is there at least one permanent flood opening on two different sides of each enclosed area? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>na</u> Engineered flood openings: <u>na</u> d) Total net open area of non-engineered flood openings in A8.c: <u>na</u> sq. in. e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructions): <u>na</u> sq. ft. f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): <u>na</u> sq. ft.	
A9. For a building with an attached garage: a) Square footage of attached garage: <u>na</u> sq. ft. b) Is there at least one permanent flood opening on two different sides of the attached garage? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>na</u> Engineered flood openings: <u>na</u> d) Total net open area of non-engineered flood openings in A9.c: <u>na</u> sq. in. e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructions): <u>na</u> sq. ft. f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): <u>na</u> sq. ft.	

**SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

B1.a. NFIP Community Name: <u>Unincorporated</u>	B1.b. NFIP Community Identification Number: <u>485458</u>		
B2. County Name: <u>Brazoria</u>	B3. State: <u>TX</u>	B4. Map/Panel No.: <u>48039C / 0585</u>	B5. Suffix: <u>K</u>
B6. FIRM Index Date: <u>12/30/2020</u>	B7. FIRM Panel Effective/Revised Date: <u>12/30/2020</u>		
B8. Flood Zone(s): <u>AE</u>	B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): <u>27</u>		
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: <input type="checkbox"/> FIS <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other: _____			
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			
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

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#### 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, AO, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO, A99. Complete Items C2.a–h below according to the Building Diagram specified in Item A7. In Puerto Rico only, enter meters.  
 Benchmark Utilized: C-757 Vertical Datum: NAVD 1988

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929  NAVD 1988  Other: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE. Conversion factor used?  Yes  No  
 If Yes, describe the source of the conversion factor in the Section D Comments area.

Check the measurement used:

- |   |             |  |                                 |
|---|-------------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor): _____  |             | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| b) Top of the next higher floor (see Instructions): _____   |             | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (see Instructions): _____  |             | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| d) Attached garage (top of slab): _____   |             | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area): _____ |             | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| f) Lowest Adjacent Grade (LAG) next to building: <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Finished                    | <u>25.7</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest Adjacent Grade (HAG) next to building: <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Finished                   | <u>26.5</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Finished LAG at lowest elevation of attached deck or stairs, including structural support: _____   |             | <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 state 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 and describe in the Comments area.

Certifier's Name: Randy L. Stroud License Number: 2112

Title: Registered Professional Land Surveyor

Company Name: Randy L. Stroud, P.E.

Address: 201 South Velasco

City: Angleton State: TX ZIP Code: 77515

Telephone: (979) 849-3141 Ext.: \_\_\_\_\_ Email: r\_stroud@sbcglobal.net

Signature: Randy L Stroud Date: 04/02/2025



Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and description of any attachments):  
 For a benchmark we chiseled a square in the concrete road at Southwest corner of property. The elevation of the chiseled square is 26.9'. Brazoria County requires 27+ 2 = 29.00' Finished floor elevation.



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City: <u>Angleton</u> State: <u>TX</u> ZIP Code: <u>77515</u>	Policy Number: _____ Company NAIC Number: _____

#### SECTION G – COMMUNITY INFORMATION (RECOMMENDED FOR COMMUNITY OFFICIAL COMPLETION)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Section A, B, C, E, G, or H of this Elevation Certificate. Complete the applicable item(s) and sign below when:

- 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 state law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.a.  A local official completed Section E for a building located in Zone A (without a BFE), Zone AO, or Zone AR/AO, or when item E5 is completed for a building located in Zone AO.
- G2.b.  A local official completed Section H for insurance purposes.
- G3.  In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E and H.
- G4.  The following information (Items G5–G11) is provided for community floodplain management purposes.
- G5. Permit Number: \_\_\_\_\_ G6. Date Permit Issued: \_\_\_\_\_
- G7. Date Certificate of Compliance/Occupancy Issued: \_\_\_\_\_
- G8. This permit has been issued for:  New Construction  Substantial Improvement
- G9.a. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_  feet  meters Datum: \_\_\_\_\_
- G9.b. Elevation of bottom of as-built lowest horizontal structural member: \_\_\_\_\_  feet  meters Datum: \_\_\_\_\_
- G10.a. BFE (or depth in Zone AO) of flooding at the building site: \_\_\_\_\_  feet  meters Datum: \_\_\_\_\_
- G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member: \_\_\_\_\_  feet  meters Datum: \_\_\_\_\_
- G11. Variance issued?  Yes  No If yes, attach documentation and describe in the Comments area.

The local official who provides information in Section G must sign here. *I have completed the information in Section G and certify that it is correct to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.*

Local Official's Name: \_\_\_\_\_ Title: \_\_\_\_\_

NFIP Community Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Ext.: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information in Sections A, B, D, E, or H):

# ELEVATION CERTIFICATE

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City: <u>Angleton</u> State: <u>TX</u> ZIP Code: <u>77515</u>	Policy Number: _____
	Company NAIC Number: _____

## SECTION H – BUILDING'S FIRST FLOOR HEIGHT INFORMATION FOR ALL ZONES (SURVEY NOT REQUIRED) (FOR INSURANCE PURPOSES ONLY)

The property owner, owner's authorized representative, or local floodplain management official may complete Section H for all flood zones to determine the building's first floor height for insurance purposes. Sections A, B, and I must also be completed. Enter heights to the nearest tenth of a foot (nearest tenth of a meter in Puerto Rico). *Reference the Foundation Type Diagrams (at the end of Section H Instructions) and the appropriate Building Diagrams (at the end of Section I Instructions) to complete this section.*

H1. Provide the height of the top of the floor (as indicated in Foundation Type Diagrams) above the Lowest Adjacent Grade (LAG):

a) For Building Diagrams 1A, 1B, 3, and 5–8. Top of bottom \_\_\_\_\_  feet  meters  above the LAG floor (include above-grade floors only for buildings with crawlspaces or enclosure floors) is:

b) For Building Diagrams 2A, 2B, 4, and 6–9. Top of next \_\_\_\_\_  feet  meters  above the LAG higher floor (i.e., the floor above basement, crawlspace, or enclosure floor) is:

H2. Is all Machinery and Equipment servicing the building (as listed in Item H2 instructions) elevated to or above the floor indicated by the H2 arrow (shown in the Foundation Type Diagrams at end of Section H instructions) for the appropriate Building Diagram?

Yes  No

## SECTION I – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and H must sign here. *The statements in Sections A, B, and H are correct to the best of my knowledge. Note: If the local floodplain management official completed Section H, they should indicate in Item G2.b and sign Section G.*

Check here if attachments are provided (including required photos) and describe each attachment in the Comments area.

Property Owner or Owner's Authorized Representative Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Ext.: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

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**ELEVATION CERTIFICATE**  
**IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11**  
**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

**FOR INSURANCE COMPANY USE**

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:

471 Buffalo Trail

Policy Number: \_\_\_\_\_

City: Angleton State: TX ZIP Code: 77515

Company NAIC Number: \_\_\_\_\_

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.

Photo One

Photo One Caption:

Clear Photo One

Photo Two

Photo Two Caption:

Clear Photo Two

**ELEVATION CERTIFICATE**  
**IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11**  
**BUILDING PHOTOGRAPHS**

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Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:

471 Buffalo Trail

City: Angleton

State: TX

ZIP Code: 77515

**FOR INSURANCE COMPANY USE**

Policy Number: \_\_\_\_\_

Company NAIC Number: \_\_\_\_\_

Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.

Photo Three

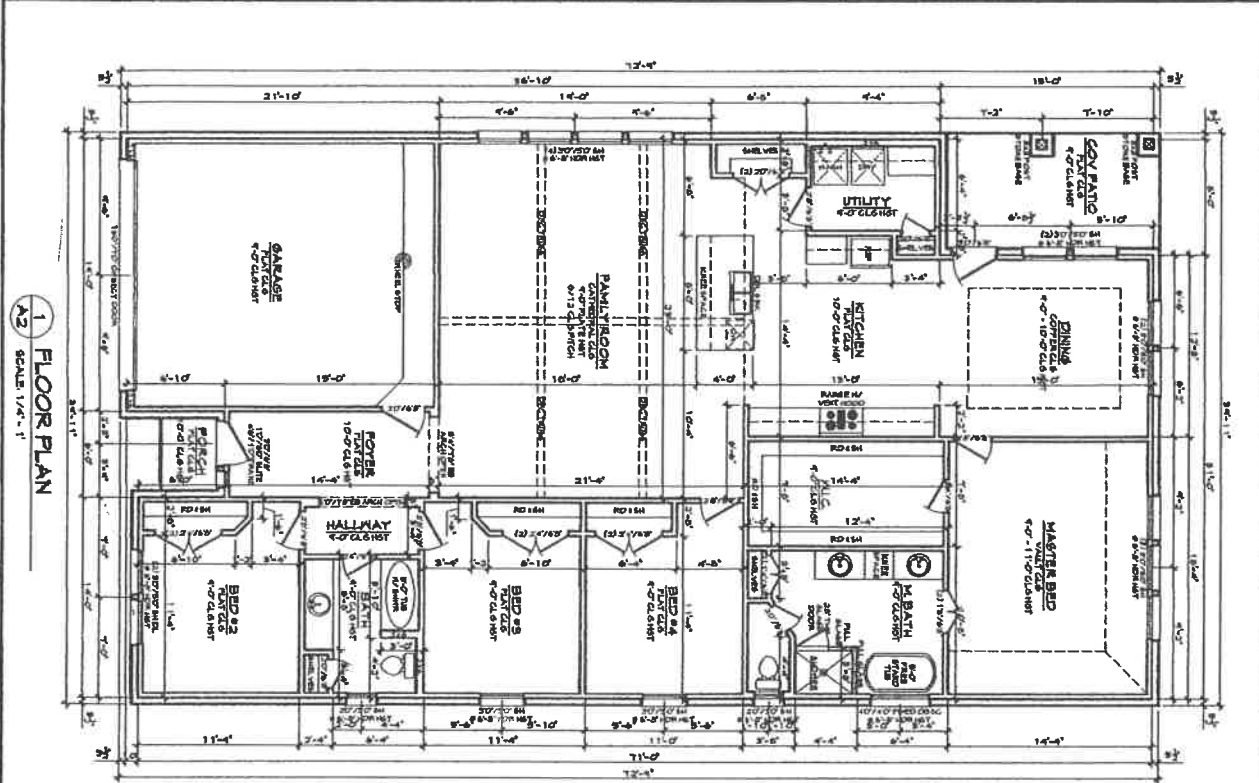
Photo Three Caption:

Clear Photo Three

Photo Four

Photo Four Caption:

Clear Photo Four



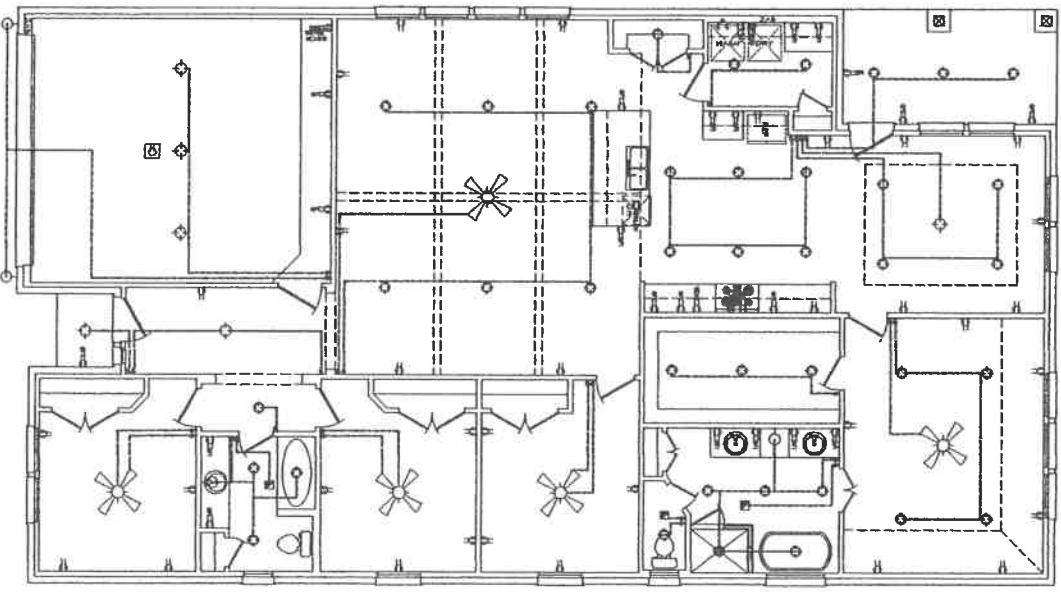
1 FLOOR PLAN  
SCALE 1/4" = 1'

ABBREVIATIONS

SYMBOL	DESCRIPTION
[Symbol]	RECESSED LIGHT FIXTURE
[Symbol]	CEILING MOUNTED LIGHT FIXTURE
[Symbol]	WALL MOUNT LIGHT FIXTURE
[Symbol]	VENT
[Symbol]	SMOKE DETECTOR
[Symbol]	320 V. DUPLEX RECEPT OUTLET
[Symbol]	110 V. DUPLEX RECEPT OUTLET
[Symbol]	110 V. FLOOR OUTLET
[Symbol]	GROUND FAULT INTERRUPTER (GFI) RECEPT OUTLET
[Symbol]	WATER PICOV OUTLET
[Symbol]	SINGLE POLE SWITCH
[Symbol]	2 WAY SWITCH
[Symbol]	3 WAY SWITCH WITH DIMMER
[Symbol]	2 WAY SWITCH GARAGE DOOR
[Symbol]	3 W. DOOR BELL
[Symbol]	CHIME
[Symbol]	TELEVISION JACK
[Symbol]	PHONE JACK
[Symbol]	GAS LINE CONNECTION
[Symbol]	GARAGE DOOR OPENER
[Symbol]	JUNCTION BOX
[Symbol]	FLOOR LIGHTS
[Symbol]	FLUORESCENT LIGHTS
[Symbol]	CEILING FAN

ELECTRICAL NOTES:  
 -SMOKE DETECTORS IN ALL BED ROOMS REQUIRE 110V TO HOUSE  
 -WIRING BATTERY BACKUP INTERCONNECT  
 -WIRING ALL EXHAUST FANS TO OUTSIDE  
 -REVERSE LIGHT FIXTURES & SMOKE DETECTORS AT WATER HEATER & CUPBNT  
 -PROVIDE ELECTRIC DISCONNECT AT A/C UNIT

2 ELECTRICAL  
SCALE 1/4" = 1'



**FLOOR PLAN**  
**LEON HOMES AND PROPERTIES**  
 471 BUFFALO TRAIL - BAR X RANCH  
 JOB # 20244475

12-16-24  
 A2

REVISION HISTORY  
 NUMBER DATE

DWG. SCALE  
 1/4" = 1'

*Moonlight House*  
 Plans  
 978-482-1987

THIS PLAN IS TO BE USED AS A GUIDE ONLY. THE CONTRACTOR SHALL BE RESPONSIBLE FOR VERIFYING ALL DIMENSIONS AND CONDITIONS ON THE JOB. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR PROTECTING ALL EXISTING UTILITIES AND STRUCTURES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE SAFETY OF ALL PERSONNEL AND THE PUBLIC. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF THE ENVIRONMENT. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL ADJACENT PROPERTIES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL NEIGHBORS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC UTILITIES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE UTILITIES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC RECORDS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE RECORDS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC INFORMATION. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE INFORMATION. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC ASSETS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE ASSETS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC INTERESTS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE INTERESTS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC RIGHTS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE RIGHTS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC DUTIES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE DUTIES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC OBLIGATIONS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE OBLIGATIONS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC LIABILITIES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE LIABILITIES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC DEFENSES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE DEFENSES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC OFFENSES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE OFFENSES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC CRIMES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE CRIMES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC TORTS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE TORTS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC CONTRACTS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE CONTRACTS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC AGREEMENTS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE AGREEMENTS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC OBLIGATIONS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE OBLIGATIONS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC LIABILITIES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE LIABILITIES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC DEFENSES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE DEFENSES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC OFFENSES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE OFFENSES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC CRIMES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE CRIMES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC TORTS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE TORTS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC CONTRACTS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE CONTRACTS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PUBLIC AGREEMENTS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL PRIVATE AGREEMENTS.

IRC Registration for Builders / Contractors - Effective as of 7-1-2010

Date: 4-7-2025

IRC # 564

Name of Company: Leon Homes and properties LLC

Owner: David Leon

Address: ~~Box~~ 17510 Julia Avenue, Needville, TX

Phone: work: 713-514-3217 Cell: \_\_\_\_\_

Email: david1314leon@gmail.com



**BRAZORIA COUNTY**

**NOTICE OF RESIDENTIAL CONSTRUCTION  
INSPECTION COMPLIANCE  
IN UNINCORPORATED AREA**

**(TO BE SUBMITTED BY BUILDER)**

4.7.25  
Received

2025-72  
Related OSSF  
Application #

52802  
Permit #

564  
IRC #

BUILDERS NAME: David Leon

**PROJECT INFORMATION**

**TYPE OF CONSTRUCTION: (Check One)**

- 1) New Residential Construction on a vacant lot
- 2) Addition to an Existing Residential Unit

**NOTE:** *If a property lies in an ETJ it is required to contact the city hall for appropriate building codes.*

**LOCATION:**

Address 471 Buffalo

Lot and Block # 37, 3 Subdivision Bar X ranch

or Survey \_\_\_\_\_ Tract/Acreage 0.98

or Deed Reference \_\_\_\_\_ Property ID (MCAD)# \_\_\_\_\_

**RESIDENTIAL CODE USED IN CONSTRUCTION:**

- 1) INTERNATIONAL RESIDENTIAL CODE – published 2021   
date