

8074

# 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 <b>TY FOSTER &amp; CHRISTINE FOSTER</b>				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>403 WEST SHORE DRIVE</b>				Company NAIC Number:	
City <b>CLEAR LAKE SHORES TX</b>		State <b>TX</b>		ZIP Code <b>77565</b>	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>LOTS 1432, 1433 AND 1434, CLEAR LAKE SHORES</b>					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>RESIDENTIAL</b>					
A5. Latitude/Longitude: Lat. <b>29°32.846</b> Long. <b>95°02.096</b> 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 <b>6</b>					
A8. For a building with a crawspace or enclosure(s):					
a) Square footage of crawspace or enclosure(s) <b>135</b> sq ft					
b) Number of permanent flood openings in the crawspace or enclosure(s) within 1.0 foot above adjacent grade <b>3</b>					
c) Total net area of flood openings in A8.b <b>216</b> 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 <b>NA</b> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>NA</b>					
c) Total net area of flood openings in A9.b <b>NA</b> 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 <b>CLEAR LAKE SHORES 485461</b>			B2. County Name <b>GALVESTON</b>		B3. State Texas <b>TX</b>
B4. Map/Panel Number <b>48167C 0041</b>	B5. Suffix <b>G</b>	B6. FIRM Index Date <b>8/15/19</b>	B7. FIRM Panel Effective/ Revised Date <b>8/15/19</b>	B8. Flood Zone(s) <b>AE</b>	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) <b>140</b>
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 type="checkbox"/> NAVD 1988 <input checked="" type="checkbox"/> Other/Source: <b>NAVD 1988 2021 ADJ.</b>					
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					

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# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expiration Date: November 30, 2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>		<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 403 WEST SHORE DRIVE		Policy Number:
City CLEAR LAKE SHORES TX	State TX	ZIP Code 77565
		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: RM NO. 010015 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: NAVD 1988-2001 ADJ.

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)   | <u>7.1</u>  | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| b) Top of the next higher floor   | <u>18.9</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only)   | <u>NA</u>   | <input type="checkbox"/> feet <input type="checkbox"/> meters            |
| d) Attached garage (top of slab)  | <u>NA</u>   | <input type="checkbox"/> feet <input type="checkbox"/> meters            |
| e) Lowest elevation of machinery or equipment servicing the building<br>(Describe type of equipment and location in Comments) | <u>18.9</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | <u>18.0</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | <u>18.5</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support                                  | <u>NA</u>   | <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 BILLY L. SHANKS	License Number 1821	
Title PROFESSIONAL LAND SURVEYOR		
Company Name SHANKS SURVEYORS		
Address 4902 CAROLINE STREET		
City SEABROOK	State Texas	ZIP Code 77586



Signature <i>Billy L. Shanks</i>	Date 12/21/19	Telephone (281) 808-4789
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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)

C2E IS AIR CONDITIONER & GENERATOR.

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# BUILDING PHOTOGRAPHS

## ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

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City CLEAR LAKE SHORES TX	State TX	ZIP Code 77565	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.

FRONT VIEW  
12/21/19



Photo Three

Photo Three Caption

Clear Photo Three

REAR VIEW  
12/21/19



Photo Four

Photo Four Caption

Clear Photo Four